Evaluation of the Implementation of the Homelessness Reduction Act: Final Report

Ministry of Housing, Communities and Local Government

16 March 2020

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A report submitted by ICF Consulting Services Limited in association with Kantar Public and Heriot-Watt University

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Acknowledgements

Glossary

Acronym	Name
CIH	Chartered Institute of Housing
DHP	Discretionary Housing Payment
DTR	Duty to Refer
DWP	Department for Work and Pensions
ESA	Employment and Support Allowance
GP	General Practitioner
HAST	Homelessness Advice and Support Team
HB	Housing Benefit
H-CLIC	Homelessness Case Level Information Classification
HRA	Homelessness Reduction Act
JCP	Jobcentre Plus
JSA	Jobseeker's Allowance
LA	Local Authority
LGA	Local Government Association
LHA	Local Housing Allowance
MHCLG	Ministry of Housing, Communities and Local Government
PHP	Personalised Housing Plan
PIP	Personal Independence Payment
PRS	Private Rented Sector
RSL	Registered Social Landlord
TA	Temporary Accommodation
UC	Universal Credit

Executive Summary

This is the final report of an evaluation of the implementation of the Homelessness Reduction Act 2017. The evaluation has been conducted for the Ministry of Housing, Communities and Local Government (MHCLG) by ICF working with Kantar Public and Heriot-Watt University.

Introduction

The Homelessness Reduction Act

The Homelessness Reduction Act has been described as the most ambitious reform to homelessness legislation in decades. It represents a profound shift in approach towards earlier prevention and the opening up of support to more people who need it. It also aims to promote an accessible and supportive culture across all local authority housing staff. The Act introduced new duties on local authorities and other public authorities in England, most of which came into force in April 2018:

- A requirement on local authorities to conduct **assessments** and develop **personalised housing plans (PHPs)** with all eligible applicants.

- An **extended prevention duty** requiring local authorities to take reasonable steps to prevent homelessness for applicants threatened with homelessness within 56 days regardless of intentionality, priority need and local connection.

- A **relief duty** requiring local authorities to take reasonable steps to help homeless applicants secure suitable accommodation over a period of 56 days regardless of intentionality and priority need.

- A requirement for local authorities to provide homelessness **information and advice** to anyone in their area (including those not owed a prevention or relief duty).

- A requirement for local authorities to report more detailed case-level data, using a new **H-CLIC** (Homelessness Case Level Information Classification) system.

- The Act also introduced a new **duty to refer**, from October 2018, requiring public authorities to refer people at risk of homelessness to their local authority.

£72.7 million **New Burdens funding** has been allocated to local authorities over three years to support the implementation of the Act. This is in addition to other existing ring-fenced funding that local authorities receive for homelessness provision. A new **Homelessness Advice and Support Team** (HAST) was also created within MHCLG before the Act came into force to provide local authorities with advice and support.

The evaluation

The evaluation aimed to understand how the Act has been implemented in local areas, what has worked well / less well, and what outcomes are being achieved. It did not aim to quantitatively measure the impact of the Act on levels of homelessness. The evaluation methodology included:

- **A survey of local authorities in England**. 224 local authorities completed the survey.

- **18 qualitative local area case studies**. Interviews and group discussions were conducted with 582 individuals (266 local authority staff, 184 service users, and 132 other public authorities and third sector organisations) across the case study areas.

- **Analysis of homelessness statistics**. Using H-CLIC data to assess who has received help and the reported outcomes of this in the first 12 months of the Act.

Findings

How the Act has been implemented in local areas

The ethos and principles behind the Act were strongly welcomed by local authorities. Their highest priorities before its introduction were to ensure they had enough staff in place to respond to expected increases in caseload sizes, were legally compliant with the new duties under the Act and could meet the new H-CLIC data reporting requirements. This was reflected in the types of changes most had introduced in the response to the Act:

- 100% of local authorities reported undertaking **staff training** in the survey. The focus was on preparing staff to deliver the new processes and legal requirements of the Act. Some said that training partly aimed to prepare staff to work in the more accessible and supportive ways envisaged under the Act.

- 92% reported **recruiting new staff**. In most cases, this was to fill additional frontline staff posts. Local authorities either sought to recruit staff from a housing background or, in several cases, took a conscious decision to attract new staff from other backgrounds (and reported some benefits from having done so).

- 88% reported introducing **new IT systems** primarily or exclusively to meet the new H-CLIC data reporting requirements introduced alongside the Act.

- 64% reported **introducing or commissioning new services**. These mainly aimed to expand the measures local authorities had at their disposal to prevent homelessness. Some also introduced new measures for service users who were not previously eligible for support (e.g. singles without children) but are under the Act.

- 63% reported undertaking **measures to increase local affordable housing supply** – although these were described relatively small-scale and/or long-term approaches to tackling wider issues with affordable housing supply reported in some areas.

- 33% reported **other changes and activities**, such as restructuring internal provision (e.g. creating new job roles with specific responsibilities for different parts of the process under the Act) and changing waiting list policies.

The effectiveness of implementation and delivery to date

Local authorities' overall perceptions of how effectively they have responded to the Act were positive: 50% of local authorities in the survey said they had responded very effectively, 48% fairly effectively, and 2% neither effectively nor ineffectively.

Perceptions of effectiveness of implementation and delivery of different elements of the Act:

- **Assessments and PHPs**. The evaluation evidence indicates this new requirement is being delivered by all local authorities, but perceptions were mixed on its impact. Concerns were voiced by several local authorities about the additional time it required to complete for little perceive benefit. Others saw added value in PHPs in providing clarity, consistency, establishing realistic expectations and a sense of reciprocity. Service users were also split between those who had little recollection and/or assigned no value to having a PHP and some who found having a PHP useful (possibly reflecting the mindset of individual service users and the capability of different local authority staff in using PHPs as a tool in effective casework).

- **The extended prevention duty**. This was viewed as the element of the Act that has been most effective in achieving more positive outcomes for more service users. Some local authorities were very active on homelessness prevention prior to the Act, but the extended prevention duty stimulated others to introduce additional preventative

measures, use these with a wider range of service users, and over a longer period of time. Several service users described how the help they received had been effective in preventing them from becoming homeless. Equally, there were some reported challenges in achieving such outcomes with service users with complex needs and where retaining an existing tenancy was not an option.

- **The relief duty**. This was the element of the Act where reported effectiveness varied most between different local areas. The ability of local authorities to relieve homelessness was strongly mediated by the local supply of affordable housing. Local authorities in areas with relatively good supply described cases where suitable accommodation had been secured either straightaway or after a short stay in temporary accommodation. Those in areas with limited supply were much less likely to describe such positive outcomes under the relief duty. As with the prevention duty, challenges were also reported with helping service users with complex needs find (and remain in) suitable accommodation under the relief duty.

- **The advice and information duty**. Local authorities perceived they were meeting the basic requirements of this duty, typically based on pre-existing advice and information provision they already had in place prior to the Act. Equally, there were positive examples of this provision being further enhanced (e.g. through user testing with service users) as part of a local authority's response to the Act.

- **H-CLIC data reporting**. Transitioning to the new case-level data reporting requirements was described as a difficult process, especially when initially introduced. The accuracy, and to an extent the perceived ease, of providing H-CLIC data was reported to have improved over time. 50% of local authorities also said they saw the potential value of H-CLIC data in informing the design and delivery of their provision, although there was little evidence so far of it being actively using it for this purpose.

Key factors mediating effectiveness

Significant challenges in responding to the Act:

- 50% of local authorities cited **insufficient access to affordable housing** as a significant challenge. It was cited as a significant challenge by 68% of London boroughs, but also by over 40% of district, unitary and metropolitan authorities. This reflects its importance in determining the ability of local authorities to effectively help service users under the relief duty, and to a lesser extent the prevention duty.

- 43% cited **administrative burden**. This perceived burden was associated with the new assessment and PHP requirements and the volume of written correspondence with service users expected under the Act. The concern related to additional resource constraints placed on frontline staff and potential time taken away from practical casework with service users.

- Other significant challenges noted by local authorities included meeting the new data requirements associated with H-CLIC reporting, uncertainties associated with future funding or insufficient current funding, and meeting the needs of service users with more or different needs.

Facilitators in responding to the Act:

- 39% cited **central government funding and grants**. Despite concerns about the sufficiency and certainty of future funding, local authorities emphasised that, without the funding they had received, they would not have been able to make the positive progress so far in responding to the Act.

- 28% cited **support from MHCLG's HAST team**. Local authorities reported receiving support from their HAST advisor that included initial advice that had helped to shape planning and preparation for the Act, as well as ongoing advice, support, and sharing of good practice and learning to inform ongoing implementation of the Act. This input was viewed as useful and relevant. HAST advisors having previous experience of working in local authorities and or the homelessness sector was an important perceived part of this.

Now and next for the implementation of the Act

Local authorities were fairly evenly split between those who said they had now implemented all the changes they planned to make in response to the Act (51%) and those who said they had implemented most or some of the changes they planned to make (49%). Despite this, almost all local authorities said there were further changes or activities they planned to introduce in response to the Act in the next 12 months:

- 96% of local authorities in the survey reported planning **further staff training**. This included training for frontline staff to make better use of PHPs, training in conducting more effective casework, and training (in local authorities where this was still perceived to be needed) to reinforce the culture change aspect of the Act across all staff.

- 81% reported planning **additional measures to increase local affordable housing supply**. This reflects the importance of housing supply in mediating the ability of local authorities to achieve positive outcomes for service users under the Act.

- 68% reported planning to **introduce or commission new services**. The focus in these further planned services was on increasing provision for non-priority service users, particularly those with complex needs.

- 55% reported planning to **recruit new staff**. Almost all local authorities had already recruited new staff in preparation for the Act, but several did not think this had been sufficient to meet increased demand and planned further recruitment to address this.

The Duty to Refer

The main activities that local authorities had undertaken to encourage and enable referrals by public authorities under the Duty to Refer were: the provision of information, guidance, meetings, briefings and light-touch training for public authorities about the new duty; and the creation of new referral processes for public authorities to use.

Local authorities with pre-existing homelessness forums, working groups and/or joint working relationships with local public authorities thought this had been of benefit in enabling them to promote the duty to refer more quickly and effectively. Some local authorities also reported introducing colocation and secondment arrangements with public authorities, which was an effective means of facilitating referrals under the new duty.

Jobcentres and probation services were perceived to have responded effectively to the Duty to Refer by over two-thirds of local authorities in the survey – more than any of the other public authorities the duty applies to. This is consistent with H-CLIC data. Perceptions of effectiveness and referral numbers were lowest for adult social services, children's social services, and health providers.

Factors mediating the effectiveness of responses to the Duty to Refer to date include:

- **Public authority perceptions**. The most effective examples of the Duty to Refer working in practice, and the highest reported volumes of referrals, were characterised by a belief amongst public authority staff that making a referral could benefit both the referring organisation and the service user. Positive perceptions were also typically reinforced by

real examples of clients who had been referred and helped by the local authority. This requires some form of feedback after referrals are made.

- **Public authority (and local authority) resources**. A perceived lack of time and staff resource was cited as the main reason why certain public authorities (notably adult and children's social services) in certain areas were not making referrals under the Duty to Refer. Local authorities also indicate constraints on the extent to which they could devote staff resource to engaging with public authorities on the Duty to Refer due to competing demands from the implementation of other elements of the Act.

- **Post-referral collaboration**. The Duty to Refer does not require public authorities to engage further with housing options teams after making a referral. This was an element of the duty that several local authority staff and some public authority staff said they would like to see changed. Joint casework and other forms of collaboration were perceived to be the ideal means of securing positive outcomes for service users that were referred - especially those with more complex and multiple needs.

Most local authorities planned to carry out further activities in future to encourage and enable public authorities in their area make referrals under the Duty to Refer and 80% expected referral numbers to increase over the next 12 months. Wider measures suggested to support the effectiveness of the Duty to Refer included: expanding the scope of the Duty to Refer to a Duty to Collaborate, further promotion by MHCLG at a national level, and adding to the public authorities currently subject to the Duty to Refer.

Emerging outcomes under the Act

H-CLIC data shows that in the first 12 months of the Act, **263,720 households were accepted as being owed a prevention or relief duty in England**. In line with one of the key aims of the Act, a high proportion of these were non-priority households that may not have received help from their local authority under the previous legislation:

- **58% of households accepted as being owed a prevention duty were singles and couples without dependent children**.

- **76% of households accepted as being owed a relief duty were singles and couples without dependent children**.

This indicates the Act has been effective in enabling more people who need it to receive help from their local authority with their housing situation.

H-CLIC data provides further insight into the extent to which positive housing outcomes are being achieved under the prevention and relief duties. Overall, in the first year of the Act:

- **58% of prevention duty cases ended with the household having secured accommodation**.

- **43% of relief duty cases ended with the household having secured accommodation**.

These figures are consistent with the positive reflections that local authorities had on the extended prevention duty but also the challenges some described in achieving positive outcomes (especially under the relief duty) due to limited affordable housing supply in their local area. Reflecting this, outcomes under both duties were lowest in London boroughs:

- **51% of prevention duty cases ended with the household having secured accommodation in London boroughs** compared to 58% for all local authorities.

- **31% of relief duty cases ended with the household having secured accommodation in London boroughs** compared to 43% for all local authorities.

However, affordable housing supply is not a challenge exclusive to London boroughs. Some unitary, metropolitan and district authorities also reported it being a significant local challenge which constrained their ability to achieve positive outcomes under the Act.

Service user reflections on their experiences of engaging with local authorities since the Act came in were strongly mediated by whether they were able to secure a suitable place live through this engagement. Two other factors were also central to their experience:

- **How they felt they were treated**. Many service users described positive experiences of the ethos of the Act being delivered in practice. They said they had felt listened to, and respected, by someone who genuinely wanted to help them. However, some negative experiences were also described in most of the areas where the case study research was conducted, including areas where the local authority perceived it had effectively embedded the right ethos amongst their staff. In these areas, experiences seemed to vary at the level of individual members of staff. This suggests that despite the positive culture change being reported by local authorities, the ethos of the Act is not yet universally embedded across all staff in every local authority.

- **Communication**. Service users wanted to know what was happening with their case after their initial engagement with the local authority and the development of a PHP. Not all felt they had been kept sufficiently updated and found it difficult to establish this when they tried to ask. Most expressed a definite preference for face-to-face and telephone contact as well as, or instead of, written correspondence from the local authority.

Conclusions and Recommendations

Conclusions

Progress has been made against all intended outcomes of the Act, but it is the extended prevention duty that stands out as the clearest area of positive impact in terms of tackling homelessness. More people who were previously classed as non-priority are now able to receive help to prevent and relieve homelessness.

There is considerable scope, though, for further progress on the other intended outcomes of the Act. The basic building blocks for local authorities to discharge their duties under the Act are largely in place (i.e. staff, training, processes, IT systems). It is logical that this has been the focus in the period up to and after the Act was introduced.

There are areas that are incremental or longer-term in nature, such as the development of the workforce, engagement with other public authorities under the Duty to Refer and reconfiguration of services to provide the most effective support under the Act. There is some evidence that local authorities have shifted focus towards these areas over time, but it is clear that more work needs to be done to move from compliance to effective delivery.

Recommendations

Recommendations for MHCLG:

1. **Extend New Burdens funding and update the allocation approach** as the existing model has been insufficient to mitigate additional costs from large caseload increases (or account for the complexity of cases)

2. **Maintain or enhance the existing HAST function**.

3. **Provide additional tools and guidance to support local authorities in analysing the H-CLIC data** and therefore realising its benefits

4. **Consider building more flexibility into requirements of the Act** specifically in terms of the scope of mandatory H-CLIC data fields and extent of correspondence requirements

5. **Further promotion of the Duty to Refer at national level**.

6. **Future review of the scope of the Duty to Refer in terms of which public authorities it applies to and possible reformulation as a 'Duty to Collaborate'**.

Recommendations for local authorities:

7. **Conduct additional training to reinforce culture and casework**, with specific focus on how to conduct effective prevention and relief casework with different types of service user (and how to effectively use the PHP as a tool in this context).

8. **Get input and feedback on service user experiences** to avoid disconnect in perceptions of service quality and understand priorities for service improvement.

9. **Consider more senior staff recruitment**, including widening the recruitment base (as has happened with frontline staff) to strengthen the skills mix and increase capacity for managing the more complex aspects of the Act.

10. **Undertake further review/reflection on homelessness service expenditure**, reflecting that the while current differences in process and cost allocation reflect the complexities of service design / local needs, they also provide scope for future refinement based on best practices in other LAs.

11. **Provide feedback to public authorities on referrals** as a means of ensuring effective future referrals under the Duty to Refer.

Recommendations for other national government departments and agencies:

12. **Introduce national guidelines and monitoring arrangements around the Duty to Refer** to promote more consistent and effective engagement amongst public authorities in all local areas.

1 Introduction

This is the final report of an evaluation of the implementation of the Homelessness Reduction Act 2017. The Act introduced new duties on local authorities and other public authorities in England concerning how they address homelessness and the risks of homelessness. It aims to reduce homelessness by promoting earlier and more preventative support for all those affected, not just those who have priority need. Most of the new duties under the Act came into force on the 3rd of April 2018.

The primary research for the evaluation was conducted between July and October 2019 – 15 to 18 months on from this point. The focus of the evaluation has been on understanding how the Act has been implemented and delivered to date in different local areas to provide learning to inform implementation going forward. The evaluation has been conducted for the Ministry of Housing, Communities and Local Government by ICF working with Kantar Public and Heriot-Watt University.

1.1 The Homelessness Reduction Act

1.1.1 Background to the Act

The Homelessness Reduction Act has been described as the most ambitious reform to homelessness legislation in decades. Prior to the Act, the main statutory duty on local authorities in England was to provide support to people who were unintentionally homeless and in priority need. An independent review convened by Crisis in 2015[1] highlighted a lack of help in many local areas for people who did not meet these criteria (namely single people and couples without dependent children). The review recommended new legislation similar to the then recently passed Housing (Wales) Act 2014 requiring English local authorities to provide earlier, more inclusive and meaningful assistance to all. The recommendations directly informed a Private Members Bill sponsored by backbench MP Bob Blackman which, with cross-party support, received royal assent in April 2017.

Alongside the progression of the Act through parliament, £20m funding was provided to 28 areas to trial innovative approaches to prevention through the Homelessness Prevention Trailblazers programme. The two-year programme was launched in December 2016 and over 100 local authorities participated[2].

1.1.2 What the Act is trying to achieve

The overall objective of the Act is to reduce homelessness by enabling all people at risk or already homeless to access help from a local authority and by ensuring this help is delivered earlier than under the previous legislation. The intention is that by doing this, fewer people will reach a crisis-point at which local authorities are legally required to provide housing to those who meet the criteria for intentionality and priority need[3]. The Act also aims to promote a change in culture away from the gate-keeping of homelessness provision and towards a more accessible, supportive, and preventative ethos across all local authorities.

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[1] https://www.crisis.org.uk/media/20606/crisis_the_homelessness_legislation_2015.pdf

[2] https://www.gov.uk/government/publications/homelessness-prevention-trailblazers-evaluation

[3] Although the new prevention and relief duties introduced through the Act are "priority blind", the remaining statutory main duty is still only owed to those who are unintentionally homeless and in priority need.

1.1.3   The different elements of the Act

As a whole the Act represents a profound shift in approach towards earlier intervention and prevention, and the opening up of support to more people who need it, irrespective of their intentionality or priority need status. Within this there are several different elements to the Act, summarised here:

- **Assessments and Personalised Housing Plans (PHPs)**. Local authorities are required to conduct an initial assessment with all eligible applicants. The assessment should include the circumstances that caused them to become homeless or threatened with homelessness, and their housing and support needs. Once an assessment has been completed a PHP must be developed with the applicant, which sets out the steps that they and the local authority will take to help them remain in or find suitable accommodation. PHPs should be regularly reviewed and updated by local authorities, and any changes communicated to the applicant.

- **The extended prevention duty**. Local authorities are required to take reasonable steps to prevent homelessness for any eligible applicant threatened with homelessness within 56 days and regardless of priority need, intentionality or local connection. This is an extension of the previous "threatened with homelessness" period of 28 days, and is intended to enable local authorities to intervene earlier and have more time to do prevention work.

- **The new relief duty**. If homelessness has not been prevented under the prevention duty, or if the applicant is already homeless at the point of their assessment, then local authorities must take reasonable steps to help them secure suitable accommodation over a period of 56 days regardless of priority need or intentionality. If the applicant is in priority need then the local authority should also secure interim accommodation for them during the relief duty.

- **The advice and information duty**. Local authorities are required to provide information and advice to anyone in their area (including those who are not owed a prevention or relief duty) about preventing homelessness, securing accommodation, their rights, the available support in the local area, and how to access this. The information and advice must be accessible and meet the needs of different groups in the local community.

- **Other changes**. The Act has given service users greater rights to request a review if they are not happy with how their case has been handled by a local authority and requires local authorities to carry out property suitability checks to ensure that accommodation secured for service users meets their needs.

These elements of the Act came into force in April 2018. Alongside this, the homelessness data that local authorities are required to provide to MHCLG each quarter was also changed. Previously local authorities were required to provide aggregated P1E data on a small number of indicators. They are now required to provide more detailed case-level data through a new **H-CLIC** (Homelessness Case Level Information Classification) system.

1.1.4   The Duty to Refer

The Act also introduced a new Duty to Refer, which came into force in October 2018. This duty applies to the following public authorities:

- Prisons and Youth offender institutions
- Jobcentres
- Adult social services

- Secure training centres
- Secure colleges
- Youth offending teams
- Probation services (including community rehabilitation companies)

- Children's social services
- Emergency departments and Urgent treatment centres
- Hospitals, in their function of providing inpatient care

The duty requires these public authorities to refer (with their consent) details of any person they are aware of who is at risk of homelessness to the relevant local authority. Its intention is to provide "an impetus to develop effective referral arrangements and accommodation pathways that involve all relevant agencies to provide appropriate jointly planned help and support to prevent homelessness"[4].

1.1.5 Support for the implementation of the Act

1.1.5.1 Financial support

£72.7 million New Burdens funding has been allocated to local authorities to support the implementation of the Act. Each local authority has been allocated funding for three years (2017/18, 2018/19 and 2019/20) by MHCLG based on estimated unit costs for the two of the main elements of the Act (prevention and relief duties), combined with assumptions in caseload growth and the added costs of individual requirements. The allocations range from over £1m for the larger London boroughs to under £50,000 for small district councils. The three-year duration of the funding is predicated on local authorities, over time, making increasing savings which offset additional costs arising from the Act. Early and more effective prevention is expected to reduce the size of their statutory main duty caseloads, and it is assumed that prevention cases have a lower cost than main duty cases[5].

Local authorities also received an equal share of £3m (£9,202 per local authority) to support IT upgrades and the transition from P1E to H-CLIC in December 2017.

The New Burdens and IT funding is in addition to ring-fenced funding that local authorities receive to address homelessness. £186m in 2017/18, £191m in 2018/19 and £200m in 2019/20 has been allocated to local authorities through the Flexible Homelessness Support Grant[6]. £237m has also been assigned to homelessness prevention over the same period in the Local Government Finance Settlement[7].

1.1.5.2 Non-financial support

In 2017 MHCLG created a new Homelessness Advice and Support Team (HAST) to provide local authorities with advice and support on homelessness in general and specifically around the implementation of the Act. Members of the team were recruited from local authorities and homelessness charities, and each has a number of local authorities they have been responsible for advising and supporting. Prior to the Act coming into force, MHCLG also issued a detailed code of guidance for local authorities[8] which has been further updated over time and guidance on the new H-CLIC data reporting requirements[9].

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[4] https://www.gov.uk/guidance/homelessness-code-of-guidance-for-local-authorities

[5] https://www.gov.uk/government/publications/homelessness-reduction-act-new-burdens-funding

[6] https://www.gov.uk/government/publications/flexible-homelessness-support-grant-2019-to-2020

[7] https://www.gov.uk/government/publications/core-spending-power-final-local-government-finance-settlement-2019-to-2020

[8] https://www.gov.uk/guidance/homelessness-code-of-guidance-for-local-authorities

[9] https://gss.civilservice.gov.uk/wp-content/uploads/2018/05/H_CLIC_v1.4.1_guidance.pdf

1.1.6 A theory of change for the Act

Figure 1.1 presents the high-level theory of change for the Act developed in the scoping stage of the evaluation. It sets out the rationale, inputs and activities associated with the implementation of the Act and its intended outputs, outcomes and impacts.

Figure 1.1   Homelessness Reduction Act 2017 theory of change

Rationale

- Little protection for single people and other groups who do not have priority need or who are 'intentionally homeless'
- Provision of homelessness support only shortly before or at crisis point
- Advice and support not tailored to the individual's (potentially multiple) needs
- A lack of more general information and advice for all residents potentially at risk of homelessness
- Limited proactive co-ordination between LAs and other public authorities to help people who need it access support with their housing situation
- Aggregate reporting of homelessness statistics, providing limited insights to inform delivery

Inputs / activities

MHCLG
- New Burdens and other homelessness prevention funding for LAs to implement Act
- Advice and support for LAs delivered by HAST team

Local Authorities
- Planning and preparation for how they would respond introduction of the Act
- Implementation of new responsibilities under Act:
  - Extended prevention duty
  - Relief duty
  - Assessments and PHPs
  - General Information and advice
  - H-CLIC

Public Authorities
- Planning and implementation of measures to meet their responsibilities under new Duty to Refer

Outputs

- Delivery of preventative support to those at risk of homelessness within 56 days
- Delivery of homelessness relief activities for 56 days
- Delivery of assessments and PHPs to/with service users
- Delivery of enhanced general information and advice
- Recording and reporting of H-CLIC data
- Referrals made by public authorities to LAs

Outcomes

Service users
- All people are able to access homelessness advice and information, which they can understand and find useful
- Service users feel listened to and understand what steps they and the LA will take to address their situation
- More people (especially singles and couples without children) who need it receive help to prevent and relieve homelessness
- Service users receive help to prevent and relieve homelessness earlier and it is more effective

Local Authorities
- Better practice followed to prevent and relieve homelessness
- More people at risk are identified and supported earlier
- Greater understanding of local homelessness to inform delivery
- Change in culture towards more preventative and supportive ethos

Public authorities
- Collaboration and co-ordination of services
- Increased capacity and efficiencies of partnership working

Impacts

- Reduction in number of people becoming homeless
- Increase in number of people relieved of homelessness
- Service users have better experiences of engaging with LA homelessness services
- Decrease in number of people requiring main duty support (and resultant savings for LAs)

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1.2 The evaluation

1.2.1 Aims

The aims of the evaluation set out in the MHCLG statement of requirements were to:

- **Outline how the Act has been implemented and the reasons it has been implemented in these ways;**
- **Identify which aspects of implementation and delivery have worked well / less well;**
- **Consider delivery of the Act to date and how it is likely to evolve in future;**
- **Provide early evidence to understand how the duty to refer has been implemented; and**
- **Understand what outcomes are being achieved under the Act and why.**

The evaluation was not commissioned to provide a quantitative measure of the impact of the Act on levels of homelessness.

1.2.2 Methodology

A combination of methods were used in the evaluation to address its different aims and triangulate findings. This included a survey completed by over two-thirds of the local authorities in England and qualitative research with 600 service users, local authority staff, public authorities, and local and national stakeholders. The different components of the evaluation are described here.

1.2.2.1 Scoping research

At the start of the evaluation, existing evidence on the implementation of the Act was reviewed and ten interviews were conducted with MHCLG policy and delivery leads, homelessness charities and other sector bodies. The purpose of this was to inform the design of the subsequent research and analysis conducted in the evaluation. Based on the findings from the scoping research a theory of change for the Act (see Figure 1.1), an overarching evaluation framework, a survey questionnaire, qualitative topic guides, and a cost data collection tool were designed.

1.2.2.2 Survey of local authorities

In July and August 2019 a telephone survey was conducted with local authorities in England. All local authorities with a housing duty were approached to take part in the survey, using an MHCLG database of contacts. The respondents in the survey were either a director, manager or head of housing in the local authority (or the equivalent in an Arms-Length Management Organisation in areas where they were contracted to deliver homelessness services).

The purpose of the survey was to collect high-level evidence from a representative sample of local authorities on how far they thought they were in implementing the Act in their local area, what changes they had introduced, and perceived effectiveness and outcomes to date.

A total of 224 local authorities completed the survey. Table 1.1 shows the characteristics of the achieved sample.

Table 1.1 Local authority survey sample

Characteristics	N=224
Local authority type	
District	151
Unitary	34
Metropolitan district/borough	23
London borough	16
Region	
North	52
Midlands	89
South	83
New Burdens funding (total for 3 years)	
Less than £50,000	28
£50,000-£100,000	78
More than £100,000	115
N/A	3
Trailblazer status	
Trailblazer	65
Non-trailblazer	156
N/A	3

The achieve sample was a close match for the profile of all local authorities in England with a housing duty but the survey results were also weighted to ensure they were fully representative of this wider population.

1.2.2.3 Local area case studies

Qualitative case study research was conducted in 18 local areas between July and October 2019. The purpose of this component of the evaluation was to explore in detail the implementation and delivery of the Act in local areas, and to do so from multiple perspectives in each area. A sample of local areas was purposively selected to represent different area characteristics. A small number of local authorities (3) that were approached to participate in the research said they did not feel able to due to internal resource constraints. In these instances an alternative local authority with similar characteristics was selected.

Table 1.2 gives an overview of the final sample of 18 case study areas.

Table 1.2 Case study areas

Area	Local authority type	Region	Total 3yr New Burdens funding	Trailblazer status
Blackburn and Darwen	Unitary	North West	£116,765	Trailblazer
Charnwood	District	East Midlands	£89,166	Trailblazer
Cornwall	Unitary	South West	£697,152	Non-trailblazer
Dudley	Metropolitan	West Midlands	£303,237	Non-trailblazer

Area	Local authority type	Region	Total 3yr New Burdens funding	Trailblazer status
Fenland	District	East	£170,792	Trailblazer
Gateshead	Metropolitan	North East	£147,587	Non-trailblazer
Hackney	London borough	London	£1,379,724	Non-trailblazer
Haringey	London borough	London	£1,235,883	Trailblazer
Harrogate	District	Yorkshire & Humber	£43,711	Non-trailblazer
Hart	District	South East	£34,860	Trailblazer
Hillingdon	London borough	London	£783,103	Non-trailblazer
Leeds	Metropolitan	Yorkshire & Humber	£561,071	Non-trailblazer
North Warwickshire	District	West Midlands	£43,336	Trailblazer
Plymouth	Unitary	South West	£371,876	Non-trailblazer
Rochford	District	South East	£63,536	Trailblazer
South Derbyshire	District	East Midlands	£49,679	Non-trailblazer
Stockton-on-Tees	Unitary	North East	£136,039	Trailblazer
Stoke-on-Trent	Unitary	West Midlands	£361,812	Non-trailblazer

Qualitative interviews and group discussions were conducted with a total of 582 individuals across the 18 case study areas. This included:

■ 125 local authority managers, senior staff and elected members;

■ 141 frontline local authority staff;

■ 132 staff from local public authorities and third sector organisations; and

■ 184 service users.

Service users were recruited from individuals that staff at local authorities and third sector organisations had come into contact with since the Act came into force. With the consent of the individual, staff either introduced them to a member of the research team or shared their contact details to enable an interview to be arranged. At the time they were interviewed, service users were generally either in the prevention or relief duty stage or had been through one or both stages in the last 12 months. Targets were not set in advance for the number of service users to be recruited with particular characteristics but the achieved sample provides reasonable representation of different groups, as illustrated in Table 1.3.

Table 1.3   Service users interviewed

Characteristics	N=185
Circumstances when came into contact with local authority:	

Characteristics	N=185
Threatened with homelessness	46%
Homeless	54%
How came into contact with local authority:	
Self-referral	73%
Referred from another organisation	37%
Age:	
Under 30	33%
30 to 49	50%
Over 50	17%
Gender:	
Male	48%
Female	52%
Status:	
Single or part of a couple with no children	72%
Single or part of a couple with children	38%

1.2.2.4 Collection of local authority cost data

In addition to the qualitative research conducted for each case study, the participating local authorities were asked to provide data on their expenditure on homelessness provision in the years before and after the Act came into force. The data was required to inform an assessment of the New Burdens funding allocated to local authorities, being undertaken internally by MHCLG analysts. The local authorities were provided with the cost data collection template and accompanying guidance developed in the scoping stage of the evaluation. Members of the research team discussed and gave further guidance to local authority staff during the case studies. Completed templates were also reviewed by the research team and clarified when necessary with the local authority.

Thirteen of the case study local authorities provided cost data, although most of these were not able to complete all of the cells within the template. The local authorities reported finding it difficult to separate out prevention and relief costs (as they typically did not have separate budgets for each and their staff were often doing a mixture of both) and provide costs for different types of prevention and relief activity (as these are not recorded and can vary widely between different service users). Nonetheless, the data provided represents usable evidence to inform the New Burdens assessment.

1.2.2.5 Analysis of homelessness statistics

Data reported by local authorities under the previous P1E requirements and the first four quarters of new H-CLIC data were analysed as part of the evaluation. Due to differences between the P1E and H-CLIC data it is not possible to meaningfully compare local authorities' prevention and relief activities or outcomes before and after the Act came into force.

The analysis has therefore focused on looking at the combined 2018/19 H-CLIC data in its own right, to explore what it can tell us about the nature of homelessness and local authority responses to this in different areas in the first year of the Act.

1.2.2.6 Stakeholder interviews

Interviews were conducted with ten stakeholders (including staff in MHCLG's Homelessness Advice and Support Team, homelessness charities and wider sector bodies) to gain further perspectives on the implementation of the Act, and inform the interpretation and analysis of the evaluation findings.

1.3 Report structure

The report is structured as follows:

- **Chapter 2** presents evidence on how the Act has been implemented in different local areas and what factors have influenced this;

- **Chapter 3** assesses the effectiveness of implementation and delivery of the Act to date, what has worked well / less well, and the role of MHCLG support;

- **Chapter 4** discusses where local areas are now in implementing the Act and future plans;

- **Chapter 5** presents evidence on the implementation, delivery and effectiveness of the Duty to Refer;

- **Chapter 6** reports on the outcomes achieved under the Act; and

- **Chapter 7** provides conclusions and recommendations.

2 How the Act has been implemented to date

This chapter starts by describing the context in local areas before the Act came into force, how local authorities and other organisations initially viewed it, and what planning and preparation they undertook in advance. It then addresses in more detail what changes have been introduced to date in response to the Act.

The focus in this chapter is on the elements of the Act that came into force in April 2018. Findings on the Duty to Refer are reported in Chapter 5.

2.1 The pre-implementation context in local areas

This context is important in understanding how the Act has been implemented to date and also (as discussed in later chapters) perceptions of how effective this has been and the outcomes achieved so far.

Two threads which run throughout the findings of this evaluation are:

1. That the implementation of the Act have been partly shaped by wider historical, contextual and structural factors; and

2. These factors do not all exert the same influence in every local area. This helps to explain why, even within the small sample of 18 local area case studies conducted for this evaluation, the implementation of the Act has varied widely.

2.1.1 The scale and nature of homelessness in local areas

In the five years leading up to the Act **overall levels of homelessness** in England (based on the number of households that local authorities assessed as being unintentionally homeless and in priority need under the statutory homelessness duty) increased by 8% from 52,290 to 56,600. Figure 2.1 illustrates this trend based on the previous P1E statistics reported by local authorities.

Figure 2.1   Households assessed as being statutory homeless in England

Source: MHCLG (2019) Local authorities' action under the homelessness provisions of the Housing Acts, financial years 2004-05 to 2017-18 (revised)

Other broader measures of homelessness (not restricted to intentionality or priority need, and incorporating sofa surfing and other forms of homelessness) indicate higher overall levels of homelessness and a greater increase in this over time. For

example, using the definition of "core homelessness" developed by Heriot-Watt University in research for Crisis there was a 28% increase in homelessness in England between 2010 and 2017, from 120,000 to 153,000[10].

Irrespective of the method of measurement, there are differences in levels in homelessness in different local areas. Inner-city London boroughs and parts of the Midlands and South had the highest overall levels and concentrations of homelessness in the five years leading up to the Act.

Table 2.1 shows the reported levels of statutory homelessness in different types of local authority in the five years leading up to the Act, and Table 2.2 does so for the 18 case study areas in this evaluation to illustrate some of the variation within this.

Table 2.1 Households assessed as being statutory homeless per 1,000 households – by local authority type

Local authority type	2013/14	2014/15	2015/16	2016/17	2017/18
District	1.54	1.66	1.69	1.76	1.78
London borough	4.94	5.06	5.50	4.88	4.11
Metropolitan	2.09	2.03	2.07	2.18	2.27
Unitary	1.87	1.97	2.07	2.20	2.10

Source: MHCLG (2019) Local authorities' action under the homelessness provisions of the Housing Acts, financial years 2004-05 to 2017-18 (revised)

Table 2.2 Households assessed as being statutory homeless per 1,000 households – case study areas

Area	Local authority type	2013/14	2014/15	2015/16	2016/17	2017/18
Blackburn and Darwen	Unitary	0.69	0.6	0.67	0.77	0.9
Charnwood	District	2.52	1.0	1.54	1.74	2.19
Cornwall	Unitary	0.94	1.2	1.04	1.19	1.48
Dudley	Metropolitan	1.15	0.8	0.53	0.45	0.50
Fenland	District	2.32	2.1	2.86	2.40	2.35
Gateshead	Metropolitan	2.10	2.2	2.33	2.60	2.40
Hackney	London Borough	8.51	8.3	9.22	6.95	8.04
Haringey	London Borough	7.14	6.0	5.42	5.95	3.38
Harrogate	District	0.75	1.7	1.96	2.34	1.61
Hart	District	0.61	1.1	0.93	0.75	0.59
Hillingdon	London Borough	2.88	2.9	3.04	2.50	2.32
Leeds	Metropolitan	1.14	1.2	1.53	1.04	0.84
North Warwickshire	District	1.34	2.7	2.88	3.21	4.32
Plymouth	Unitary	2.52	2.4	2.18	2.89	2.56
Rochford	District	2.08	2.1	2.14	2.71	2.29
South Derbyshire	District	1.89	1.5	2.42	2.60	2.92
Stockton-on-Tees	Unitary	0.40	0.1	0.43	.70	0.44

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[10] Crisis (2019) The Homeless Monitor: England

Area	Local authority type	2013/14	2014/15	2015/16	2016/17	2017/18
Stoke-on-Trent	Unitary	2.21	2.1	1.64	1.99	1.78

Source: MHCLG (2019) Local authorities' action under the homelessness provisions of the Housing Acts, financial years 2004-05 to 2017-18 (revised)

In the five years leading up to the Act the **number of people in temporary accommodation** in England also increased by 60% from 55,840 to 80,720, as illustrated in Figure 2.2.

Figure 2.2   Households in temporary accommodation in England

Source: MHCLG (2019) Temporary accommodation tables

Again, temporary accommodation numbers vary widely across different areas and local authorities, with the highest rates in inner-city London borough authorities.

Table 2.3 shows the average number of households in temporary accommodation in the five years leading up to the Act by local authority type and Table 2.4 shows temporary accommodation numbers in the 18 case study areas over the same period.

Table 2.3   Average number of households in temporary accommodation at the end of financial year – by local authority type

Authority type	2013/14	2014/15	2015/16	2016/17	2017/18
District	41.59	45.90	50.89	58.33	63.12
London borough	1312.42	1461.76	1577.45	1644.94	1679.94
Metropolitan	66.21	75.70	95.00	131.27	169.67
Unitary	114.36	127.02	156.98	179.65	190.39

Source: MHCLG (2019) Temporary accommodation tables

Table 2.4   Number of households in temporary accommodation at the end of financial year – case study areas

Area	Local authority type	2013/14	2014/15	2015/16	2016/17	2017/18
Blackburn and Darwen	Unitary	6	5	-	6	5
Charnwood	District	24	14	17	37	44

Area	Local authority type	2013/14	2014/15	2015/16	2016/17	2017/18
Cornwall	Unitary	348	252	231	202	220
Dudley	Metropolitan	29	14	12	9	9
Fenland	District	18	21	16	18	20
Gateshead	Metropolitan	28	22	19	33	27
Hackney	London Borough	1,755	2,021	2,495	2,900	2,861
Haringey	London Borough	2,869	2,997	3,164	3,147	2,943
Harrogate	District	52	53	69	58	50
Hart	District	18	21	19	25	23
Hillingdon	London Borough	549	579	610	660	533
Leeds	Metropolitan	14	39	38	74	32
North Warwickshire	District	-	-	6	6	14
Plymouth	Unitary	109	127	131	167	178
Rochford	District	42	47	62	79	72
South Derbyshire	District	-	11	11	12	-
Stockton-on-Tees	Unitary	23	29	22	20	29
Stoke-on-Trent	Unitary	21	18	17	15	25

Source: MHCLG (2019) Temporary accommodation tables

There is evidence of an increase in the number of **people at risk of homeless who have complex needs**. This encompasses needs associated with physical and mental health, experiences in care, offending histories, family breakdown, domestic violence and substance misuse. This has been reported in recent local authority surveys[11] and respondents in all the case study areas for this evaluation reported an increasing trend in their local area in the years leading up to the Act.

Much has been written about the reasons for these trends, but in summary:

■ It has been suggested that **changes to the benefit system** have contributed to the overall increase in homelessness[12]. The welfare reforms implemented since 2010 have decreased social security expenditure by £27 billion per year[13]. It has been suggested that changes such as the removal of the spare room subsidy and the benefit cap have impacted lower income households and their ability to retain housing in the social or private rented sector. Research reported that 40 per cent of the households which were affected by the benefit cap were losing more than £50 a week[14]. Other changes to the benefit system, such as the two-child limit and the move to universal credit have been argued to be a contributing factor for increases in rent arrears and issues with retaining property[15].

■ The **freeze on Local Housing Allowance (LHA) rates** from 2016/17 has resulted in an increasing gap between rent rates and the amount of rent that is

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[11] Crisis (2019) The Homeless Monitor: England

[12] Shelter (2019) From the Frontline: Universal Credit and the Broken Housing Safety Net

[13] Sheffield Hallam University (2016) The Uneven Impact of Welfare Reform: The Financial Losses to Places and People

[14] Chartered Institute of Housing (2016) The Likely Impact of the Lower Overall Benefit Cap

[15] Crisis (2019) The Homeless Monitor: England

covered by LHA. Research from the Charted Institute of Housing found that in 2018/19, the gap between LHA rates and actual rental costs resulted in 97 per cent of areas in England being unaffordable to individuals or families who were dependent on benefits to help cover their housing costs[16]. It has therefore been suggested that the freeze may increase the risk of individuals and families becoming homeless and restrict their housing options if they were to become homeless[17].

■ **Shortage of local affordable housing.** It is estimated that there is a housing shortage of at least four million in England[18]. Despite an increase in building each year, an insufficient number of houses have been built to help keep up with the housing demand. The issue of housing supply varies across England, where the South East and some parts of the Midlands struggle with the cost and availability of social housing, in comparison to several Northern areas, where supply is less of an issue, but the properties are unsuitable due to the location or quality[19]. The shortage of housing has been exacerbated further due to a decrease in the number of available social housing properties and the barriers in access to the private rented sector and properties owned by housing associations. It has been reported that many housing associations have become more risk averse towards providing properties to benefit-reliant households and individuals with complex needs[20]. This may be aggravated further due the affordability and accessibility of the private housing market.

■ **Reductions in Local Authority funding.** Since 2010, there has been a decrease in grants from central government to local authorities. It is estimated that government funding has decreased by 49.1 per cent in real terms from 2010-11 to 2017-18[21]. Despite the fall in funding for local authorities over the past eight years, the demand for service provision has increased with pressures to care for a growing and ageing population[22].

These factors were cited to varying degrees by respondents in every case study area. However, local affordable housing supply was the one factor that most clearly differentiated some areas from others. It was also the factor that was perceived to be exerting the most influence on local authorities' ability to respond effectively to the Act.

2.1.2 Previous local responses to homelessness

Local authorities were already taking actions to prevent homelessness before the Act. Under the preceding legislation, they had been required to develop local homelessness prevention strategies and report data on their prevention activities each quarter. Figure 2.3 shows that, at an aggregate level, a large volume of

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[16] Chartered Institute of Housing (2017) Rethinking Allocations

[17] Crisis (2019) Cover the Cost: Restoring Local Housing Allowance Rates to Prevent Homelessness

[18] Bramley (2018) Housing Supply Requirements across Great Britain: for low-income households and homeless people

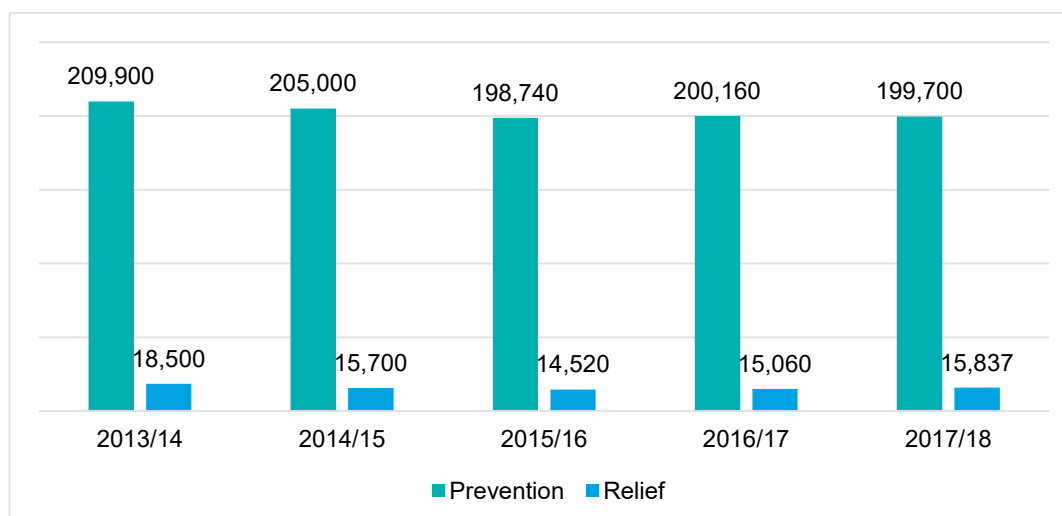[19] Chartered Institute of Housing (2017) Rethinking Allocations

[20] Crisis (2019) The Homeless Monitor: England

[21] National Audit Office (2018) Financial sustainability of local authorities 2018, HC 834, session 2017-19, March 2018

[22] Institute for Fiscal Studies (2018) Response to the Housing, Communities and Local Government Committee's Local Government Finance and the 2019 Spending Review inquiry

prevention activities (and a smaller volume of relief activities) were being reported by local authorities prior to the Act.

Figure 2.3   Reported cases of homelessness prevention and relief in England

Source: MHCLG (2019) Total reported cases of homelessness prevention and relief by outcome and local authority, 2009-10 to 2017-18 (revised)

Beyond these aggregate figures, national stakeholders interviewed for the evaluation painted a mixed picture, in which some local authorities had been doing relatively little on prevention while others were already exceeding the requirements under the previous legislation. Some of the local authorities in the case studies also put themselves firmly in this latter category, for example saying they had already delivered prevention activities to non-priority and priority households and, in one case, had established their own 90-day prevention threshold. Other case study local authorities indicated their prevention activity had been more limited prior to the Act.

Table 2.5 shows the reported cases of prevention and relief activities by local authority type in the year before the Act, and Table 2.6 does this for the case study areas.

Table 2.5   Reported cases of homelessness prevention and relief per 1,000 households in 2017/18 – by local authority type

Local authority type	Prevention activities	Relief activities
District	6.59	0.67
London borough	7.26	0.99
Metropolitan	12.16	0.70
Unitary	8.07	0.64

Source: MHCLG (2019) Total reported cases of homelessness prevention and relief by outcome and local authority, 2009-10 to 2017-18 (revised)

Table 2.6   Reported cases of homelessness prevention and relief per 1,000 households in 2017/18 – case study areas

Area	Local authority type	Prevention activities	Relief activities
Blackburn and Darwen	Unitary	8.27	0.00
Charnwood	District	4.21	0.00
Cornwall	Unitary	5.56	0.07

Area	Local authority type	Prevention activities	Relief activities
Dudley	Metropolitan	13.71	2.70
Fenland	District	4.94	0.48
Gateshead	Metropolitan	45.03	6.65
Hackney	London Borough	9.44	0.44
Haringey	London Borough	7.30	1.39
Harrogate	District	6.17	0.00
Hart	District	5.01	0.00
Hillingdon	London Borough	8.70	0.74
Leeds	Metropolitan	28.46	0.00
North Warwickshire	District	0.64	0.19
Plymouth	Unitary	7.89	0.00
Rochford	District	3.06	0.00
South Derbyshire	District	1.25	0.49
Stockton-on-Tees	Unitary	9.15	1.19
Stoke-on-Trent	Unitary	12.14	0.86

Source: MHCLG (2019) Total reported cases of homelessness prevention and relief by outcome and local authority, 2009-10 to 2017-18 (revised)

The Homelessness Prevention Trailblazer programme (launched in December 2016) is also likely to have facilitated some local authorities that participated to do more on homelessness prevention in advance of the Act. The evaluation of the programme found quantitative evidence of a positive impact on the number of cases of homelessness prevention and relief in 2017/18 in participating local authorities compared to a control group of other local authorities[23].

In addition, some Trailblazer local authorities included in the case studies for this evaluation said they had used their Trailblazer funding to trial elements of their response to the Act in advance. Equally there were others who indicated their Trailblazer project had a narrower focus (e.g. the design of one specific prevention tool or service) or focused on very "upstream" prevention (i.e. with people who were at risk of homelessness but not within 56 days). They generally perceived less of a direct "Trailblazer effect" on their subsequent responses to the Act.

The implication of this for the implementation of the Act is that local authorities have started from different positions. Some had well-developed and tested approaches to preventing homelessness, a culture amongst staff already partly aligned with the ethos of the Act, and arrangements for working in partnership on prevention with other local organisations. Others did not.

2.2 Initial views on the Act

The perceptions that local authorities and other local organisations had of the Act before it came into force are primarily a point of historical record now. However, they

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https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/791585/Evaluation_of_Homelessness_Prevention_Trailblazers.pdf

are briefly described in this section because they help to explain how and why the Act was implemented in different ways in different local areas.

Initial views on the principles and aspirations of the Act were said to be very positive in the case study areas, and over a year on from its implementation, a lot of this original positivity remained. The increased focus on prevention, the adoption of a more priority-blind approach, and the promotion of joined-up working between housing teams and other public services were all welcomed.

"I loved the ethos, the early intervention, and giving more support to people." (Local authority; Unitary)

"It's a good piece of legislation." (Local authority; Metropolitan)

"The new Act is the best piece of legislation that has come in." (Local authority; District)

"It is about doing the right thing by people." (Local authority; District)

"What's not to like?" (Local authority; London Borough)

Even amongst local authorities that believed they had already been doing much of what the Act promotes, it was viewed as a positive endorsement of this and an encouragement to do more.

"It validated the prevention work we were doing already." (Local authority; Unitary)

Some third sector organisations said the Act hadn't gone far enough, arguing for a completely priority-blind approach that also encompassed the statutory homelessness duty, but equally saw the Act as a *"step in the right direction"* towards a less discriminatory system.

Its high profile and the media attention surrounding the Act was also seen as a positive by local authority staff, in terms of enabling them to leverage support amongst elected members for time and resources to be committed to implementing it. On the flipside of this, some other local organisations either thought the Act had been oversold in the media.

"They were talking about it like it was going to end homelessness." (Local organisation; London borough)

Alongside the positivity around the principles and aspirations of the Act, staff in the case study local authorities all said they had initial concerns and doubts too. The most immediate concern was around capacity, and how they would cope with the *"floods of new presentations"* most said they expected. Initial expectations of this were sometimes directly shaped by the reported increases in caseload numbers, of 25-30%, reported by local authorities in Wales where similar legislation had already been introduced.

As details of the Act emerged and the new Code of Guidance was published there were similar concerns about the time it would potentially take to follow the prescribed process and collect the required H-CLIC data for each prevention or relief case, and the knock-on implications of this for staff capacity. Some also said they had initial concerns about a high volume of service users exercising their right to request a review of their case under Act.

"I felt a foreboding on capacity…and how it would be delivered." (Local authority; Unitary)

"It sounded like it was going to be a lot more work for the council." (Local organisation; District)

Separate to the question of capacity were concerns in some local authorities about the culture change aspects of the Act, and the ability of frontline staff to adapt to the more supportive and holistic ways of working it implied. Some frontline staff also said they had initial concerns themselves about how radically the Act would potentially change their role.

"We thought we were all going to have to become social workers." (Local authority; Unitary)

Ensuring staff could follow the new processes and requirements necessary to be legally compliant with the Act was also an initial concern for all local authorities.

The major doubt that was expressed by local authority staff in most case study areas was whether they would have enough accessible and affordable housing in their area to achieve positive housing outcomes for service users under the Act.

2.3 Planning for implementation

The planning that case study local authorities said they undertook in advance of the Act coming into force was varied in terms of its timing, the perceived scale of the planning task, and what it involved.

2.3.1 Timing

Several of the case study local authorities said they started planning in the summer of 2017 after the Act had received royal assent, or even earlier amongst those participating in the Trailblazer programme and using this partly as preparation for the Act. In some cases planning for Act was also subsumed into wider service reviews within the local authority that were already ongoing. None of these local authorities described planning for implementation as easy but they generally reported fewer challenges and had more positive reflections on the process than those who started planning later.

For other local authorities, the trigger for their planning to begin in earnest appeared to have often been the publication of the new Homelessness Code of Guidance for Local Authorities in draft form in October 2017, six months before the Act came into force. This was consulted on between October and December 2017, then a revised version published in February 2018. The new Code of Guidance was seen as crucial to the planning process because it prescribed the detailed processes that local authorities would have to follow to meet their new duties under the Act.

However, the local authorities that had deferred much of their planning until its draft publication were amongst those who described their initial implementation as the most *"rushed"* or even *"chaotic"*. From their perspective a longer timeframe between the publication of the Code of Guidance and the Act coming into force would have enabled them to plan better for implementation.

The loss of key staff and recent council mergers were mentioned as other internal factors that had delayed or compressed the planning process in some local authorities.

2.3.2 The scale of the planning task

Part of the challenge for local authorities was planning for the implementation of different dimensions of the Act – including the design and delivery of legally

compliant processes, potentially the development of new prevention activities or services, and a change in culture amongst staff.

This challenge was appreciably greater for local authorities doing little preventative work prior to the Act, and therefore having to start their planning from a relatively blank piece of paper. Some local authorities in this position had, senior staff acknowledged, focused primarily on ensuring their staff would follow the processes prescribed under the Act.

"We only had time to focus on achieving legal compliance." (Local authority; London borough)

Other local authorities that were already active on prevention recognised that this had lessened the scale of the planning task they faced. For them, planning was more evolution than revolution, and often involved adapting or expanding existing activities and building on an existing culture amongst their staff.

"We were already doing it – we always did prevention work, this was nothing different." (Local authority; Metropolitan)

Equally, they were conscious of the need for their staff to follow the new processes prescribed under the Act. This was the thing that was most "new" to them in the legislation. So, despite local authorities having different starting points, all had a focus during in the planning stage on preparing to implement these processes.

The need to plan for the introduction of the new H-CLIC data reporting requirements in the same timeframe as the implementation of the Act was cited - by all local authorities - as an additional pressure.

"It was a triple whammy – we have a new data requirements, the new Act, and we had to change the way we worked." (Local authority; Unitary)

From their perspective, and with the benefit of hindsight, a different and later timeframe for the introduction of H-CLIC would have been better.

2.3.3   What planning involved

Task-and-finish groups, management boards, implementation leads and/or project management roles were created to lead on planning for the Act within the local authorities. Senior staff in these roles attended external events and training, consulted with other local authorities, and sought out information about the earlier implementation of the similar legislation in Wales. This was to understand more about the Act itself, pick up learning and examples of good practice, and to try to gauge its potential impact on the size of their caseloads.

One local authority commissioned an external consultant to assist with this, and considered it *"money well spent"*. The consultant accurately projected the number of presentations the local authority would receive once the Act came in, based on evidence from Wales and local data. Others made their own projections of the impact on their caseload sizes. There was less evidence of local authorities having attempted to forecast the impact of the Act on the staff time required per prevention and relief case, although there was a general expectation that this would be *"a lot longer"* and attempts were made to account for this in their planning.

Senior staff said that planning in their local authority had involved discussions, meetings and workshops to review the structure of their current provision and service in light of the requirements of the Act. The outcomes of this are discussed in the next section but this process was thought to be most effective where it directly

involved frontline staff (and sometimes external partners too). This helped to get their buy-in as well as drawing on their experience and knowledge. MHCLG HAST advisors were also credited by several local authorities with provide valuable advice and input into this process. However there was little evidence of service users having been directly involved or consulted.
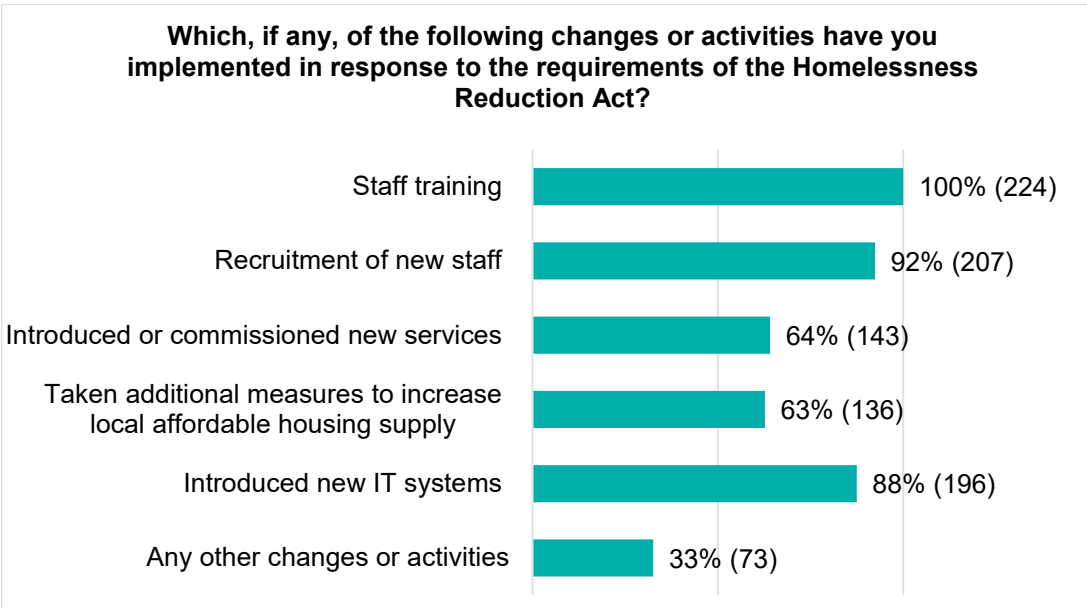
The other main reported element of the planning process described was securing approval from elected members and/or directors for staffing, procedural or other changes to be implemented, and for the funding to do this. As discussed above, the high profile of the Act was said to be a facilitator in gaining this approval. The provision of the New Burdens funding was also said to help, although in most cases the staff involved said they had needed to negotiate for the allocation of further funding from other sources – principally the Flexible Homelessness Support Grant – to meet the costs of implementation. The role of MHCLG funding in supporting the effective implementation and delivery of the Act is explored further in Chapter 3.

2.4   Changes and activities implemented

2.4.1   Overview of changes and activities implemented

The survey of local authorities explored the main types of changes and activities they had undertaken in implementing the Act. Figure 2.4 shows the results.

Figure 2.4   Changes and activities implemented in response to the Act

Which, if any, of the following changes or activities have you implemented in response to the requirements of the Homelessness Reduction Act?

Staff training	100% (224)
Recruitment of new staff	92% (207)
Introduced or commissioned new services	64% (143)
Taken additional measures to increase local affordable housing supply	63% (136)
Introduced new IT systems	88% (196)
Any other changes or activities	33% (73)

Base: 224

The further details provided by local authorities who answered "Any other changes or activities" in the survey and the case studies also highlight two activities not captured in survey response options: the reviewing and restructuring of provision; and changes to waiting list policies.

Table 2.7 gives an overview of how the reported changes and activities undertaken by local authorities relate to the different elements of the Act.

Table 2.7   Changes and activities implemented as they relate to elements of the Act

Changes and activities	Elements of the Act				
	Assessments and PHPs	Extended prevention duty	New relief duty	Advice and information duty	H-CLIC data reporting
Staff training	✓✓	✓✓	✓✓	✓	✓
Staff recruitment	✓✓	✓✓	✓✓		
Review / restructure of provision	✓✓	✓✓	✓✓		
New services		✓✓	✓✓		
Changes to waiting list policy		✓	✓✓		
New IT systems					✓✓
Affordable housing supply		✓	✓✓		

The next sections discuss the changes and activities implemented, and how they related to different elements of the Act, in more detail.

2.4.2   Staff training

All the 224 local authorities that completed the survey said they had undertaken staff training as part of their response to the Act, as did the 18 case study local authorities. Training was designed and delivered in-house by senior staff and/or local authorities had accessed training for their staff delivered by homelessness charities and other industry bodies. In most cases the case study local authorities said they had done a combination of both.

The training described by the case study local authorities covered four main things:

■ General awareness and understanding of the Act (introductory training or briefings to familiarise staff with the broad features of the Act);

■ Preparing staff to deliver the required processes under the Act (more in-depth training and case simulations often supported with written guidelines and process maps, on the new requirements for assessments, PHPs, the extended prevention duty, the relief duty, and to a lesser extent the information and advice duty and H-CLIC); and

■ Preparing staff to deliver on the ethos of the Act (this included training on asset and strength based approaches, motivational interview skills and coaching); and

■ Preparing staff to deliver effective prevention and relief casework under the Act (e.g. concerning the steps that could be taken under both duties, and how to communicate and work with different types of service user).

All the case study local authorities reported training for staff on general awareness and understanding of the Act and on the delivery of the required processes under the Act. It was more mixed in terms of training for staff to deliver on the ethos of the Act and to deliver effective prevention and relief casework.

Some local authorities indicated that because they believed they already had a staff culture that fit with the ethos of the Act and were already conducting extensive preventative work, they had not considered such training necessary. There were also positive examples where local authorities had recognised the need for a change in culture and had directly addressed this through staff training, but other examples where a perceived need for this had not been fully addressed prior to implementation.

The other possible training gap or shortfall was around preparing staff to deliver prevention and relief casework under the Act, especially casework with non-priority service users. Frontline staff in the case study local authorities indicated this has been covered to an extent in their training but without necessarily being the central focus of it. In cases where this training was delivered externally, some also said it was difficult to apply the general content of this training to the specific context of their local area.

Again, there were case study local authorities who didn't cite training in this area as a great need because of their existing preventative and priority-blind approach before the Act. In other areas, where frontline staff had only started to conduct extended casework and engage with non-priority cases since the Act, they were often open in saying they had found this challenging. Non-priority service users (especially singles) were recognised to need different types of help or just a different approach to priority service users. Frontline staff did not explicitly identify an additional training need here, instead emphasising the difficulties of making progress with these cases. Senior staff in some local authorities acknowledged more initial training around this, in addition to the focus on new processes, would have been beneficial.

There were also very positive examples of how case study local authorities had sought to tackle this outside of formal training. Some had instigated regular case review meetings between frontline and more senior staff when the Act first came in and continued them since. Although these were partly about ensuring the legal requirements of the Act were being consistently interpreted by all staff, they were also said to facilitate the sharing of good casework practice with different types of service user.

2.4.3   Recruiting new staff

92% of local authorities that completed the survey said they had recruited new staff as part of their response to the Act and this was reported in all the case study local authorities. This primarily reflected the expectations about the impact of the Act on the size of caseloads and the staff time required per case, discussed in Section 2.2. The scale of recruitment understandably varied depending on the size of the authority. For example, one of the London boroughs recruited over 12 new staff, whereas the smallest district councils (who had Housing Options teams of only 5-6 staff) typically recruited one extra member of staff.

There was also an element of caution in the recruitment that several local authorities conducted, with staff being brought in initially on a temporary or fixed-term contract basis. The main reason given for this was uncertainty about the scale of impact the Act would have on their capacity needs. It was suggested by one respondent that

the time-limited nature of the New Burdens funding acted as a further barrier to taking on staff on a permanent basis. Temporary appointments were seen as less than ideal because of the high risk of the individual moving on. Nonetheless, in most cases, the local authorities said that temporary roles were subsequently converted into permanent roles after the Act came into force.

New staff were recruited mainly to perform frontline housing officer, housing support officer, or equivalent roles. A few local authorities also recruited senior housing officers or managers as part of a strategy to provide more direct support (decision making and problem solving) to housing officers, and the general public. For one metropolitan local authority, it was these more senior staff (recruited and from internal promotions) who provided frontline advice and assessments in the first weeks of implementation in order to best support new recruits or those with less experience on how to respond to certain circumstances. Others recruited staff to fill more specialist roles, including TA support workers and Private Rental Sector officers.

Recruiting new staff in the lead up to the Act was described as *"difficult"* by most of the case study local authorities, partly because *"everyone was looking for people at the same time"*. All had ultimately recruited new staff but in some cases only after a protracted process, and after the Act came into force in April 2018. This had put additional pressure on existing staff in the early stages of implementation.

The reported extent of these difficulties appeared to be a consequence partly of the local labour market in different areas and also partly of the type of people local authorities were trying to recruit. Some had sought to recruit people from a housing background, and often reported the greatest difficulties, while others had taken a different approach. One of the pieces of learning from the Trailblazer programme was that some participating local authorities had recruited new staff who were not from a traditional housing background, but had experience in more customer service-orientated roles. This was thought to be effective because of the supportive, people-centred mindset they brought to homelessness prevention roles. Several of the case study local authorities adopted this approach in their recruitment, based on the same logic.

"You can teach people about the Act and the admin but it is more difficult to teach them the skills to handle service users." (Local authority; District)

Local authorities that had taken this approach were positive about the results. They thought they had benefitted from having new staff without preconceptions about their role, who were enthusiastic, and already in tune with the ethos of the Act. The only caveat to this was that senior staff could envisage such new recruits moving on to other non-housing roles later in their career. However, overall this risk was seen to be outweighed by the positive impact of new recruits in enabling the local authority to implement the Act - especially its culture change dimension - to date.

2.4.4 Reviewing and restructuring provision

A key planning consideration cited by case study local authorities was how to structure their provision so that the different processes and duties under the Act could be delivered most effectively and efficiently. For example, how and when should the assessment and PHP be conducted with service users? Who should do this? Should responsibility for then working with service users be split between different staff or teams depending on what duty had been accepted?

The local authorities said they had reviewed the structure of their existing provision prior to implementation with just these kinds of questions in mind. Sometimes the outcome of this was a decision to largely retain the existing structure of their provision. Nonetheless senior staff generally thought sufficient consideration had been given to different possible options.

There was considerable variation in how local authorities decided to structure their provision at the point when the Act came into force. The perceived effectiveness of different approaches is explored in Chapter 3, but the following examples illustrate some of the different models adopted:

■ **Generic officer model**. The same housing officer works with a service user through every stage in the process - from their initial presentation or referral onwards, and potentially through the prevention, relief and main duty stages. The perceived advantages of this are in providing the service user with continuity and reduced duplication of activity between staff.

■ **Split duty model**. Different staff or teams are responsible for working with the service user at different stages in the process and/or duties. The perceived advantages of this are in having staff with the most appropriate skills to perform different parts of the process. For example, one Housing Options manager saw a clear difference between the skills and seniority required to work with service users under the prevention duty as opposed to under the relief and main duties, and split responsibility between staff in their team along these lines.

■ **Triage model**. A member of frontline staff (not necessarily a housing officer) collects some assessment information from the service user at their initial presentation or referral. A housing officer then completes the assessment process with the service user. Another variant was to enable service users to provide this initial information themselves online. The perceived advantages of this are in reducing the time housing officers need to spend in collecting information from the service user during the assessment – so, an efficiency saving, but one which could allow more time for casework in the initial meeting. In some cases, the "triage officer" or equivalent also had a remit to provide service users with information and advice – which could be sufficient to meet their needs without them having to complete the assessment process with a housing officer.

In terms of the implementation of such changes, one local authority had used its participation in the Trailblazer to trial a change to the structure of provision in the six months prior to the Act. However, it was more typical that changes were implemented before or on the day that the Act came into force without much in the way of piloting or pre-testing with service users.

2.4.5   Introducing or commissioning new services

64% of local authorities in the survey said they had introduced or commissioned new services in response to the Act, and this was in line with the picture amongst case study local authorities. A minority said they already had sufficient services in place and did not consider this necessary, although Act had often helped to make the case for the continuation of funding for such services. The majority said they had introduced or commissioned new services, and these fell into two main types:

■ **Services to expand their general prevention toolbox**. This included new information and advice, family and/or landlord mediation, debt advice, move-on and tenancy sustainment services, and new or expanded pots of funding that

housing officers can use to help services users pay off rent arrears, pay deposits, or meet other costs to help them retain or secure somewhere to live. These services may not been seen as especially dynamic or innovative but the Act had prompted local authorities with a relatively limited toolbox to catch up with others who already had a range of services their staff could draw on.

■ **Services for non-priority service users**. These were more variable and ranged in scale. Two of the larger local authorities had introduced dedicated services for single people through which prevention and/or relief casework is provided. In other cases new temporary, emergency or supported accommodation had been commissioned which non-priority service users (particularly those with more complex needs) could be placed in. Some had also commissioned new specialist or floating support. For example one commissioned a prevention coach to work specifically with single people with a mental health condition. These measures were seen as a significant development in areas where previously such services had only been commissioned with priority service users in mind. Equally the scale of these was typically modest - e.g. five new supported accommodation units - and the local authorities and providers concerned indicated the potential demand was much greater than this could address.

2.4.6 Changes in waiting list policy

Several of the case study local authorities said they had changed their waiting list policy to give greater priority to non-priority households in the prevention and relief stages, and within this some had also given a further uplift to those who had more complex needs.

2.4.7 New IT systems

88% of local authorities in the survey said they had introduced new IT systems and, based on the case study evidence, the overwhelming driver for this had been the new H-CLIC data reporting requirements. All the case study local authorities said they had reached the conclusion that their existing IT system was not fully equipped to meet these new requirements. Either they had sought to modify their existing system or, in most cases, purchase a new one. None described this a straightforward process.

The local authorities thought they had sufficient forewarning that H-CLIC was coming but MHCLG was criticised for changing elements of the H-CLIC requirements in the immediate run up to their introduction, and on a few occasions since. IT providers were also perceived to struggle to develop systems that met these requirements while being compatible with the wider IT infrastructure in different local authorities. In one case a local authority said they had pulled out of negotiations with a provider within a few months of the new requirements coming in and sought to modify their existing system instead.

Overall, and because of these issues, some of the case study local authorities acknowledged they had not been wholly prepared to fulfil the new H-CLIC requirements at the point they initially came in.

2.4.8 Additional measures to increase local affordable housing supply

63% of local authorities in the survey said they had introduced additional measures to increase local affordable housing supply – i.e. measures beyond those they

already had in place. Most of the case study local authorities also said the Act had spurred them to introduce additional measures or increase the scale of what they were doing already. The main measured reported were:

- **Schemes to increase access to the private rental sector**. This included relatively simple schemes to pay private landlords an upfront fee for offering a tenancy to someone on the local authority's caseload and more sophisticated leasing schemes, through which the local authority would lease a property from the landlord and guarantee the payment of rent for the duration of the tenancy.

- **Negotiating new terms with registered social landlords (RSLs)**. As has been reported nationally (see Section 2.4.8), local authorities in the case studies said that RSL had become increasingly restrictive providing properties to households on low incomes and individuals with complex needs. Some said they had been triggered by the Act to renegotiate agreements they had with local RSLs to redress this trend.

- **Increases in local house building targets**. This was recognised as being a long term endeavour but some of the local authorities said they had been influenced to increase these targets in response to the Act.

3 The effectiveness of implementation and delivery of the Act

This chapter provides evidence on the how effectively the Act has been implemented and delivered to date – both overall and in terms of the Act's different elements. It also explores what factors appear to have mediated this. This is based mainly on survey and case study evidence from local authorities and other local organisations. Service user experiences and reflections are reported in Chapter 6.

The focus of the chapter is on the elements of the Act that came into force in April 2018. Findings on the Duty to Refer are reported in Chapter 5.

3.1 Overall effectiveness of responses to the Act

In the survey, local authorities were asked to rate how effectively they believed they had responded to the Act overall. Figure 3.1 shows the results.

Figure 3.1 Overall effectiveness of responses to the Act

Overall, how effectively do you think your local authority has responded to the introduction of the Homelessness Reduction Act?

Very effectively	50% (112)
Fairly effectively	48% (108)
Neither effectively nor ineffectively	2% (4)
Fairly ineffectively	
Very ineffectively	

Base: 224

These results indicate confidence amongst local authorities about the overall effectiveness of their response to date, with none believing this to have been ineffective. Equally, only a half believed it to have been very effective.

There are also differences in the survey results when they are compared between different types of local authorities, as shown in Figure 3.2.

Figure 3.2   Overall effectiveness of the Act, by type of local authority

Base: 224

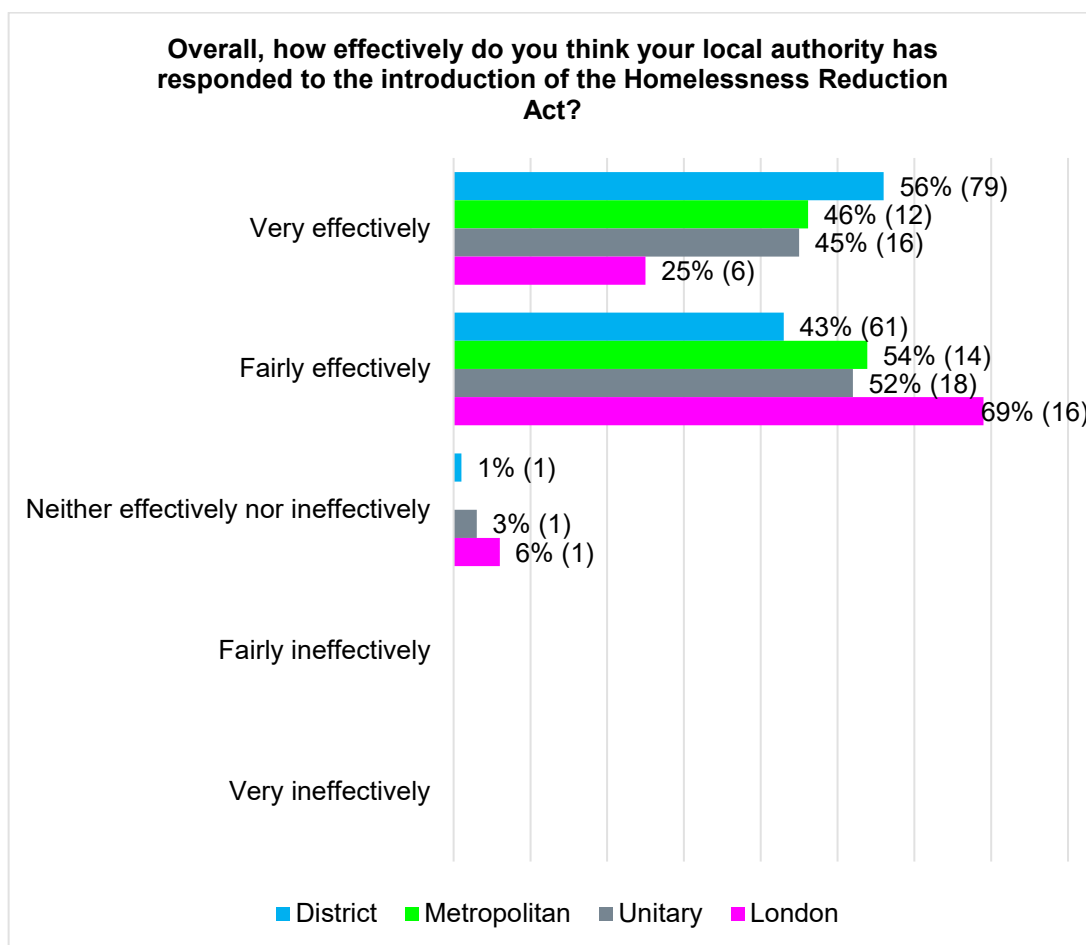These results show that London boroughs were notably less positive about the effectiveness of their response to the Act than the others, with only a quarter believing they have responded very effectively. District councils were the most positive, with over a half believing they have responded very effectively.

The factors that have mediated how effectively different local authorities have responded to the Act are returned to at the end of the chapter. However it is worth saying here that it has not been a case of London boroughs simply having done a worse job of responding to the Act than others.

3.2   Effectiveness of different elements of the Act

This section presents evidence on the effectiveness of implementation and delivery of different elements of the Act.

3.2.1   Assessments

Under the Act, local authorities are required to complete an assessment with all applicants who are eligible for help under either the prevention or relief duty. The role of the assessment is partly to collect information necessary for H-CLIC data reporting and partly for the housing officer or equivalent to understand more about the applicant's circumstances and needs.

The case study local authorities said they generally had a housing application or similar process in place before the Act through which information would be collected from new applicants, and their circumstances and needs discussed. All said that the assessment required under the Act was more detailed and time-consuming to complete than their previous approach. For example, one said their previous approach had taken one hour but now took an hour and a half on average. Other local authorities provided similar or higher estimates, of between a 50% and 100% increase in the time taken.

This additional time was seen as important for two main reasons. From an operational point of view it added to the resource demands on frontline staff. From the point of view of helping applicants it was also perceived to have a possible negative impact. Frontline staff described the initial meeting they had with applicants as important in establishing rapport, understanding their situation, and potentially taking steps there and then to help them – for example by getting them a place in temporary accommodation or referring them to additional support. There was a perception that collecting the information required for H-CLIC data reporting in the assessment ate into the time they had to fulfil these tasks.

Not all frontline staff highlighted this as such an ongoing concern, particularly as implementation of the Act in their local authority had progressed. Some said that they and colleagues in their local authority now simply conducted longer initial meetings to accommodate the additional time needed for the assessment. Several said that they had got more efficient at asking the questions required in the assessment, and better at weaving them into a more qualitative and open-ended conversation with applicants, over time. Newer frontline staff, who had been taken on by the local authority in response to the Act and often didn't have a traditional housing background, were notably more accepting of the assessment requirements than existing staff who had been used to working under the previous, less prescriptive, system.

Senior staff in most of the case study local authorities also said they had taken steps to try to limit the additional time the assessment required - either in their initial planning for the Act or since it had come into force. As described in Chapter 2, some had introduced an upfront triage or online self-referral stage in which some of the information required was collected in advance of the assessment meeting.

"It means the initial meeting can be more qualitative and focused on the client, rather than needing to spend a lot of time on collecting administrative data and looking at the computer screen." (Local authority; London borough)

One local authority had also moved to conducting their assessment meetings increasingly by telephone rather than face-to-face. These approaches were viewed to have been effective in reducing (but not removing) the additional time required by the assessment process.

Equally, some potential downsides were perceived. For example, one third sector organisation questioned whether the staff responsible for conducting the triage stage in their local area were sufficiently experienced and knowledgeable about housing to perform this role effectively, or were even 'gate-keeping' support by not referring service users onto a housing officer in instances where they should. None of the service users interviewed in areas where a triage approach had been introduced explicitly said this had happened to them. As long as the staff concerned had treated them well and they had been referred onto a housing officer quickly, they did not raise any issues with the process itself. The local authority that had moved towards a telephone-based model said they planned to revert back to

conducting more assessments face-to-face in the future because they recognised an element of the *"personal touch"* had been lost.

All the case studies local authorities were confident they were delivering on the assessment requirement of the Act but did not perceive it to have direct benefits for their ability to effectively help service users. Frontline staff did still think the initial meeting important in ensuring service users feel listened and taken seriously, and in understanding their needs. However, they said they felt able to achieve both those things without the new assessment requirements. From their perspective, a reduction in (or just greater flexibility over) the information they are required to collect through the assessment for the purposes of H-CLIC would enable them to tailor this to different applicants and save time, which could instead be used for more early casework.

Service users did not highlight the time their assessment took as a particular issue. One or two described it as *"very thorough"* or *"long-winded"* but did not posit this as real negative or problem. However, the initial meeting they had once a prevention or relief duty had been accepted by the local authority was very important to their overall perceptions and experiences. Service users described how upset, anxious and often desperate they were at this point. What was most important to them was the timing of this meeting and how they felt they were treated. Service users wanted the meeting to happen as soon as possible after they had initially approached the local authority and, in line with the perceptions of frontline staff, they wanted to be listened to and treated with respect. Service user experiences are returned to and discussed in more depth in Chapter 6.

3.2.2 Personalised housing plans (PHPs)

PHPs were a source of contrasting views within the case study research and survey. As with the new assessment requirements, a key concern for local authority staff was the time it took for a PHP to be conducted. However, some perceived that there were real benefits to PHPs, which meant this was *"time well spent"*. At the other end of the spectrum, it was suggested that they were *"a waste of time"* and *"aren't worth the paper they're written on"*.

Local authority staff said that it took between 15 minutes and half an hour to complete a PHP depending on the applicant. They did not generally have any equivalent process in place prior to the Act so this time was seen as being additional to what they had done previously. All the case study local authorities also said they aimed to conduct the PHP as part of the same meeting in which the assessment was conducted, and there were similar concerns expressed about the time necessary for the PHP taking away from the time staff had to conduct early casework with applicants in this meeting.

Senior staff in some of the local authorities said they had adopted strategies to mitigate against this. The simplest and most widely reported was to reduce the number of fields in the PHP template they initially designed. Several said they had done this after the Act came into force and as the time it took to complete them became apparent. The senior staff concerned were still confident they were meeting the requirements for PHPs set out in the Code of Guidance but acknowledged they had pared this back to the basics of what was required. An example of the fields in one such simplified PHP is:

- "Our assessment of the circumstances that caused you to become homeless or threatened with homelessness

- Our assessment of your housing needs and what accommodation would be suitable for your needs (and the needs of anyone else who is part of your household)
- Our assessment of the support you may need (or anyone else who is part of your household may need) to have and keep suitable accommodation
- The actions the Council will take to help you stay in your accommodation or find somewhere else to live
- The actions you need to take to stay in your accommodation or find somewhere else to live"

There were also differences between local authorities (and sometimes between different frontline staff in the same authority) in how they administered the PHP. Some completed and printed it out, and gave a copy to the applicant, at the end of the assessment meeting. Others discussed what would go in the PHP with the applicant during the meeting but would only create it and post it to them afterwards.

Most frontline staff said that PHPs in their local authority were generated through the IT system that had been introduced to meet new H-CLIC requirements. In some of these systems, elements of the PHP could be populated from drop down menus. This was seen to have some efficiency benefits but also ran the risk of PHPs being overly generic and not tailored to the service user.

There was variation in reported practices after the point a PHP is initially generated. Some housing officers said they regularly updated PHPs as a case progressed and wrote to the applicant with the updated PHP and a letter explained what had changed each time. Others were open in saying they did not routinely do this, because of the additional time this would entail and/or because they judged the service user would only be potentially confused if they were contacted again about it. There was also limited evidence of PHPs being passed on to and developed further by other organisations that service users had been referred onto by a housing officer (as is envisaged under Act).

The main factor that appeared to determine how PHPs were being used was their perceived value – both to the housing officer and the service user. There was a widespread belief that the *"the ideology around PHPs is good"* but beyond this significant differences in their perceived value in practice.

Local authorities were asked in the survey about their views on PHPs and the results are shown in Figure 3.3.

Figure 3.3   Views on the impact of Personalised Housing Plans

To what extent do you agree or disagree with following statements - Personalised Housing Plans are having a positive impact on outcomes for service users

| 12% (26) | 43% (97) | 23% (52) | 17% (38) | 4% (9) |

■ Strongly agree ■ Somewhat agree ■ Neither ■ Somewhat disagree ■ Strongly disagree

Base: 222

Overall, this suggests more positivity towards PHPs than negativity, with over a half (55%) in the survey agreeing that they are having a positive impact on outcomes for service users and less than a quarter (21%) disagreeing. Equally the survey was completed by heads of housing within local authorities. In the case study research, conducted with staff at a range of different grades, views were more varied and if anything slightly more negative than positive.

Those who were positive about PHPs cited the following benefits:

■ **They help to establish realistic expectations and a sense of reciprocity**. For example, some housing officers said applicants were often initially disappointed that the council could not provide them with an immediate place to live but that the structure of the PHP helped them move the discussion on to what steps the local authority would take. It also enabled them to introduce the expectation that there were steps the service user would take too (although in practice none said they were routinely holding service users to account for following through on these).

■ **They provide a clear plan for both parties**. PHPs were seen by some to promote more effective forward planning and casework by housing officers by requiring that they set this out from the start. Some service users were also said by housing officers to have responded positively to having this set out for them.

■ **They promote consistency and transparency**. There was a perception that prior to the Act, the help a service user received could vary widely between different housing officers and even sometimes within the same local authority. PHPs were seen to be helping to ensure greater consistency by providing a set process that would be followed by every housing officer with every service user. It was also suggested that the PHP process provided more, and more clearly defined, stages at which the local authority could potentially be held to account and challenged by the service user.

Those who were negative about PHPs cited the following drawbacks:

■ **It's a tick box exercise.** There was a view amongst some that PHPs (as well as certain other elements of the Act) had just created an additional process for housing officers to complete, and that rather than leading to better outcomes for

service users they were instead diverting time and effort away from effective casework.

Service users don't engage with them. Even those who were positive about PHPs acknowledged that not all service users did actively engage with them. Others frontline staff suggested that this was the majority (e.g. "80%") and described PHPs frequently being discarded by service users as they left the initial meeting. *"They are only interested in being listened to and being given solutions".* Service user reflections on PHPs are reported in Chapter 6.

It is difficult to determine exactly what explains these different perceptions of the value of PHPs. It was evident that some housing officers were, because of the extra time involved and what they perceived as negative reactions from service users, to some extent just *"going through the motions"* of generating an initial PHP but not actively using it from then on. However, to reiterate, some frontline staff were positive about the impact of PHPs and actively using them. Newer frontline staff, who had been taken on by the local authority in response to the Act and often didn't have a traditional housing background, were overall more likely to have a positive attitude to PHPs than more established staff. The difference in perceptions of the value of PHPs may also partly reflect how effective different housing officers are at introducing, explaining and drawing them up with service users. Senior staff in two authorities said they had identified PHPs as an area where frontline staff needed more training.

Service users were also asked in the interviews about whether they recalled having a PHP and what their thoughts were on it. Many initially said they did not remember having a 'Personalised Housing Plan' or 'PHP', although when prompted about whether they recalled some form of written plan most did recall this – they simply hadn't connected the name to the term. Others still didn't recall a PHP or anything seemingly resembling one. Service users in rough sleeping emergency accommodation also suggested that they struggled to keep hold of documents and to remember all the processes they regularly go through.

It is difficult then to comment on whether local authority staff are consistently developing a PHP with every service user. It seems most likely, based on the staff and service user interviews that some local authority staff may not be explicitly calling plans by their names but are taking people through the PHP process, and providing the plans to people. Equally, in one or two cases the service users were adamant they had not been through such a process.

Service users' views on the value PHPs broadly tally with local authority staff's perspective on this. Several were straightforward in saying they did not attach much meaning to it and had no real sense of the intended element of reciprocity. However, some had found the additional written documentation of what they and the local authority were going to do reassuring and useful. Some also had understood that they had entered into some kind of agreement in which they were expected to do something to progress their situation as well as the council. For example, one service user who had been placed in temporary accommodation in the prevention stage had a clear sense that he needed to start regularly repaying previous rent arrears while the local authority tried to help him find somewhere permanent to live.

These differences may come down partly to the outlook and preferences of different service users, and partly to how effective different housing officers are in using PHPs, as much as the contents of written plans themselves. There was some correlation in the evidence between housing officer and service user perceptions – i.e. in areas where housing officers were more positive about PHPs the service
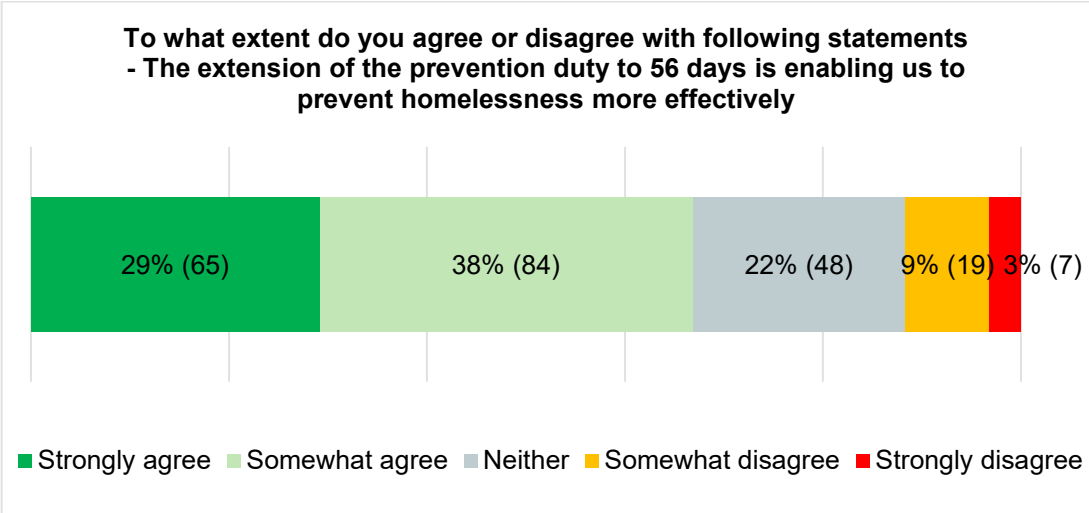
users were also generally be more positive about them too, although there was still some apparent variation depending on different individual staff and service users in the same area. In some local authorities the more negative attitude of senior staff to PHPs also appeared to set the tone of the whole team.

3.2.3   The extended prevention duty

The extended prevention duty was the element of the Act most widely welcomed by local authorities and other stakeholders in the case study research, and the one that was seen as having most effect on their ability to work more effectively with service users. This was largely reflected in the responses to a question in the survey about the extension of the prevention duty to 56 days, as shown in Figure 3.4.

Figure 3.4   Views on the impact of the extended prevention duty

**To what extent do you agree or disagree with following statements
- The extension of the prevention duty to 56 days is enabling us to prevent homelessness more effectively**

| 29% (65) | 38% (84) | 22% (48) | 9% (19) | 3% (7) |

■ Strongly agree ■ Somewhat agree ■ Neither ■ Somewhat disagree ■ Strongly disagree

Base: 223

Over two-thirds (67%) of respondents agreed that the extended 56 day prevention duty was enabling them prevent homelessness more effectively, while most of the remainder neither agreed nor disagreed, and only 12% disagreed.

The fact more local authorities didn't agree with this statement is likely to partly be because some were already undertaking prevention activities with applicants threatened with homelessness in 56 days (or even more than 56 days[24]) prior to the Act. This was the reported as being the case in some of the case study local authorities.

In other case study local authorities, the extension to 56 days was seen to have enabled them to conduct earlier and more effective preventative work. This was especially amongst local authorities that had also enhanced their toolkit of prevention activities (see Chapter 2) as part of their response to the Act.

"Now we have more time and more levers to help" (Local authority; Metropolitan)

"There is so much more you can do for someone now." (Local authority; District)

56 days was generally viewed as being *"long enough"* although some argued a longer duty would allow for even more effective preventative work. One reported

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[24] These local authorities said they had continued to operate a longer prevention duty but were not including longer-than-56-day prevention cases in their H-CLIC returns, meaning this more upstream preventative work is not currently being reflected in their H-CLIC data.

constraint for some local authorities was around staff capacity. Due to the perceived additional admin burden, larger caseloads, and difficulties with staff recruitment, some did report challenges in carrying out extensive prevention casework during the 56 days of the extended duty. However, the local authorities reporting this indicated they had either already recruited additional staff or were in the process of doing this to increase their capacity. This was underpinned by the belief that helping more applicants in the prevention stage was both better for them and the local authority.

The Act also removed previous restrictions around priority, intentionality and local connection in the prevention stage. Senior staff in most of the case study local authorities were confident that, through the recruitment and training they had conducted, their frontline staff were reflecting this change. Exceptionally in one of the 18 case study local authorities a senior member of staff also acknowledged that some of their frontline staff were still struggling to get out their previous *"gate-keeper"* mindset, which they attributed to insufficient training. Local stakeholders generally endorsed this is although in one or two of the case study areas suggested there may still be individual cases or members of local authority staff where this wasn't being reflected. Service users experiences (discussed in Chapter 6) also indicate a more variable picture than the local authority interviews suggest.

One positive by-product of the removal of the previous restrictions reported by several frontline staff was that it had changed the dynamic of their initial conversations with applicants. They no longer had to have *"difficult discussions"* about whether or not a duty would be accepted and could focus the discussion straightaway on possible solutions.

"It has simplified and relaxed my initial contact with people. I don't have to worry about checking or proving these criteria, you can just get on with helping them." (Local authority; Unitary)

The removal of the restrictions was seen to pose challenges too. Although the prevention duty is partly about helping applicants retain an existing place to live, the Act recognises that this will not always be possible. In these cases the local authority is required to take reasonable steps to help the applicant find a new place to live during the prevention duty. Case study local authorities reported that their ability to do this effectively was highly dependent on their local affordable housing supply. The issue of local affordable housing supply was perceived as an even more important factor in determining the ability of local authorities to help people under the relief duty and is discussed further in the next section.

Expanding the prevention duty to non-priority cases also required most of the case study local authorities to learn more about a client group they had previously had little contact with, and this group was seen to include more complex cases (especially amongst younger singles). Local authorities reported an uptrend in more complex cases prior to the Act and most thought the removal of the restrictions had accelerated this further.

Even with an expanded prevention toolkit, housing officers reported limits to their ability to address the wider support needs these cases could have. For example, one said that helping a service user avoid eviction under the prevention duty could feel like *"just staving off the inevitable"* because they were not able to address their underlying problems. Reductions in funding for other services such as mental health, and reported difficulties in engaging such services in joint casework, was seen to exacerbate this difficulty.

As described in Chapter 2, some case study local authorities had attempted to pre-empt this by introducing or expanding services for more complex and/or vulnerable

service users. There were very positive examples of how such services had effectively done this (see Chapter 6). However, not all local authorities had invested substantially in such services in their initial response to the Act, focusing instead on raising their frontline staff capacity. Amongst those that had, there was also a common perception that demand for these services increasingly outstripped supply.

3.2.4 The relief duty

Under the Act, local authorities are required to take reasonable steps to help services users in the relief duty secure somewhere to live irrespective of priority and intentionality. If they are a priority service user, they are also required to provide interim accommodation for the duration of the duty while this help is ongoing.

Overall, case study local authorities and other stakeholders were more cautious about the effect of the new relief duty than they were about the extended prevention duty. There were also notable differences between the case study areas, and between the perceived implications for priority versus non-priority service users, in this respect. The key mediating factor in the ability of local authorities to help service users under the relief duty was perceived to be the availability and accessibility of local affordable housing.

The minority of local authorities that thought they had good local affordable housing supply reported the greatest success in achieving positive outcomes for service users in the relief duty. They said that were able to secure a place to live for most priority and non-priority service users within the 56 days of the relief duty (or even earlier within the prevention duty). This was often following a short stay in temporary accommodation (TA) but they said they provided TA for both priority and non-priority service users up until they secured somewhere to live (which in the latter case is exceeding the legal requirement).

The situation described by local authorities that reported more limited affordable housing supply was different to this. They said TA was restricted mainly to priority cases only in the relief stage and often they had still not secured somewhere to live at the end of the 56 days. At this point a main duty would be accepted by the local authority. There was a view that such priority service users would have been better served if, as before the Act, the local authority had accepted a main duty straightaway. They said non-priority service users were being provided with help in the relief stage but that their prospects of securing a place to live were very limited because of the shortage of housing. At the most extreme, some questioned whether there was value in having a relief duty when local housing supply was so constrained.

"It's just more people being pushed through the same funnel, with nothing at the end of it". (Local authority; London borough)

Others were more positive and said they had been able to help some service users secure a home under the relief duty, although often only having continued to work with them beyond the required 56 days.

The case study local authorities that had introduced measures to increase their local affordable housing supply in response to the Act did not believe these had been sufficient to make much of an impact to date in increasing this supply.

As with the prevention stage, local authorities also reported that they were seeing more complex cases in the relief stage and that this posed similar additional challenges. The new services that some local authorities had introduced as part of their response to the Act were generally being used for complex cases in both the

prevention and relief stage but again, and even in areas who said they had good overall housing supply, it was perceived there were not enough of this more specialist provision to meet the increasing demand.

3.2.5   The advice and information duty

Overall, case study local authorities did not place as much emphasis on this duty as other elements of the Act. They believed they were delivering effectively on the basic requirements of the duty but the impression was that they had not prioritised this as a key area for development in responding to the Act.

All the case study local authorities said they already had online and written homelessness advice and information prior to the Act and that frontline staff would previously provide this verbally to applicants. Several also had commissioned third sector providers who delivered homelessness advice and information. On this basis some were comfortable in saying they had not taken any further active steps on this since the Act came in.

Others said they had sought to further enhance their information and advice provision, for example through developing new online resources and information packs. One local authority had also consulted with service users on their existing online content and updated this based on their feedback to make it more *"friendly"* and *"approachable"*. In addition, the adoption of a triage approach by some local authorities was perceived to have some benefits for the provision of advice and information. Part of the responsibility of the triage officers or equivalent was to provide advice and information to applicants at the initial point of contact, particularly those who would not qualify for help under the prevention or relief duty.

3.2.6   H-CLIC data reporting

The case study local authorities all said they had found the new H-CLIC data reporting requirements difficult to respond to, especially initially. As discussed in Chapter 2 they partly attributed this to perceived last minute changes in the reporting requirements by MHCLG and the limitations of IT providers. Frontline staff said they had found it difficult to understand how to classify and record cases in the new system. Senior staff said they reviewed and checked the recorded case information with frontline staff before this was uploaded for each quarterly H-CLIC return – a sizable task for those in the largest authorities with quarterly caseloads of several hundred.

These difficulties were reflected in the local authorities having a high volume of errors identified by MHCLG in their quarter one H-CLIC returns. However, these had reduced over time as senior and frontline staff became more familiar with the new requirements. For example, one said they had 360 errors in their first quarter return, 180 in their second, and less than ten in their third.

Aside from these difficulties, two key questions are: Is the H-CLIC data being reported an accurate representation of homelessness, and prevention and relief activity in local areas?; and Is it helping local authorities to prevent and relieve homelessness more effectively?

The case study local authorities were confident that applicants who had a prevention or relief duty accepted were consistently being captured in the data. As part of the initial assessment meeting their details were being entered onto the system. However some local authorities highlighted instances where prevention and relief activities were not being captured:

- One was more upstream prevention cases, where the applicant was not at risk of homelessness within 56 days but was at risk of this over a longer timeframe and receiving preventative support. Local authorities indicated these were not being recorded in the H-CLIC data.

- Another was cases that were receiving prevention or relief support through specialist provision, a commissioned service or local third sector organisation rather than directly from the local authority housing options team. Unless the individual had initially presented at the housing options team and gone through the assessment process, they were not being captured in the H-CLIC data. One local authority said they had asked a local homelessness charity they commissioned to direct new presentations to the housing options team so they could be assessed and captured in the H-CLIC data (even though in most cases the charity would continue to provide the support to the individual). This was acknowledged to be a *"clunky"* process for the service users concerned. Other local authorities said in the same scenario they were not doing this, and such cases were not being assessed or recorded on H-CLIC.

Local authorities were asked in the survey about the value of H-CLIC data in helping them understand more about the risk factors associated with homelessness in their local area. The results are shown in Figure 3.5.

Figure 3.5   The perceived value of H-CLIC data

To what extent do you agree or disagree with following statements - H-CLIC data is a valuable resource for understanding more about the risk factors associated with homelessness in our local area

| 14% (30) | 36% (79) | 22% (49) | 17% (38) | 12% (26) |

■ Strongly agree ■ Somewhat agree ■ Neither ■ Somewhat disagree ■ Strongly disagree

Base: 222

This suggests a mixed picture: 50% agreed that H-CLIC data is a valuable resource in helping them understand more about the risk factors associated with homelessness in their local area but 50% did not.

The perceptions of staff in the case study local authorities were also varied. Frontline staff, in every authority, were the least likely to see any value in the H-CLIC data. Some did say they had learnt more about different types of clients (e.g. singles) since the Act came in but this had been the conversations and casework they had conducted with the service users rather than H-CLIC data.

Senior staff were more positive overall but some still saw little added value in H-CLIC data – at least currently. Most could see the *potential* operational value of the detailed case-level data, for example in informing what prevention activities and specialist services they should invest in to reflect particular local needs. The issue was that they did not currently feel able to use the H-CLIC data in these ways. It was suggested that the format H-CLIC data is required to be reported in for quarterly

returns is not conducive to analysis. More broadly senior staff said they did not currently have the staff resource or expertise to carry out such analysis.

From their perspective, this is an area where MHCLG could provide more support in the future, either by through guidance and resources to assist local authorities in making use of H-CLIC data or conducting this analysis for them.

3.3 Factors mediating effectiveness of responses to the Act

Factors mediating the effectiveness of responses to the Act have already been touched on in this chapter. This section provides further evidence on the most significant challenges and facilitators from the local authority perspective.

3.3.1 Challenges

Figure 3.6 shows how local authorities responded to the unprompted open question in the survey on challenges they had faced in responding to the Act.

Figure 3.6   Significant challenges for local authorities to respond to the Act

What, if anything, have been significant challenges for your local authority to respond to the Homelessness Reduction Act?

- Insufficient access to affordable housing — 50% (112)
- Administration burden — 43% (96)
- Difficulties working with H-CLIC — 29% (65)
- Insufficient funding / uncertainty of future funding — 22% (49)
- Meeting needs of service users with more or different support needs — 15% (34)

Base: 224

3.3.1.1 Local affordable housing supply

The results in Figure 3.6 illustrate the perceived importance of local affordable housing supply in mediating local authority responses to the Act. Overall, 50% identified it unprompted as a significant challenge. Figure 3.7 also shows this broken down by type of local authority.

Figure 3.7   Significant challenges for local authorities to respond to the Act –
Insufficient access to affordable housing

What, if anything, have been significant challenges for your local authority to respond to the Homelessness Reduction Act? - Insufficient access to affordable housing

London	68% (20)
Unitary	52% (18)
Met	50% (13)
District	44% (61)

Base: 224

Around two-thirds (68%) of London boroughs cited affordable housing supply as a significant challenge, a higher proportion than among unitary, metropolitan and district councils. This is likely to partly explain the more negative reflections that London boroughs had on the effectiveness of their response to the Act - as reported at the start of this 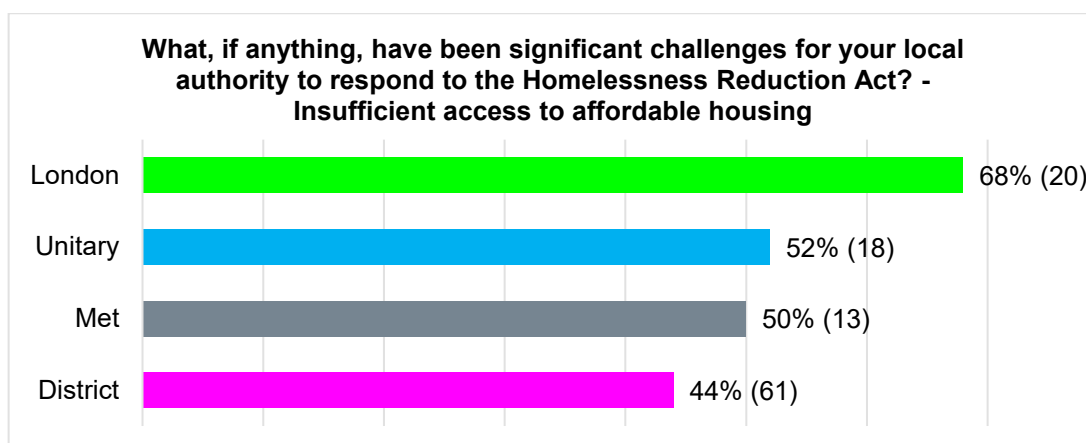chapter. The inner-London boroughs in the case study research also emphasised the difficulties they had in effectively helping service users find a place to live because of the shortage of affordable local housing.

However, a shortage of local affordable housing is not just a London phenomenon. Over 40% of the non-London local authorities in the survey also cited it as a significant challenge. In addition, some of the case study local authorities outside London reported it as an acute problem in their local area that had constrained the effectiveness of their response to the Act. This was linked to a shortage of social housing, the ongoing impact locally of the LHA freeze on the affordability of private rental sector properties, and wider benefit reforms. There was a view in these areas that the Act did not directly help to address this challenge.

"The HRA is a little bit of good but there are much larger problems around social housing insufficiencies, rent controls, LHA reform, and the bedroom tax [removal of the spare room subsidy]." (Local authority; London borough)

"The Act is a sticking plaster for a much wider problem with housing supply." (Local authority; District)

The extended prevention duty and new relief duty do not mandate local authorities to provide housing for households during these stages. However, the case study local authorities thought the availability and accessibility of affordable housing in the area was central to their ability to help service users under the new duties, especially the relief duty.

3.3.1.2   Administration burden

43% of local authorities cited administrative burden unprompted as a significant challenge in the survey. A large part of the perceived burden was associated with the collection of additional information for H-CLIC reporting in the assessment process and the administration of PHPs, already discussed in this chapter. Local authority staff also highlighted the new requirements set out in the Code of Guidance to write to service users at different stages, including each time a PHP is

updated and when a new duty is accepted. One respondent said they understood that a total of 18 letters should be issued to a service user who progressed through the prevention, relief and main duty stages.

This was such a concern partly because of the additional time implications for frontline staff. It also fed into wider concerns, voiced by frontline and senior staff, that the Act had contributed to an emphasis on process at the expense of practical casework to help service users.

"It's now become too process-y" (Local authority; Metropolitan)

"I think HRA was designed to help people and get them through homelessness, but the time we spend doing admin stops that". (Local authority; Unitary)

"There are parts of the HRA that have made it worse...it's all the paperwork" (Local authority; Metropolitan)

Staff in all the case study local authorities indicated that the new assessment and PHP requirements were being consistently met, but some frontline staff said they were not issuing letters to servicer users at all of the stages set out in the Code of Guidance.

3.3.1.3   Difficulties working with H-CLIC

29% of local authorities cited H-CLIC-related issues as a significant challenge in the survey unprompted. The reported difficulties with H-CLIC have already been discussed in this chapter. Again, this was primarily voiced as a concern by staff in the case study local authorities because of the additional time burden these difficulties were seen to have imposed, particularly early on in implementation.

3.3.1.4   Insufficient funding / uncertainty of future funding

Overall, 22% of local authorities cited funding-related issues as a significant challenge unprompted in the survey. However this varied by type of authority. As shown in Figure 3.8, a larger proportion of London boroughs and unitary authorities cited this factor than metropolitan and district authorities.

Figure 3.8   Significant challenges for local authorities to respond to the Act – Insufficient funding / uncertainty of future funding

What, if anything, have been significant challenges for your local authority to respond to the Homelessness Reduction Act? - Insufficient funding / uncertainty of future funding

London	38% (9)
Unitary	37% (13)
Met	23% (6)
District	14% (20)

Base: 224

Perceptions around the sufficiency of funding also varied across the local authorities in the case study areas.

A minority of the case study local authorities said they had been able to meet the costs of implementing the Act in the first year using their allocation of New Burdens funding only. These were authorities that reported only a limited impact on their prevention and relief caseload sizes as a result of the Act – either because they were a small district authority or because they had already been delivering extensive prevention and relief activities to non-priority households prior to the Act. Their additional costs had mainly been on increasing their staff capacity in response to the additional administration and processes required per case under the Act and on responding to the new H-CLIC data reporting requirements.

Most of the case study local authorities said they had needed to use their New Burdens funding and other sources of funding (typically the Flexible Homelessness Support Grant) to meet the costs of implementing the Act in the first year. They reported this was because they had experienced increases in their prevention and relief caseload sizes, in combination with the additional administration and processes required per case under the Act and on responding to the new H-CLIC data reporting requirements. The shortfall between their New Burdens funding allocation for 2018/19 and what the local authorities said had been their additional expenditure in this period varied widely but the general pattern was for the largest authorities to have reported the largest shortfalls.

In the first year of the Act, the case study local authorities did not think the costs of implementing the Act had been appreciably offset by any savings from a decrease in their main duty caseloads. Even if they reported their main duty numbers had gone down, or they could foresee them going down in future, they did not think the savings from this would be of the same scale as the additional costs associated with delivering the additional administration and processes required under the Act.

The last planned year of New Burdens funding is currently 2019/20. This helps explain why uncertainty over future funding was also cited in the survey and raised as a concern by case study local authorities.

"Our biggest fear is what is going to be possible post the funding." (Local authority; District)

Most of the additional expenditure reported by all the case study local authorities to date has been on additional staff - an ongoing rather than one-off cost - and there was particular anxiety about their ability to continue to meet these costs and keep staff in place after the New Burdens funding stops. Similarly, new services commissioned by local authorities in response to the Act are time-limited and would require further funding to continue.

Case study local authorities also emphasised that there was more they would like to be able to do to further enhance the effectiveness of their response to the Act - principally more staff, more investment in local affordable housing, and more specialist provision for different groups of service users.

3.3.1.5 Meeting needs of service users with more or different needs

15% of local authorities cited meeting the needs of service users with more or different needs as a significant challenge unprompted. This was fairly consistent by type of local authority. It is in line with the underlying increase in complex cases perceived prior to the Act and the reported further increases since, as the case study local authorities said they had engaged with more non-priority singles.

3.3.2 Facilitators

Local authorities were also asked an unprompted question in the survey about what factors had helped or facilitated them in responding to the Act. The results are shown in Figure 3.9.

Figure 3.9   Factors that helped or facilitated local authorities to respond to the Act

What, if anything, has helped or facilitated your local authority to respond to the Homelessness Reduction Act?

Factor	Percentage
Central government funding and grants	39% (87)
Support from MHCLG Homelessness Advice and Support Team	28% (63)
Staff training	26% (58)
Working with local partners	19% (43)
Staff engagement and leadership	15% (37)

Base: 224

3.3.2.2 Central government funding and grants

The results in Figure 3.9 illustrate the importance of the financial support provided to local authorities to respond to the Act. Over a third (39%) of local authorities cited this unprompted in the survey, which is a higher proportion than any other factor.

Despite their concerns about the sufficiency and certainty of future funding, case study local authorities also emphasised that, without the New Burdens funding and additional funding they had drawn from their Flexible Homelessness Support Grant, they would not have been able to make the positive progress they had so far in responding to the Act.

3.3.2.3 Support from MHCLG HAST team

A total of 28% of the local authorities in the survey cited support from MHCLG's HAST team as a help or facilitator unprompted. Case study local authorities also said they had received support from their HAST advisor at various points before and after the Act coming into force. This included initial advice that had helped to shape planning and preparation for the Act, as well as ongoing advice, support, and sharing of good practice and learning from other local authorities to inform ongoing implementation and delivery of the Act.

The HAST input was viewed as being *"useful"* and *"relevant"*. For example, senior staff at one local authority said they had been told by their HAST advisor about how another local authority had restructured its provision in response to the Act and were now considering adopting a similar approach themselves.

The fact that HAST advisors had previous experience of working in local authorities and or the homelessness sector was seen as an important part of this.

"They know what it's about, it's not a civil servant somewhere who's come up through another route". (Local authority; District)

More broadly, the creation of the HAST team was perceived as a positive development that helped create a two-way line of communication between MHCLG and local authorities. The only less positive feedback was from one local authority that did not feel that its HAST advisor had sufficiently understood the distinct local challenges they perceived were unique to their local area.

3.3.2.4 Staff training

In total, 26% of the local authorities in the survey cited staff training as a help or facilitator unprompted. Despite some perceived challenges and potential gaps in their staff training, discussed in Section 2.4.2, case study local authorities also thought it had been essential in preparing their staff to meet the new requirements of the Act.

3.3.2.5 Working with local partners

Around one in five (19%) local authorities in the survey cited working with local partners as a help or facilitator unprompted. The role of local partners is explored more fully in Chapter 5, in the context of the Duty to Refer, but several of the case study local authorities also said that local partners had performed a valuable wider role in contributing to their planning for the Act and since.

3.3.2.6 Staff engagement and leadership

A total of 15% of the local authorities in the survey cited staff and leadership engagement as a help or facilitator unprompted. In the case study local authorities, frontline staff were praised for their resilience in responding to the new requirements, and often heavier workloads, under the Act. Local authorities that had taken on new staff not from a traditional housing background were positive about their enthusiasm and responsiveness to the ethos of the Act. At a strategic level, senior local authority staff and leaders were also identified by stakeholders as an important determinant of how different local authorities had interpreted and responded to the Act.

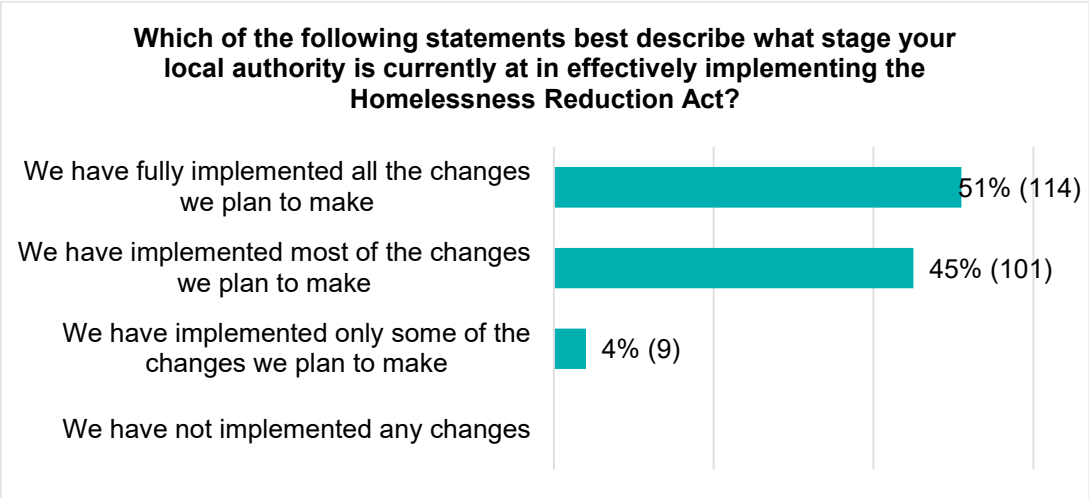# 4   Now and next for the implementation of the Act

This chapter provides evidence on the extent of progress across local authorities in implementing the Act at the time the evaluation research was conducted (July to October 2019) and future plans at that point.

The focus of the chapter is on the implementation of the elements of the Act that came into force in April 2018. Findings on Duty to Refer are reported in Chapter 5.

4.1   Where local authorities are now on implementation

Local authorities were asked in the survey about what stage they considered their area to be at in implementing the Act. The results are shown in Figure 4.1.

Figure 4.1   Where local areas are now on implementation

Which of the following statements best describe what stage your local authority is currently at in effectively implementing the Homelessness Reduction Act?

We have fully implemented all the changes we plan to make	51% (114)
We have implemented most of the changes we plan to make	45% (101)
We have implemented only some of the changes we plan to make	4% (9)
We have not implemented any changes	

Base: 224

Local authorities in the survey were fairly evenly split between those who said they had fully implemented all the changes they planned to make (51%) and those who said they had only implemented most or some of the changes they planned to make (49%).

London boroughs were the least likely to report said they had fully implemented all planned changes (38%). District councils were the most likely to report this (57%). This is likely to reflect the particular challenges reported for London boroughs around local housing supply, capacity and funding discussed in the previous chapter. There was also some evidence of a Trailblazer effect. Over half (56%) of local authorities that had participated in the Trailblazer programme said they had fully implemented all the changes they planned to make, compared to 50% of others.

Figure 4.2 shows the results for a further question in the survey that asked local authorities how advanced they were in implementing different elements of the Act.

Figure 4.2 Where local areas are now on implementing different elements of the Act

Which of the following statements best describe what stage you are at in effectively implementing different elements of the Homelessness Reduction Act?

Element	Implemented all changes	Implemented most changes	Implemented some changes
H-CLIC data reporting requirements	76% (168)	19% (42)	5% (12)
The introduction of Personalised Housing Plans	86% (191)	13% (29)	2% (5)
The information and advice duty	67% (148)	27% (59)	7% (16)
The new relief duty	80% (178)	17% (37)	3% (7)
The extended prevention duty	77% (170)	19% (42)	5% (10)

Base: 224

In line with the findings reported in Chapter 4, these results suggest local authorities have made the least progress so far in implementing changes in response to the information and advice duty. Just over two-thirds (67%) said they had fully implemented all the changes they planned to make in response to this element of the Act compared to over three quarters said they had implemented all the changes they planned to make in response to the other elements of the Act.
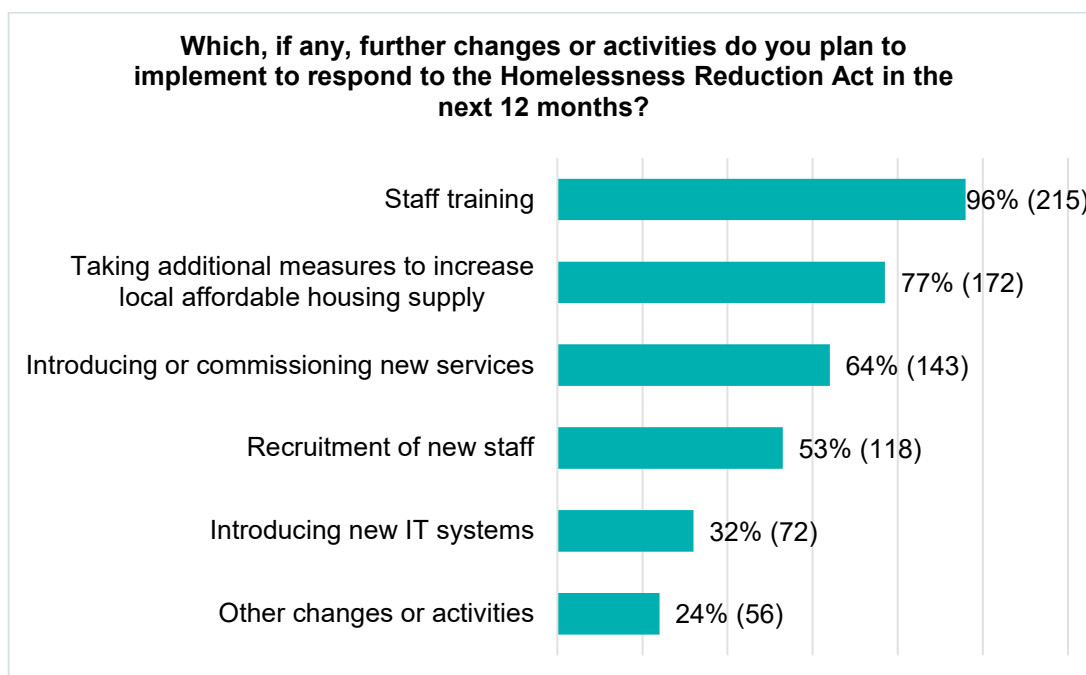
Again, there were variations in these results between different local authorities. London boroughs were less likely to say they had implemented all the changes they planned to make in response to each of the elements of the Act compared to other local authorities (apart from on the introduction of PHPs, where they were comparable). A higher proportion of previous participants in the Trailblazer programme said they had implemented all the changes they planned to make in response to the extended prevention duty, but there was less evidence of any apparent Trailblazer effect in relation to other elements of the Act.

Overall, and in terms of the variations between different local authorities, these results are broadly consistent with what was reported in the case study research. However, if anything, they may understate the further work most local authorities still have planned to support the effective implementation of the Act in their local area. As discussed in the next section, when they were asked about these future plans, almost all said there were further changes or activities they still planned to introduce.

4.2 Future plans

Figure 4.3 shows the responses local authorities provided in the survey when asked about changes or activities they planned to introduce in next 12 months.

Figure 4.3   Further activities and changes planned

Which, if any, further changes or activities do you plan to implement to respond to the Homelessness Reduction Act in the next 12 months?

Activity	Percentage
Staff training	96% (215)
Taking additional measures to increase local affordable housing supply	77% (172)
Introducing or commissioning new services	64% (143)
Recruitment of new staff	53% (118)
Introducing new IT systems	32% (72)
Other changes or activities	24% (56)

Base: 224

The high proportions of local authorities saying they planned further changes and activities also reflects the comments in the case study research. Even among case study local authorities that thought they were already delivering effectively on the requirements of the Act, there was a sentiment that they had not yet reached the end of their implementation journey, and that to an extent this journey will *"never be completely done and finished"*.

4.2.1.2   Staff training

Almost all (96%) local authorities in the survey said they planned further staff training. The types of staff training that case study local authorities said they planned closely correspond to the implementation challenges discussed in Chapter 3. This included training for frontline staff to make better use of PHPs, training in conducting more effective casework, and training (in local authorities where this was still perceived to be needed) to reinforce the culture change aspect of the Act across all staff.

4.2.1.3   Additional measures to increase local affordable housing supply

Most (81%) local authorities in the survey said they planned additional measures to increase local affordable housing supply, although this was lower amongst district councils (71%). This is not surprising given the emphasis that case study local authorities gave to housing supply as a mediating factor in the effectiveness of their response to the Act to date. The types of measures planned in the case study research included measures to increase access to the private rental sector, further work with RSLs, and new property building or purchasing.

4.2.1.4   Introducing or commissioning new services

Around two-thirds (68%) of local authorities in the survey said they planned to introduce or commission new services. As with the new services most said they had

already implemented in responding to the Act, the focus in these further planned services was on increasing provision for non-priority service users, particularly those with complex needs. Two local authorities also said they planned to introduce services to conduct more upstream prevention work.

4.2.1.5 Recruitment of new staff

Over half (55%) of all local authorities in the survey said they planned to recruit new staff, and this was appreciably higher in London boroughs (81%). As reported in Chapter 2, all local authorities said they recruited some new staff in preparation for the Act coming into force, but several case study local authorities said they did not think this had been sufficient to meet the increased demands on their capacity. Most indicated they planned to recruit more frontline staff rather than more senior staff to address this.

4.2.1.6 Introducing new IT systems

A third (33%) of all local authorities in the survey said they planned to introduce new IT systems. This is higher than the case study research would suggest, although at least one of the case study authorities, which had initially developed its own in-house IT system to meet the H-CLIC requirements, reported that it was planning to purchase a new system from an external IT provider.

4.2.1.7 Other changes or activities

A quarter (25%) of all local authorities in the survey said they planned to introduce other changes or activities. These, and other changes or activities mentioned by case study local authorities, included: reviewing and potentially restructuring their current provision (based on their learning from how effectively this has worked to date), creating new information and advice resources, and developing new prevention strategies. However, there were few if any mentions of concrete plans to make more use of H-CLIC data or to gain feedback from service users on their experiences of local provision since the Act had come in.
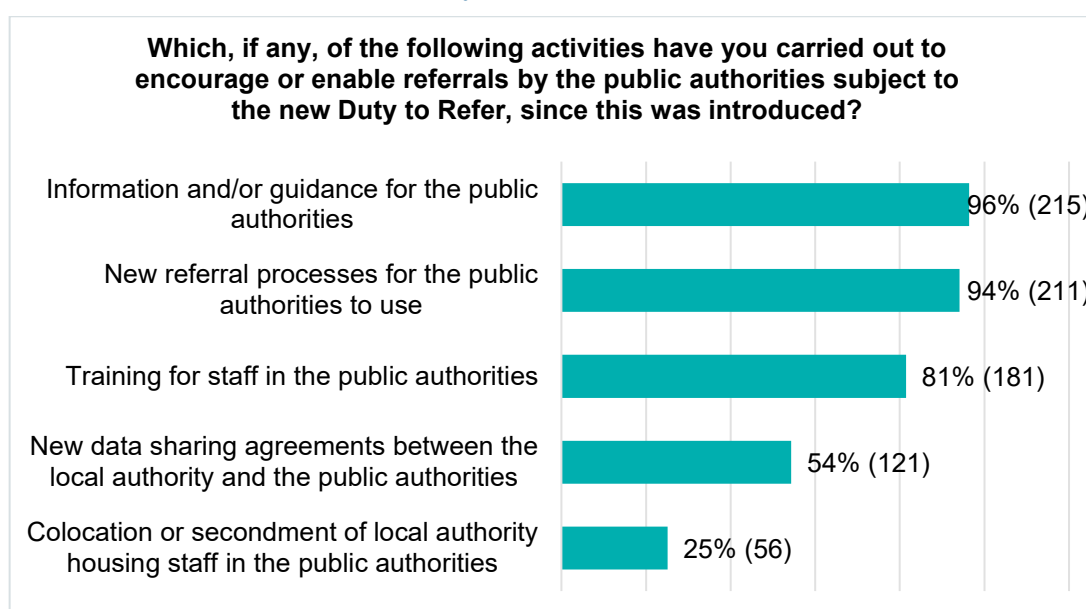
5   The Duty to Refer

This chapter reports the findings from the evaluation on the Duty to Refer, in terms of how it has been implemented to date in local areas, its perceived effectiveness, and how this may progress in future.

5.1   How the Duty to Refer has been implemented

The Duty to Refer came into force six months after the other elements of the Act, in October 2018.

As described in Chapter 1, it placed a new duty on public authorities to refer individuals who may be at risk or already homeless to local authorities. In the survey conducted for this evaluation, local authorities were asked about what activities they had undertaken to support the implementation of this new duty. Figure 5.1 shows the results.

Figure 5.1   Activities undertaken by local authorities to encourage and enable referrals under the Duty to Refer

Which, if any, of the following activities have you carried out to encourage or enable referrals by the public authorities subject to the new Duty to Refer, since this was introduced?

Activity	Percentage
Information and/or guidance for the public authorities	96% (215)
New referral processes for the public authorities to use	94% (211)
Training for staff in the public authorities	81% (181)
New data sharing agreements between the local authority and the public authorities	54% (121)
Colocation or secondment of local authority housing staff in the public authorities	25% (56)

Base: 224

These results were similar across different types of local authority and echo the activities that local authorities described undertaking in the case study research.

Local authorities in the case studies said information and/or guidance on the Duty to Refer had initially been delivered by senior staff in meetings, briefings, and open days with public authorities in their area. Local authorities that already had a local homelessness forum or similar identified this as an obvious benefit in being able to raise awareness of the Duty to Refer with other public authorities at a senior level.

Other local authorities said that the Duty to Refer, and the Act more widely, had been a spur for them to restart or establish new relationships with local public authorities – initially through senior level engagement. It was also at this senior level that new data sharing arrangements had been agreed, where these didn't exist between the local authority and public authority already.

This initial engagement had either been followed by local authority staff providing written guidance, briefings and/or training to frontline public authority staff or this task had partly or wholly been taken on by senior staff in the public authority.

The creation of new referral processes for public authorities to use was also widely reported by the case study local authorities, although approaches to this varied. Some local authorities and public authorities said they already had effective and well used referral processes before the new duty came in and had not sought to alter these.

However, where they didn't already exist, local authorities had either sought to develop a single, central referral process for use by all public authorities or negotiated and developed tailored processes for different public authorities to use. Jobcentre Plus also developed a national protocol for frontline jobcentre staff to follow in make referrals through the Duty to Refer. It was reported that this national protocol was being followed in the case study areas, alongside the referral processes being used by other public authorities.

Colocation or secondment of local authority staff was reported less widely in the case study local authorities, although there were reported examples of local authority housing staff spending some of their time – e.g. one appointed day a week or fortnight – on the premises of other public authorities. This was most often a local jobcentre but also included, in one area, the local probation service.

Overall these findings suggest a high degree of activity by local authorities to support the implementation of the Duty to Refer. However, most of the case study local authorities said that they had not – or at least not yet – undertaken all these activities with every public authority in their local area. In addition, they reported varying levels of receptiveness amongst the public authorities they had sought to engage with on the Duty to Refer (this was also reflected in the receptiveness of some public authorities to participating in the evaluation).

An internal constraint voiced by case study local authorities was on senior staff time. Senior staff had been working on this alongside other responsibilities (including their response to the other elements of the Act). Despite the Duty to Refer coming in six months later than the other elements of the Act, some senior staff still describe its implementation in their area as having been time-constrained.
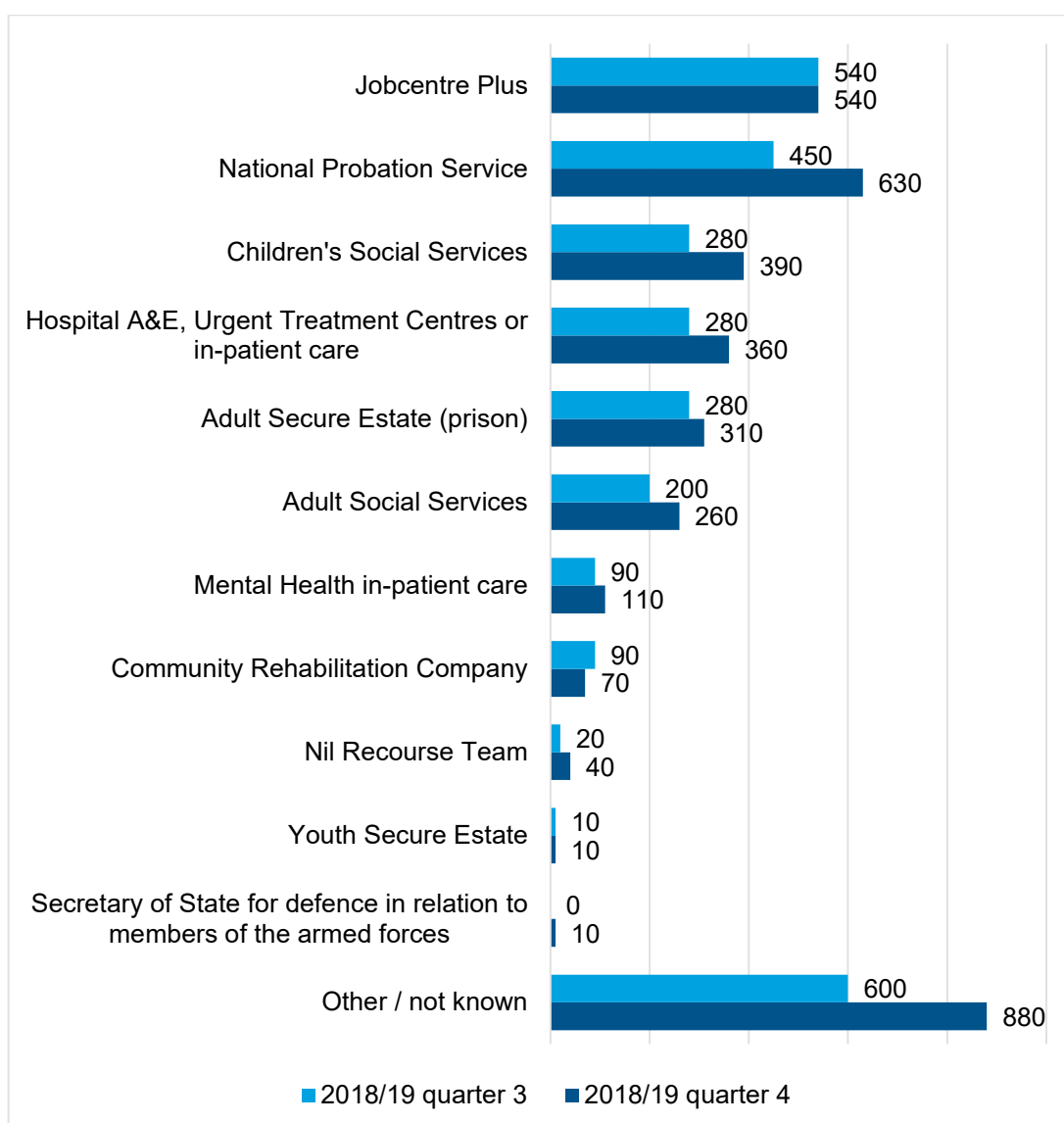
"It didn't feel like there was enough time to work with partners before the duty to refer went live." (Local authority; Unitary)

The receptiveness and responses of public authorities to the Duty to Refer is explored in the next section.

5.2 The effectiveness of implementation and delivery of the Duty to Refer

As part of the new H-CLIC data reporting requirements, local authorities have been asked to record the number of referrals they receive under the Duty to Refer. Figure 5.2 shows the reported number of referrals by different public authorities in the first two quarters after the duty came into force.

Figure 5.2   H-CLIC statistics on the number of referrals reported by local authorities under the Duty to Refer
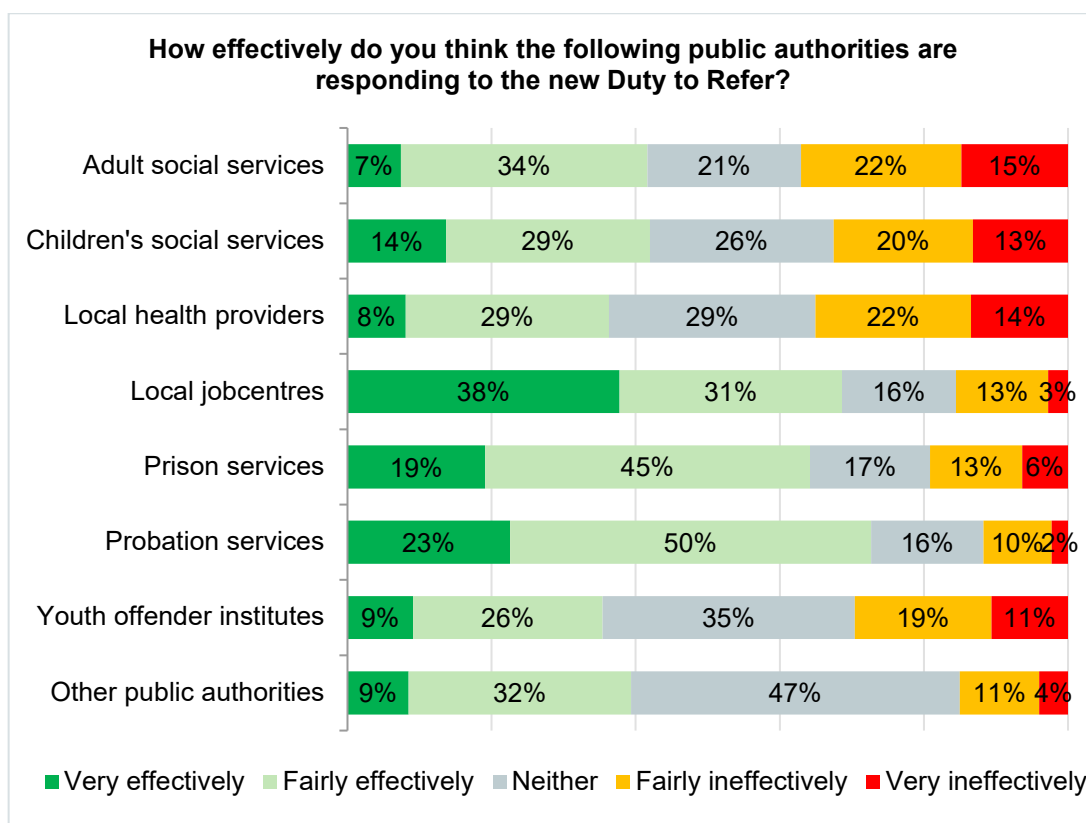

Source: MHCLG (2019) Live tables on homelessness, Initial assessment tables

Notes: "Other / not known" indicates where a local authority indicated a referral was made under a duty to refer but did not provide the public authority. MHCLG are working with local authorities to improve this information. "Nil recourse team" can be for adult or children's social services. Total figures are presented rounded to the nearest 10 households.

Overall, 2,830 referrals under the Duty to Refer were reported in quarter 3 of 2018/19 and 3,580 in quarter 4 of 2018/19. The largest number of identifiable referrals reported in both quarters were from Jobcentre Plus and the National Probation Service.

Local authorities were also asked in the survey for this evaluation about how effectively they thought different public authorities were responding to the Duty to refer. The results are shown in Figure 5.3.

Figure 5.3   Views on how effectively public authorities are responding to the Duty to Refer

How effectively do you think the following public authorities are responding to the new Duty to Refer?

	Very effectively	Fairly effectively	Neither	Fairly ineffectively	Very ineffectively
Adult social services	7%	34%	21%	22%	15%
Children's social services	14%	29%	26%	20%	13%
Local health providers	8%	29%	29%	22%	14%
Local jobcentres	38%	31%	16%	13%	3%
Prison services	19%	45%	17%	13%	6%
Probation services	23%	50%	16%	10%	2%
Youth offender institutes	9%	26%	35%	19%	11%
Other public authorities	9%	32%	47%	11%	4%

■ Very effectively   ■ Fairly effectively   ■ Neither   ■ Fairly ineffectively   ■ Very ineffectively

Base: 224

These results suggest a similar pattern to the H-CLIC statistics, with the highest proportion of local authorities saying probation services (73%) and local jobcentres (69%) were responding effectively to the Act. Less than 50% of local authorities said that adult social services, children's social services, local health providers, youth offender institutes and other public authorities were responding effectively to the Act - although it is worth noting that for youth offender institutes and other public authorities, the most common answer was "neither agree nor disagree".

One notable difference in the survey results is that a smaller proportion of district authorities thought that adult and children's social services were responding effectively to the Duty to Refer than other authorities. 26% of district authorities said adult social services were responding effectively (compared to 41% across all local authorities) and 29% said children's social services were responding effectively (compared to 43% across all local authorities). The case study findings indicate this is partly because district councils are not responsible for adult or children's social services. Staff thought this organisational distance between the district council's housing options team and social services in the county council had been an inhibitor to their engagement around the Duty to Refer.

Probation services and local jobcentres were reported to have been the most responsive to the Duty to Refer in most of the case study areas. Beyond this there were few discernible patterns in how different public authorities had responded in different areas. In one area a public authority would be said to be making a high volume of referrals but in another area the same type of public authority would be reported to be making very few. Overall, the timeliness and appropriateness of the

referrals being made was also reported to be improving over time but still variable, and no one type of public authority emerged as clearly best or worst in this regard.

However, as a whole, greater progress had evidently been made around the Duty to Refer in some case study areas than others. In these comparatively early days of the Duty to Refer, the pre-existing relationships and partnership-working between local authorities and public authorities appears to have been the main determinant of this. Areas that were more active already in this respect had an obvious head-start. Equally, other factors have mediated the effectiveness of the Duty to Refer to date, and these are discussed here:

5.2.1.1 Public authority perceptions

The most effective examples of the Duty to Refer working in practice, and the highest reported volumes of referrals, were characterised by a belief amongst public authority staff that making a referral could benefit both them and the service user.

"It is in everyone's interest to work together to achieve an outcome for the client."
(Local organisation; London borough)

For example, probation officers and jobcentre work coaches both reported housing as a frequent issue for their client groups and believed that if this could be addressed it helped them achieve better outcomes for the clients. Senior staff also perceived an organisational benefit to this, in terms of improved performance against targets. Equally, the probation service and jobcentre plus both work with clients on an ongoing basis and these benefits may be less obvious or visible to, for example, an A&E nurse. Positive perceptions of the benefits of referrals had also typically been reinforced by real examples of clients who had been referred and helped by the local authority, which requires the initial engagement of the public authority and some form of feedback after referrals are made.

Local authorities that had made progress with public authorities they previously had little engagement with before the Act also talked about the importance of setting reasonable expectations. For example, one said they had initially encountered an element of *"disbelief"* from public authority staff that the local authority housing options team would be willing to take on referrals and could help their clients. At the other end of the scale, another reported that the expectations of public authorities had initially been too high – assuming the local authority would be able to house every client they referred.

5.2.1.2 Public authority (and local authority) resources

A perceived lack of time and staff resource was cited by local authority staff as the main reason why certain public authorities in certain case study areas were not making referrals under the Duty to Refer. Specifically, adult and children's social services in some of the areas were said to be under pressure due to reductions in funding and increases in demand on their services. To a lesser extent, and on a more individual level, staff in A&E and Urgent Treatment Centres were said to be *"too busy"* to make referrals in an area.

In areas where these types of public authority had fully engaged with the Duty to Refer, this had often been because the local authority had committed some of its own staff resource to the process, for example by having a housing officer attend social services case meetings or by creating a dedicated job role or team with responsibility for engaging with local health providers. Where these approaches existed, they had typically been initiated prior to the Act. Since the Act, and as

described in Chapter 2, the focus of local authorities' staff recruitment had been on increasing frontline capacity. They indicated that devoting further staff resource to engaging with public authorities on the Duty to Refer was something they'd *"like to do"* but was not their greatest priority.

5.2.1.3 Post-referral collaboration

The Duty to Refer does not require public authorities to engage further with local authority housing options teams after making a referral. This was an element of the duty that several local authority staff and some public authority staff said they would like to see changed.

Joint casework and other forms of collaboration were perceived to be the ideal means of securing positive outcomes for service users that were referred - especially those with more complex needs. As a by-product it also ensured the public authorities engaged in this joint work had direct feedback on clients they referred and meant that the local authority could raise any issues with the appropriateness of their referrals with them.

In addition, there were very positive examples in the case studies of how local authorities and some public authorities were working in this way before and since the Duty to Refer came in. However, some local authorities that had sought to use the duty as a springboard to develop these kinds of arrangements with other public authorities (adult and children's social services and health providers were the examples given) said they had found this difficult. Rather than wanting to engage, it was suggested that they were treating the Duty to Refer more as a *"duty to dump"*. The perception was that they were trying to transfer responsibility for meeting a client's needs onto the housing options team and disengage themselves after the point of referral.

Housing staff in local authorities were sympathetic to the pressures they understood these public authorities to be under (see Section 5.2.1.2) and, to reiterate,e this was only reported in some case study areas. Nonetheless it was cited as a significant ongoing challenge where it was reported.

5.2.1.4 The Jobcentre Plus national protocol

Local authority and Jobcentre Plus staff had both positive and some negative reflections on the national protocol. The positives were that it had ensured all work coaches in all jobcentres had a ready Duty to Refer referral process at their disposal. In case study areas it was reported that the referral process had been integrated into the IT interface that work coaches use when engaging with a client, and was a relatively quick process to complete.

"It's good it is in place. When someone says they are being evicted or are homeless, now we can refer and it's recorded on the claim." (Local organisation; Unitary)

Some work coaches cited a lack of feedback from the local authority after the point of referral as one negative element of the process. It was also thought by some jobcentre managers that additional or refresher training would be beneficial to retain awareness and usage of the process by work coaches.

Local authorities in the case studies were appreciative of referrals from Jobcentre Plus and saw them as a key local partner because of their client group.

"It's good, they can pick up on people before they hit crisis point. We have two people here for income and expenditure, so a lot of the JCP referrals go to them". (Local organisation; Metropolitan)

An issue with the process, at least in some case study areas, was a perceived shortage of information about the client and/or out of date contact details in Jobcentre Plus referrals. This was not unique to referrals from Jobcentre Plus but was cited most frequently as an issue with referrals from them. A housing officer in one case study area said in these instances they contacted the jobcentre directly to get such details but in another case study area, local authority staff said they understood this was not allowed under the national protocol.
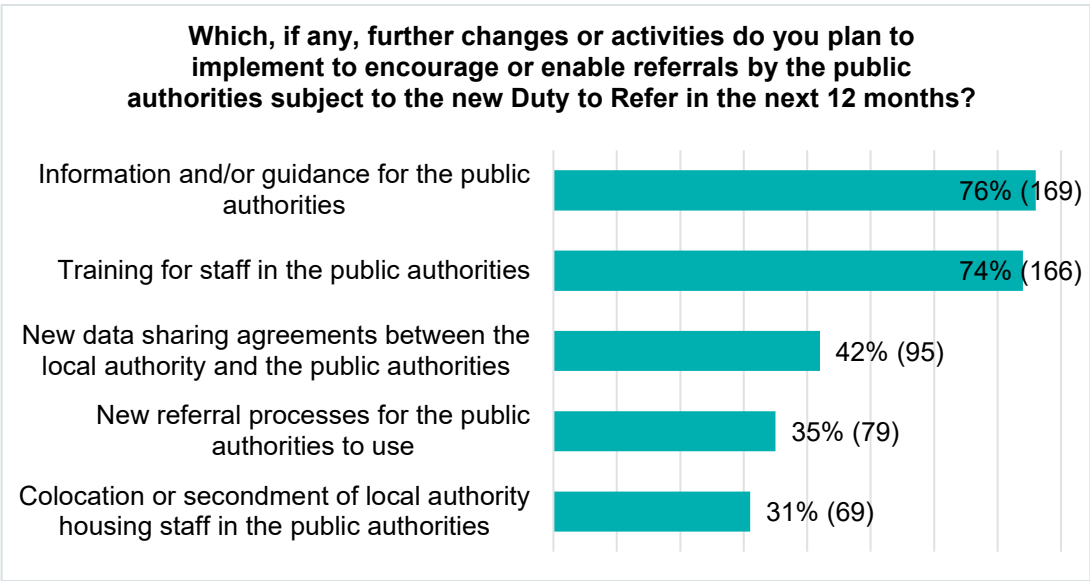
5.2.1.5 Alternative referral pathways

This is not necessarily a challenge or barrier but is likely to be a factor in why Duty to Refer referral numbers are comparatively low for certain public authorities in certain areas. There were public authorities in two case studies area said they had commissioned services or third sector provision that they referred clients onto for help with their housing situation. The local authorities in these areas were aware of this and, in cases where they thought the relevant service or provision met the needs of the service user, supported it.

5.3 Future implementation of the Duty to Refer

Local authorities and public authorities in the case study areas generally viewed the implementation of the Duty to Refer as an ongoing process. Local authorities in particular often said they planned to engage with more public authorities in their area that they had not so far engaged with to promote the Duty to Refer and to build on their existing relationships with others.

The view of the Duty to Refer as an ongoing process was reflected in a high proportion of local authorities in the survey saying that they did plan further activities around the Duty to Refer in the next 12 months, as shown in Figure 5.4.
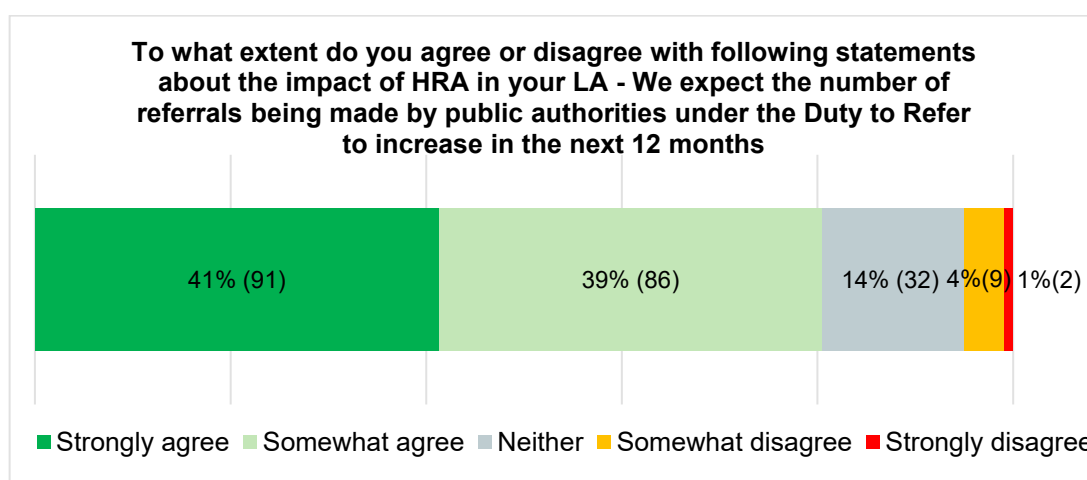
Figure 5.4   Activities planned by local authorities to encourage and enable referrals under the Duty to Refer in the next 12 months

Which, if any, further changes or activities do you plan to implement to encourage or enable referrals by the public authorities subject to the new Duty to Refer in the next 12 months?

Activity	Percentage (count)
Information and/or guidance for the public authorities	76% (169)
Training for staff in the public authorities	74% (166)
New data sharing agreements between the local authority and the public authorities	42% (95)
New referral processes for the public authorities to use	35% (79)
Colocation or secondment of local authority housing staff in the public authorities	31% (69)

Base: 224

Most local authorities also expected the number of referrals under the Duty to Refer to increase over the next 12 months, as shown in Figure 5.5.

Figure 5.5   Expectations for the number of referrals under the Duty to Refer in the next 12 months

To what extent do you agree or disagree with following statements about the impact of HRA in your LA - We expect the number of referrals being made by public authorities under the Duty to Refer to increase in the next 12 months

| 41% (91) | 39% (86) | 14% (32) | 4%(9) | 1%(2) |

■ Strongly agree ■ Somewhat agree ■ Neither ■ Somewhat disagree ■ Strongly disagree

Base: 220

Overall, 80% of local authorities in the survey agreed that they expected the number of referrals being made under the Duty to Refer to increase in the next 12 months, and this was consistently high across all types of local authority.

However, despite this positive outlook, some of the challenges to engaging certain public authorities around the Duty to Refer highlighted in Section 5.2 were viewed as difficult for local authorities to tackle completely themselves. The following suggestions were made as to how this could be addressed, and more broadly how the effectiveness of the Duty to Refer could be supported:

■ Expanding the scope of the Duty to Refer to a Duty to Collaborate, which would require public authorities to continue to engage and work with a housing options team after the point of referral in cases where this would be beneficial to the service user (especially those with multiple support needs). Equally, it was thought that some public authorities may need additional funding to be able to meet such an extended duty.

■ Further promotion of the Duty to Refer by MHCLG at a national level, and further promotion of the Duty to Refer by national bodies to the local public authorities they oversee or represent. It was also suggested that either MHCLG or national bodies should monitor the referral practices and volumes of the local public authorities. Interviewees did not favour a punitive approach but did see value in some level of scrutiny and accountability.

■ Reviewing the public authorities that are currently subject to the Duty to Refer. Specifically, several queried why GPs had not been included whilst other health providers had. GPs were seen as "the obvious choice" as they may be one of the main ports of call for people in crisis and are more likely to have an ongoing relationship with their patients than some other health providers. Mental health and drug and alcohol services were also perceived by local authority housing staff to be an important potential partner in helping the increasing number of service users they are seeing with complex needs, and there were calls for the Duty to Refer to be extended to include them.

6   Emerging outcomes under the Act

This chapter describes (as far as evidence allows) the outcomes that have been achieved for service users to date under the Act.

It draws on evidence from three main sources:

- H-CLIC data for the first 12 months of the Act;
- Qualitative interviews conducted with service users, local authority staff and local organisations in the case study areas; and
- The survey of local authorities.

The H-CLIC data provides a snapshot of outcomes achieved since the Act was introduced. Due to the differences in data collection methods, it is not possible to compare H-CLIC and earlier P1E data. This makes it challenging to quantify changes in outcomes post-Act, but the qualitative data speaks to how and what outcomes people perceive to have emerged to direct comparison with the situation prior to the introduction of the HRA.

Service users are not a homogenous group. Case study interviews were conducted with people with widely differing circumstances. The survey with local authorities focused on three key groups:

- Rough sleepers;
- Families with children; and
- A third group, characterised as covering non-priority groups before the introduction of the Act, which included single people and couples without dependent children.

This third group was highlighted in work that preceded the introduction of the Act as encompassing people who were particularly disadvantaged by previous eligibility criteria. The first two are groups for whom there continue to be significant concerns about their housing and wellbeing outcomes.

While the service user interviews were with people who fitted into one of these three categories, their reason for homelessness were more varied. This included personal circumstances affecting people's ability to pay rent, manage budgets or stay in homes including:

- Domestic abuse;
- Family or relationship breakdown;
- Disability or physical and mental health problems,
- Substance misuse;
- Hospital stays and post-discharge difficulties;
- Taking on caring role for friends and/or family; and
- Redundancy and other causes of unemployment.

Interviews were also conducted with people living in private rented properties whose landlords had sold properties, or who had moved to more insecure types of accommodation (e.g. caravans in seasonal caravan parks) and so required support to find alternative accommodation.

At this more granular level, experiences were so diverse that they could not meaningfully be mapped to a systematic typology for service user outcomes or type

of approach. However, there were key themes that emerged from the qualitative work to explain outcomes and quality of experiences.

The diversity of experiences (and settings in which interviews took place) are also important in understanding service user perceptions and opinions on their interactions with the local authority. Those looking for social housing and not receiving it (for whatever reason) might have struggled to see any element of their experiences positively. We therefore present here a balanced picture of experiences that takes this into consideration.

6.1 How many and who receives help

6.1.1 How many people are local authorities helping?

It is not possible to provide a before and after comparison of this because of the differences between P1E and H-CLIC data. However, local authority staff across most case study commented on the increased numbers of people approaching them for help since the Act was introduced. For example, one reported a 48% in enquiries to the service (including referrals), another described a 30% increase in people seeking support, and another a 117% increase. All these local authorities indicated that these increases in presentations had translated into higher prevention and relief caseloads that before the Act.

The local authorities in a minority of the areas described an increase that was either smaller (e.g. 20%) or indicated that they have not seen any, or not a particularly high, increase in the number of people they are supporting compared to previous years. Either these were a small district council or a local authority that already conducted extensive prevention activities with priority and non-priority applicants prior to the Act.

"It hasn't had an impact on our caseload sizes…we took on basically everybody that walked through the door." (Local authority; Metropolitan)

Overall, this chimes with research conducted by the Local Government Association, in which 83% of local authority respondents in its December 2018 survey indicated that their authorities had seen an increase in presentations, with a third indicating that this increase was significant[25].

6.1.2 Types of people being supported by local authorities

While the data does not allow pre- and post-Act comparison, it is possible to analyse duties accepted since April 2018 by household type in order to identify who local authorities have been supporting since the Act was implemented. This provides insight into the key intention of the Act to expand support beyond groups traditionally accepted as priority, and the findings are positive.

Table 6.1 shows that a total of 145,020 households were accepted as being owed a prevention duty in the first year of the Act. Of these, 72,100 (50%) were single adults without dependent children and 10,880 (8%) were couples without dependent children.

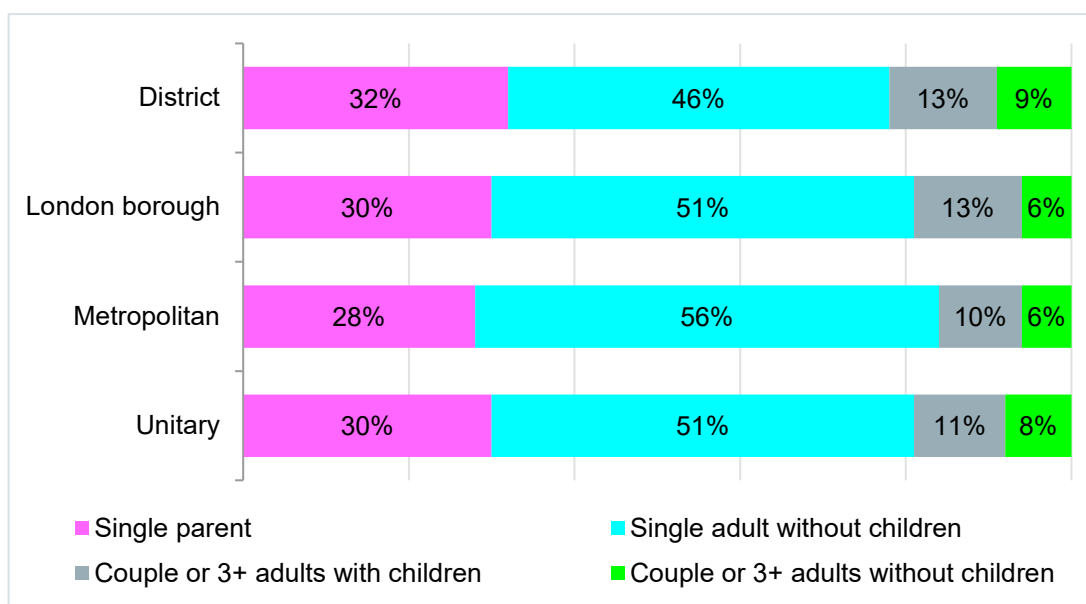[25] Local Government Association, 2019, Homelessness Reduction Act Survey 2018 – Survey Report.

Table 6.1   Households owed prevention duty, 2018/19, by region

	Total owed prevention duty	Single parent	Single adult without children	Couple or 3+ adults with children	Couple or 3+ adults without children	Not known
England	145,020	44,590	72,100	17,450	10,880	50
London	30,240	9,290	15,220	3,970	1,800	10
Rest of England	114,780	35,320	56,890	13,480	9,080	40
North East	8,220	2,260	4,770	600	640	0
North West	18,410	5,610	9,470	1,900	1,420	0
Yorkshire & Humber	14,300	4,150	7,750	1,410	980	0
East Midlands	12,120	4,010	5,550	1,530	1,020	0
West Midlands	11,310	2,750	6,670	1,200	710	0
East of England	14,890	4,960	6,500	2,170	1,290	0
London	30,240	9,290	15,220	3,970	1,800	10
South East	21,060	7,460	8,750	3,020	1,830	40

Source: H-CLIC data

Figure 6.1 shows that these proportions are also fairly consistent across different types of local authority.

Figure 6.1   Households owed a prevention duty, 2018/19, by local authority type

Source: H-CLIC data

Singles without dependent children represent an even higher proportion of households accepted as being owed a relief duty in the first year of the Act. Table 6.2 shows that a total of 118,700 households were accepted as being owed a relief duty. Of these, 84,880 (72%) were single adults without dependent children and 5,240 (4%) were couples without dependent children.
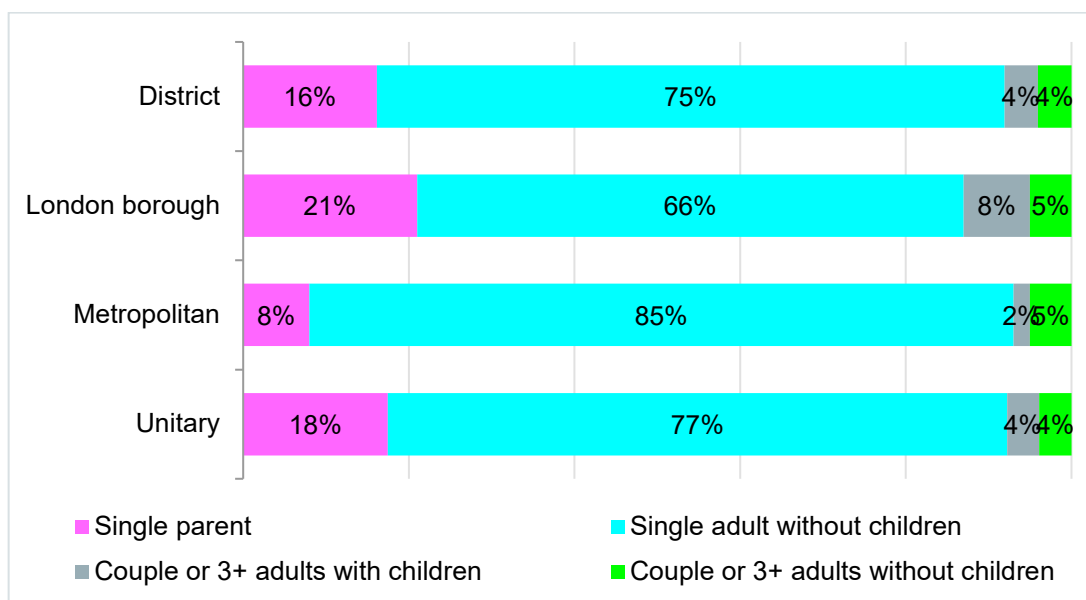
Table 6.2   Households owed relief duty, 2018/19, by region

	Total owed relief duty	Single parent	Single adult without children	Couple or 3+ adults with children	Couple or 3+ adults without children	Not known
England	118,700	22,760	84,880	5,820	5,240	20
London	22,040	4,880	14,900	1,490	800	0
Rest of England	96,650	17,870	70,020	4,330	4,450	20
North East	6,570	790	5,420	150	230	0
North West	17,760	3,090	13,240	770	680	0
Yorkshire & Humber	11,660	1,800	8,960	410	520	0
East Midlands	9,710	2,060	6,760	460	430	0
West Midlands	12,650	2,310	9,260	610	500	0
East of England	11,610	2,660	7,690	680	610	0
South East	16,450	3,470	11,110	890	980	10
South West	10,260	1,740	7,600	430	540	0

Source: H-CLIC data

Figure 6.2 shows that single adults without dependent children and couples without dependent children represent the largest proportion of those accepted as being owed a relief duty in Metropolitan authorities (90%) and the smallest in London (71%).

Figure 6.2   Households owed a relief duty, 2018/19, by local authority type

Source: H-CLIC data

Across most of the case studies, local authority staff and partners also said the Act had led to an increase in support being available to single people during the prevention and relief stages.

"Now we deal with non-priority single males – previously they would have just got information and advice – now we can assist them" (Local authority; London borough)

Only in a minority of case study areas was this not reported, because their existing approach already included these previously more excluded groups. Box 6.1 is an example of how a single male without dependent children had been helped.

Box 6.1   Case study example

A, aged 28, recently came out of prison after a year's sentence, which helped him to get clean from drugs. He managed to get settled in a privately rented place but was kicked out by his landlord without being given notice. This left him homeless again.

Advised by his probation officer to approach the local authority housing advice team, he visited the Civic Centre to speak to a Housing Officer. He reported the support he received from them as supportive and respectful. They outlined what his options were and discussed them with him. They also offered him the option of using the Bond Scheme to access a private rented property (whereby the council cover two months' rent and deposit). They are helping him look for a place that was listed under this scheme. In the meantime they have found him a place in a hostel. *"Everything they've done for me is perfect"*

Box 6.2 is an example of another single male. His situation highlights the persisting difficulty of identifying suitable accommodation for single people, but also the value of emotional support available from housing services.

Box 6.2   Case study example

K, 26, has been in care and experiences drug addiction and mental health issues. has been involved with the council for a long time. He first came into contact with the housing team when he left care aged 18. He is used to being surrounded by staff in his life and found it difficult with foster parents as he wasn't familiar with the family setting. Recently he again found himself without somewhere to live and his aunt recommended he again approach the council for support.

In his experience, his housing worker the council has been really responsive. Currently K has four weekly catch ups and is in contact with the team daily, who also regularly check in on hostels. "I can't fault them, they are my mum and dad. It's sad, but it's good". He has faith in them and sometimes will just come in to say hello and have a chat. K is also struggling with his gender identity. There is a long (2-3 year) waiting list before he can be seen regarding this. In the meantime this is making it challenging to access some local services as several are men or women only.

Having been involved with the council for a while, he thinks the last 6 months to year has been "miles better" in terms of support. It's been more intensive (in a good way) and he knows where to come and who to speak to. Since getting in touch with the council he has lived in hostels and the private rented sector. He had a bad experience in a flat, and so currently is living in a hostel. K is currently looking to move again but considering different options .In the future he would like to do a salon course and get a self-contained flat.

Couples without children, perhaps reflecting the smaller numbers within caseloads, were not a group so prevalent case study interviews. Nonetheless, Box 6.3 is one example of the housing and wider support provided by a local authority to one couple without children.

Box 6.3   Case study example

K and his wife are a working age couple in council tenancy, both unemployed. K is disabled and his wife provides care. They lost their benefits income (DLA, carers allowance and income support) following DLA to PIP migration. But housing benefit continued and his wife was moved on to Jobseekers Allowance (JSA). Two of their bedrooms were subject to the bedroom tax (£23 per week). With the loss of income, the family went into rent arrears and could not pay their utilities' bill.

K self-referred to the Advice Plus service after he heard of the support from his brother. He had considered appealing the PIP decision but due to depression he could not manage it and was under a great deal of stress with the loss of benefit.

A Link worker visited the household three times and provided regular communication by phone. They looked at all the evidence and supported the couple to prepare the PIP appeal. The Link worker felt that they had been assessed wrongly on the PIP and were entitled to more . They helped to arrange for a discretionary housing payment (over three months) and JSA as interim measures while the appeal was being heard. The appeal took 12 months. They also helped the couple to apply for three payments once a month from a charity at £110 per month.

The advisor provided specialist representation during the PIP appeal and following the appeal kept in contact, continuing to provide guidance on extra support and allowances available, such as carers allowance. The benefit was reinstated at the previous rates and the household could afford their rent shortfall and afford basic living costs. They had got in debt during the appeal and began paying this off.

K is very pleased with the service. He could not have done the appeal otherwise as he was too ill and could not understand the papers and the procedures. He was ready to give up.
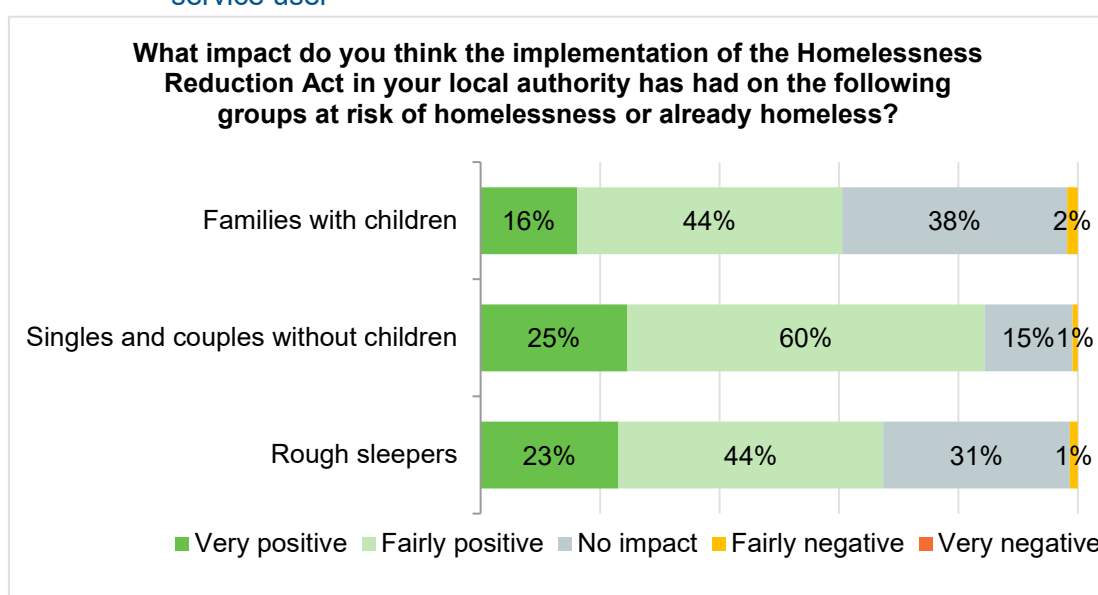
"They were 100% as far as I am concerned. There should be more of them. People should be aware of it. They should know that people will stand up for you."

Couples without children, perhaps reflecting the smaller numbers within caseloads, were not a group frequently discussed in case study interviews. In contrast to an increased number of single clients, one London borough noted that the number of couples without dependent children it has been working with has not changed from its relatively low number. A couple of local authorities suggested that they had potentially seen an increase in presentations by couples without children (they discussed them in the same breath as single people), but noted that they are as difficult to house as single people.

For couples on low incomes, a shortage of one bedroom properties, something common to both these small rural district authorities, represents a major barrier to securing them permanent accommodation (two bedroomed properties being less popular and affordable since the removal of the spare room subsidy) and temporary accommodation options are not always suitable or are geared specifically towards single people. For example, in one of the local authorities, certain temporary accommodation providers do not permit residents to share rooms with partners.

In additional to the H-CLIC and case study evidence, the survey of local authorities also asked about their perceptions of the impact of the Act on different types of service users. Figure 6.3 shows their responses.

Figure 6.3   Local authority perceptions of the impact of the Act on different types of service user

What impact do you think the implementation of the Homelessness Reduction Act in your local authority has had on the following groups at risk of homelessness or already homeless?

Group	Very positive	Fairly positive	No impact	Fairly negative
Families with children	16%	44%	38%	2%
Singles and couples without children	25%	60%	15%	1%
Rough sleepers	23%	44%	31%	1%

■ Very positive   ■ Fairly positive   ■ No impact   ■ Fairly negative   ■ Very negative

Base: 224

Overall these results reaffirm the perceived benefit of the Act for singles and couples without dependent children, with 85% of local authorities in the survey saying they perceived it has had a positive impact on this group. 67% also perceived a positive impact on rough sleepers and 50% on families with children.

6.2   The nature and breadth of help received

It is possible to draw some high-level conclusions from the first year of H-CLIC data about how many households who have received different types of help under the Act. Table 6.3 shows that the England as a whole, 51% of households (145,020) that were initially assessed had a prevention duty accepted, 41% (118,700) had a relief duty accepted, and 8% (22,700) had no duty accepted.

Table 6.3   Households assessed as being owed a prevention duty, relief duty or no duty, 2018/19, by region
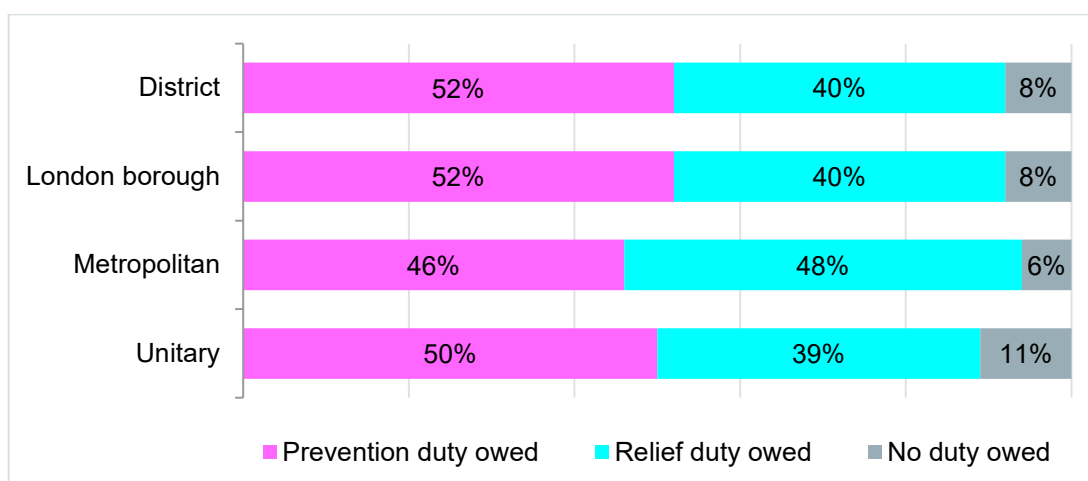
	Total initial assessments	Total owed prevention duty	Total owed relief duty	Total not owed duty
England	286,410	145,020	118,700	22,700
London	56,800	30,240	22,040	4,510
Rest of England	229,620	114,780	96,650	18,190
North East	17,410	8,220	6,570	2,640
North West	38,490	18,410	17,760	2,320
Yorkshire & Humber	27,870	14,300	11,660	1,920
East Midlands	23,140	12,120	9,710	1,310
West Midlands	25,700	11,310	12,650	1,750

	Total initial assessments	Total owed prevention duty	Total owed relief duty	Total not owed duty
East of England	28,860	14,890	11,610	2,360
South East	56,800	30,240	22,040	4,510
South West	40,980	21,060	16,450	3,490

Source: H-CLIC data

Figure 6.4 shows the split between duties owed or not owed for different types of local authority in the first year of the Act. These proportions are similar across the different types of local authority, although the proportion of households assessed as being owed a relief duty is comparatively high in metropolitan authorities compared to district, London borough and unitary authorities.

Figure 6.4   Households assessed as being owed a prevention duty, relief duty or no duty, 2018/19, by local authority type

Source: H-CLIC data

H-CLIC data also provides insights into types of activity undertaken under each duty. At the prevention stage, this includes accommodation, negotiation or mediation with families or landlords, financial support or general advice and information. At relief stages, this is accommodation-focused.

Table 6.4 provides an overall summary, showing that securing accommodation is the most common support provided under both prevention and relief stages nationally.

Table 6.4   Share and number of prevention and relief activities, 2018/19, by type of activity

	Prevention		Relief	
	n	%	n	%
Accommodation secured by LA/org delivering housing options service	15,554	27%	15,915	40%
Helped to secure accommodation found by applicant, with financial payment	7,190	12%	4,365	11%
Helped to secure accommodation found by applicant, without financial payment	6,360	11%	3,269	8%

	Prevention		Relief	
Supported housing provided	3,281	6%	8,370	21%
Negotiation / mediation to secure return to family / friend	3,366	6%	-	-
Negotiation / mediation to prevent eviction / repossession	5,402	9%	-	-
Discretionary Housing Payment to reduce shortfall	2,416	4%	-	-
Other financial payments (e.g. to reduce arrears)	1,573	3%	-	-
Other activity	4,170	7%	4,332	11%
No activity – advice and information provided	8,400	15%	3,355	8%
Total households where duty ended with accommodation secured	**57,712**	100%	**39,606**	100%

Source: H-CLIC data

However, there are variations in the support being provided in the prevention and relief stages when these are compared by local authority type. As shown in Table 6.5 and Table 6.6, accommodation secured by the local authority represented a lower proportion of prevention and relief activity in London borough authorities compared to district, unitary and metropolitan authorities.

Table 6.5   Share of types of prevention activity, 2018/19, by local authority type

	District	London borough	Metropolitan	Unitary
Accommodation secured by LA/org delivering housing options service	27%	15%	31%	30%
Helped to secure accommodation found by applicant, with financial payment	15%	16%	5%	13%
Helped to secure accommodation found by applicant, without financial payment	12%	9%	10%	12%
Supported housing provided	5%	5%	7%	6%
Negotiation / mediation to secure return to family / friend	4%	9%	9%	4%
Negotiation / mediation to prevent eviction / repossession	10%	12%	7%	8%
Discretionary Housing Payment to reduce shortfall	3%	11%	1%	5%
Other financial payments (e.g. to reduce arrears)	3%	4%	1%	2%
Other	8%	6%	7%	7%

	District	London borough	Metropolitan	Unitary
No activity - Advice & information	12%	14%	21%	13%

Source: H-CLIC data

Table 6.6   Share of relief activities, 2018/19, by local authority type

	District	London borough	Metropolitan	Unitary
Accommodation secured by LA/org delivering housing options service	41%	33%	45%	37%
Helped to secure accommodation found by applicant, with financial payment	14%	14%	4%	13%
Helped to secure accommodation found by applicant, without financial payment	9%	7%	7%	9%
Supported housing provided	19%	18%	21%	26%
Other	10%	20%	11%	9%
No activity	8%	7%	12%	6%

Source: H-CLIC data

Beyond the broad H-CLIC prevention and relief categories, the Dudley Borough Council Homelessness Strategy for 2019-21 presents a useful summary of the activities they undertake to prevent homelessness. Table 6.7 adapts this to also encompass activities that other local authorities we interviewed described as part of their preventative offer.

Table 6.7   Prevention activities undertaken by local authorities

Types of activity			
Advice to help people resolve their own housing needs	Negotiations with landlords	Mediation (families and landlords)	Holistic advice - Maximising income (debt advice, priority debts)
Use of Discretionary Housing Payments	Helping people to get UC payments made direct to their landlords	Signposting to other services and agencies e.g. CAB	Mortgage arrears advice
Pre-tenancy training to help people realise the financial commitments that they are taking on	Advising on wider housing options (looking for more affordable or suitable housing) e.g. Use of Disabled Facilities Grants, Social Care	Holistic advice - Support to develop independent living skills (budgeting, healthy eating, access to GPs etc.)	Security upgrades or moving people to places of safety (domestic abuse)
Direct provision of accommodation (local authority owned) – temporary or long term	Referrals to supported housing providers	Pre-eviction intervention to see if evictions can be avoided	Allocation policies that prioritise those in housing need or those who need to downsize
Ensure new affordable housing is provided and LA has nomination rights to new homes	Rent deposits/guarantees	Targeted use of funding to reduce debts and risk of eviction	Other actions that are tailored to meet individual need and circumstances e.g. use

Types of activity			
			of disabled facilities grants
Working with other agencies to help those in crisis or at risk of becoming homeless e.g. foodbank referrals, hospital discharge teams, prisons and probation	Tenancy support/coaching	Providing access to upstream prevention activities – providing some form of support prior to 56-day window	Specialist housing advisers and pathways

As reported in Chapter 2, the Act has encouraged and enabled local authorities to extend the range of activities they provide, either directly themselves or through commissioned and/or partnership services. These activities include those designed to support people to **remain in their homes** e.g. mediation or negotiation, debt advice and benefit application support, pre-tenancy and independent living skills training. Other activities acknowledge the positive role a **move to new accommodation** can provide: local authority owned accommodation for easier and more affordable access; and rent bonds or guarantees. Other activities emphasise **wider wellbeing** and the importance of being coordinated with other support agencies (e.g. social care adaptation teams, mental health community teams).

Two examples of these kinds of activities are provided in Boxes 6.4 and 6.5.

Box 6.4 Case study example

One metropolitan authority with long waiting lists for social housing and a keen focus on keeping temporary accommodation spending low has sought alternatives in order to meet the expectations of their local population for secure and affordable accommodation near their social networks and community support. One solution it has implemented is to enable people to maintain their priority banding for bidding on social housing, via their choice-based lettings service, whilst providing them with support to access the private rental market until a social housing property becomes available for rent. Young people are also entitled to keep bidding with the same priority bandings even when remaining resident with their family after mediation by a housing adviser. As people can have high expectations of what properties are available via social letting, this strategy can often meet short-term needs by enabling people to continue to pursue their long term goals.

Box 6.5 Case study example

In one district authority, a newly commissioned Homeless Prevention Coach supports people who homeless and with mental health issues help find housing solutions at either the prevention or relief stage. The coach works with individuals at risk of homelessness (which is broadly defined) and with mental health issues (a broad definition is followed, and a clinical diagnosis is not required – which is seen as a strength of the service). Their caseload is between 10 and 15 individuals at any one time, who are characterised by whether they "need real wraparound support". Their role includes helping secure mental health support for individuals, liaising with landlords and helping to ensure individuals receive the correct benefit entitlement.

Other examples of support valued by service users included benefits advice, structured discussions about budgeting and affordability, and referrals onto sources of wider non-housing support. Box 6.6. is one example of this.

Box 6.6   Case study example

S is 40 years old and is living in a temporary flat in South Derbyshire. She has four children, aged 13, eight, six and four. S became homeless after she left her husband, following domestic violence. In addition to help with finding somewhere to live, the council provided S with some financial support. They are helping her with her rent and are trying to help her with her rent arrears through a discretionary housing payment. They provided her with a food parcel when she was initially given a place to stay in temporary accommodation. She was also referred for domestic violence support.

Someone from the Housing Team visits every couple of weeks to check everything is alright, which S appreciates as it makes her feel she has not been forgotten. On the whole, she feels *"a lot more relieved"* about the future since receiving this support. While it has been stressful, she feels like things will be better now for her and her children in the long-term.

However, there were service users who reported that they initially received little support or struggled to get support beyond an initial appointment or placement in temporary or permanent accommodation.

"They helped me with a house, but they didn't continue the support."

Among service users with more complex needs (e.g. relating to substance abuse, mental health, criminal activities or other vulnerabilities) there was a recurrent message across many of the case study areas relating to the importance of wraparound support for people like them. They emphasised the difficulties people can face if only housing is provided, rather than other support services, which can help people like them to keep their accommodation.

"If they haven't given you the counselling, the help, put that man in a property, he'll soon end up back on the street. You need the whole thing. There is a reason why you become this way… Now, if you don't deal with them issues and you give that man a house, them issues aren't gonna go away. He can't cook, can't clean, can't shop, don't look after his money. And you will get back where you are, circle of life".

This reflects the concerns (reported in Chapter 3) that some local authorities voiced themselves about their ability to fully meet the needs of the increasing number of service users with complex needs they were seeing under the Act.

6.3   Service user outcomes

H-CLIC data for 2018/19 provides some insight into the extent to which positive housing outcomes are being achieved under the prevention and relief duties since the Act came in. Table 6.8 shows that overall 58% of prevention duty cases ended in the household having secured accommodation. This proportion was lowest in London borough authorities (51%) and highest in district authorities (61%).

Table 6.8 Prevention duty outcomes, 2018/19, by local authority type

Authority type	Total duty ended	Stayed in existing accomm	Moved to alternative accomm	Total secured accomm	Total % secured accomm
District	39,475	7,385	16,594	23,979	**61%**
London borough	15,683	4,306	3,688	7,994	**51%**
Metropolitan	20,152	4,042	8,056	12,098	**60%**

| Unitary | 22,538 | 4,370 | 8,761 | 13,131 | **58%** |
| Total | 97,848 | 20,103 | 37,099 | 57,202 | **58%** |

Source: H-CLIC data

Table 6.9 shows that, overall, 43% of relief duty cases ended in the household having secured accommodation. This proportion was lowest in London borough authorities (31%) and highest in metropolitan and unitary authorities (47%).

Table 6.9   Relief duty outcomes, 2018/19, by local authority type

Authority type	Total duty ended	Secured accomm	Total % secured accomm
District	36,011	15,480	**43%**
London borough	12,232	3,836	**31%**
Metropolitan	23,194	10,834	**47%**
Unitary	19,398	9,168	**47%**
Total	90,835	39,318	**43%**

Source: H-CLIC data

This data is consistent with findings presented in earlier chapters of the report concerning the perceived challenges of achieving positive housing outcomes under the Act in local areas where there is more limited affordable housing supply. Inner London boroughs are known to faced particular challenges in this respect.

However, it is worth reiterating that affordable housing supply is not a London-only challenge. Some of the non-London case study local authorities also reported limited affordable housing in their local area, which constrained the outcomes they could achieve under the prevention and relief duties. The data in Table 6.8 and Table 6.9 also conceal a lot of variation in the reported outcomes between different local authorities of the same type. While their outcomes are higher overall, some individual district, unitary and metropolitan authorities have similar outcomes to London boroughs. Levels of affordable housing supply in these areas are very likely to be a factor in this[26].

As Figure 6.5 shows, since the Act came into force the previous upward trend in the number of households in temporary accommodation has largely continued. In the year before the Act, numbers rose by 4.5% from 77,220 to 80,720. In the year since the Act came in, numbers have risen by 5% from 80,720 to 84,740.

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[26] Attempts were made in the evaluation to analyse the outcomes reported in H-CLIC by the levels of affordable housing supply in local authority areas, in order to further interrogate the relationship between the two. However, no suitable indicator of local affordable housing supply was identified. Although there are robust sources of data on affordable social housing, these do not reflect affordable private rental sector housing, which in some local areas can be a significant element of their overall affordable housing stock.

Figure 6.5   Total number of households in temporary accommodation at the end of quarter, England

Source: H-CLIC data

There has been an increase in the proportion of households that would previously have been classed as non-priority in temporary accommodation since the Act came in. At the end of quarter 4 of 2017/18, 20% of households in temporary accommodation were single adults without dependent children. At the end of quarter 4 of 2018/19 this had risen to 22%. This is another positive indicator that more people who need it are able to access support under the Act. Equally, as discussed further below, temporary accommodation is still not an ideal long-term outcome for the households concerned.

Findings from the service user interviews in the case study research were closely reflective of the wider picture painted in the H-CLIC statistics for the first year of the Act. There were very positive examples of how service users had been:

■   Able to remain in property as a result of debt or benefit advice and/or advocacy;

■   Housed in new build housing association properties;

■   Provided with local authority housing suitable for their age and/or disability; and

■   Provided with deposit and first month's rent to enable them to access private rental market.

But there were also more negative examples of servicer users who had:

■   Been housed in temporary accommodation for prolonged/ongoing amounts of time; and

■   Not secured any accommodation by the end of either the prevention or relief stage.

Boxes 6.7 and 6.8 provide examples of two different kinds of outcomes.

Box 6.7   Case study example

K and W are a working age couple with a council tenancy, both unemployed. K is disabled and his wife provides care. A number of benefits changes impacted them and reduced their income. They lost benefits income (DLA, carers allowance and income support) following

DLA to PIP migration, but housing benefit continued. W's benefits were moved to JSA. Two bedrooms were subject to the bedroom tax (£23 per week). With the loss of income, the family went into rent arrears and could not pay utilities.

K self-referred after he heard of the support from his brother. He had considered appealing the PIP decision but due to depression he could not manage it and was under a great deal of stress with the loss of benefit. An advisor visited the household three times and had telephone communication. The advisor looked at all the evidence and the papers and helped to prepare the PIP appeal. The advisor felt that they had been assessed wrongly on the PIP and were entitled to more; they helped to arrange DHP (over three months) and JSA as interim measures while the appeal was being heard. The appeal took 12 months. They also got three payments once a month from a charity at £110 per month. The advisor provided specialist representation during the PIP appeal. Following the appeal the advisor has kept in contact, is helping to look at extra support and allowances available, such as carers allowance

The benefit was reinstated at the previous rates and the household could afford their rent shortfall and afford basic living costs. They had got in debt during the appeal and began paying this off. K is very pleased with the service. He could not have done the appeal otherwise as he was too ill and could not understand the papers and the procedures. He was ready to give up.

Box 6.8   Case study example

J is 54, has been living in temporary accommodation for 1 year 3 months with his 12 year old son who has autism. He says it's like a box, very small, with kitchen in the same room. Before this he was in temporary accommodation. Prior to that, he was living at his aunt's house for 3 years with 4-5 other family members. He did not consider himself homeless then. He started feeling homeless when his son joined him. His son was living with his mother and sister in a council house, but his son's mother passed away and he had to take custody of his son. He was not able to take over his son's mother's council house, because it was not in his name. But his room at his aunt's was only a one-bedroom, so he also couldn't take his son there.

When he got custody, he realised he had to go to council. He initially felt a little embarrassed because he could not manage on his own, but just had to what he had to do for his son. He went to the local authority and put in a homelessness form.

After a couple of months they came back to him and gave him an interview, where they asked questions about his situation. At first it was all a bit frustrating, a bit hard, all the questions and all the forms he had to submit, such as proof of address. Someone had to recommend him, he had to get a letter from where he was living. J felt that the case worker was listening but sometimes they didn't seem to hear properly what he was saying, when he was explaining about his son. He was only doing all this for his son. But at the end they did help him, they gave him temporary accommodation. He felt very happy when he first received the temporary accommodation.

Hasn't been in touch with council directly since then. He got a bidding number four weeks ago through the hostel manager, who got in touch with him. The council hasn't been in touch at all, have not even sent him an official letter confirming his bidding number, which he feels bad about. He has a bidding number and is bidding every week, but he doesn't even know his priority.

Now he feels a bit frustrated, because he has been in a very small temporary accommodation with an autistic son and it is hard to cope with him. Son is not used to having someone in his space all the time, and he can overreact. He needs his own space. He hopes that the local authority will rehouse him soon, and he wants to go back to work. Feels the future does not look too bad. *"At least there is a roof over my head"*.

6.4   The service user experience

When asked about how they felt they had been treated, and their overall experience of engaging with housing staff at their local authority, the reflections of service users were not all positive. These reflections were partly defined by one overriding factor – did have somewhere decent to live at the end of the process or not? Understandably, those that did were typically more positive about how they had been treated than those that didn't. However, beyond this, there were also clear differences in how different service users described their experiences.

Several service users shared positive examples of engaging with their local authority since the introduction of the Act, and this included people in circumstances that may not have received help prior to this e.g. single men and women without dependent children. This was not limited to people who had received the accommodation outcomes they were looking for but also those who, while still waiting for this (e.g. a move from temporary to permanent, or private to social housing) could not fault their treatment and the support they had received. They reported easy access and good level of contact; empathy and understanding, being treated with respect, and proactive staff who they perceived genuinely want to help them.

"They always make time for you, they always finish a call with, you know, where we are and they practice that too…I always feel very safe when I'm with them which is great for someone with my social anxiety."

"[She] was brilliant, she worked really hard, and all the staff at the council, I phoned, and where I saw them were all brilliant. I can't rate them high enough."

Equally, there were some service users who described the kinds of experiences that the Act was designed to prevent. This included staff who they were perceived to be cold or unfriendly, not feeling listened to, and apparent gate-keeping of support.

"It just felt as if she was pulling my strings, she ruled my life. 'Do what I say, and if I think you can have this, that and the other you can', it was the kind of attitude she had."

"It was like they weren't taking any notes, I had to remind them that I was disabled."

From the service user interviews it is also evidence which elements contribute to their perceptions of how they are treated. In all the experiences described by service users the two biggest elements (apart from housing) that mattered most to them were **communication** and the **attitude** of the staff they encountered.

The main communication difficulties described across the case studies, were that some people reported finding it difficult to contact their housing advisers outside of appointments, or because of triage processes, not being able to access the right staff to help. Even people who were generally happy with their outcomes and their overall experience touched on this.

"It should be easier to contact them. They don't answer the phone"

Service users wanted to know what was happening with their case after their initial engagement with the local authority and the development of a PHP. Not all felt they had been kept sufficiently updated and found it difficult to establish this when they tried to ask. Most expressed a definite preference for face-to-face and telephone contact as well as, or instead of, written correspondence from the local authority.

The importance of local authority staff listening to people and providing empathetic understanding (even in difficult circumstances) was highlighted both by those who had received this kind of support and those who hadn't. Service users currently

living in temporary accommodation for example, were still able to reflect positively about their experiences; likewise others who had received offers of social housing still reflected on the poor service they received. It isn't just the outcome that matters to people but how they get there.

These findings put the perceptions of local authority staff into sharper focus. As reported in Chapter 4, the staff in almost all of the case study areas thought they were delivering on the ethos of the Act. However, some - but not all - service users in some of these areas reported negative experiences. In these areas, experiences seemed to vary at the level of individual members of staff. This suggests that despite the positive culture change being reported by local authorities, the ethos of the Act is not yet universally embedded all staff in every local authority.

7 Conclusions and recommendations

This chapter draws together the findings from the previous chapters to provide conclusions on progress to date against the intended outcomes of the Act. It then provides recommendations to inform future implementation and delivery based on the learning from this. All the main elements of the Act, including the Duty to Refer, are considered here.

7.1 Conclusions

These conclusions are structured around the intended outcomes of the Act. Table 7.1 provides a summary assessment of progress against these to date, and what has worked well and less well.

Table 7.1 Progress against the intended outcomes of the Act

Intended outcomes	Progress to date	What has worked well	What has worked less well
All people are able to access homelessness advice and information	Local authorities believe they are meeting basic requirements of this duty (partly based on what they were doing already) but not an area of significant investment or development	Example of a case study local authority that actively engaged service users in updating their provision Other examples of how adoption of triage approach has put frontline staff resource in place to deliver advice and information	In comparison to other elements of the Act, has not been perceived as the highest priority by local authorities Unclear whether information and advice provided by local authorities is tailored and accessible to different groups
People receive help to prevent homelessness earlier	56-day prevention period has been implemented across local authorities (and in some exceeded, with longer at-risk thresholds) Duty to Refer has increased early referrals by some public authorities	Increased investment in early prevention activities by most local authorities Reinforced belief amongst staff of value of early prevention Most have invested senior staff time in developing new relationships and processes to support Duty to Refer	Referrals under Duty to Refer uneven across different areas and public authorities, and not always timely Reported barriers for some public authorities to engage
More people, especially singles and couples without children, receive effective help to prevent and relieve homelessness	Convincing evidence that more people previously classed as non-priority are now receiving help under prevention and relief duties Less clear-cut evidence on extent to which more positive outcomes are being	All local authorities have recruited and/or trained staff to increase capacity Local authorities have enhanced/expanded prevention tools Additional measures to increase affordable	Increased process / admin perceived to divert focus and resource away from prevention and relief casework Despite efforts to address, shortage of affordable housing reported as key barrier to achieving positive

Intended outcomes	Progress to date	What has worked well	What has worked less well
	achieved at the end of prevention and relief stages in every area	housing supply introduced New services introduced to meet needs of some groups	outcomes, especially homelessness relief, in some areas Demand for new services reported to outstrip supply
Service users feel listened to and understand what steps they and the LA will take to address their situation	Perception of most local authorities that ethos of Act is being delivered But clear service user evidence this is not consistent across all staff in every area PHP process is reported by local authorities to be consistently administered but not always recalled by service users	Removal of conditionality has helped change emphasis of initial conversation Training has supported culture change and new staff have brought positive, supportive mindset Some staff report using PHP as tool for effective casework and get service user buy-in	Residual gate-keeper mindset amongst some pre-existing staff Possible need for more training to reinforce culture change Current negative or ambivalent perceptions of value of PHPs amongst some staff and service users
Local authorities have increased intelligence on local homelessness and can design services to address it more effectively	New or updated IT systems have been introduced by local authorities to record H-CLIC data Most are making quarterly returns and reported accuracy of these increasing Limited evidence to date of local authorities using H-CLIC data for own purposes	After initial introduction, process reported to have become more streamlined/efficient Senior staff in most local authorities can see potential longer-term value of H-CLIC data	Changes to data requirements the run-up to introduction was a perceived challenge Collecting data required for H-CLIC has taken up additional staff time in initial meeting with service user Local authorities may not have resource or expertise to make full use of H-CLIC data

Overall, these conclusions reflect the relative newness of the Act and its multi-faceted nature. Progress has been made against all of its intended outcomes but this been at different rates for different elements of the Act. The extended prevention duty stands out as possibly the area of most progress and is also the element of the Act that respondents in the evaluation believed was already having the most positive impact on homelessness in their local area. There is considerable scope for, and arguably a need for, further progress on the other intended outcomes of the Act.

Case study local authorities indicated their initial focus in preparing for the Act had been on getting the basic building blocks in place (i.e. staff, training, processes, IT systems) to increase capacity and ensure compliance with the new requirements under the Act. At the time the research for the evaluation was conducted there was a clear sense that this had already shifted in most local authorities to a focus on how to reconfigure, expand or add to the changes they had already implemented to

make these more effective and efficient, and also better able to address the challenges that have emerged. The aim of the recommendations in the next section is to help to inform this.

7.2   Recommendations

This section provides recommendations to inform the future implementation and delivery of the Act, based on the findings from the evaluation. It includes recommendations for MHCLG, local authorities, and other national government departments and agencies.

7.2.1   Recommendations for MHCLG

1. Extend New Burdens funding and update the allocation approach

As reported in Chapter 3, most of the case study local authorities reported that their additional expenditure under the Act was greater than their New Burdens allocation. The reported shortfall was greatest amongst local authorities with largest caseloads prior to the Act and that have also experienced the largest increases in caseload sizes since its introduction. The combination of more cases and the additional staff time necessary to administer the required processes and reporting under the Act primarily explain the increased reported costs. It is possible that other factors, for example the increasing proportion of service users with more complex needs reported by local authorities, are a factor in this. Local authorities had often introduced additional specialist support and/or accommodation (likely to have a higher unit cost than 'mainstream' provision) for such service users as part of their response to the Act.

In addition, local authorities voiced concerns about their ability to sustain the all the changes and keep in place all the new staff and services they had introduced in responding to the Act so far without New Burdens funding beyond 2019/20. Investment in additional measures to increase the effectiveness of their delivery under the Act was also dependent on the availability or otherwise of future funding. The projected savings under the Act (expected to offset additional costs by the end of 2019/20) are not so far being reported.

Based on the findings of the evaluation, our recommendation is that New Burdens funding is continued beyond 2019/20. The additional staff and services that local authorities have introduced to date have been central to the progress they have made so far in implementing the Act. There is a significant risk that this progress stalls or is reversed in some local authorities if the funding is discontinued. Continued funding would also provide local authorities with greater certainty and resources to address the limitations in responses to the Act to date identified in the evaluation, for example through further staff training to ensure the negative experiences some service users still had of engaging with their local authority stop.

The findings of the evaluation do not provide a complete answer to how any continued New Burdens funding should be calculated and allocated. However, the first year of H-CLIC data will allow a more sophisticated approach to this than what was possible originally – based on caseload data and potentially taking into account additional factors such the proportion of service users that have more complex needs.

2. Maintain or enhance the existing HAST function in MHCLG

HAST was perceived by local authorities to have helped their implementation and delivery of the Act, and to have wider benefits for dialogue between MHCLG and local government. As reported in Chapter 4, implementing the Act and achieving its intended outcomes is still an ongoing process – in most local areas and for most of the elements of the Act – and there is an ongoing need for support and advice to share good practice and inform this process.

The policy of recruiting HAST staff from the local government or homelessness sector was strongly endorsed and should be maintained.

The one less positive comment about HAST – that an advisor had not sufficiently understood the distinctive nature of homelessness in a local authority's area – indicates there may also be a case for increasing the team's capacity. Advisors are responsible for working with a number of local authorities each and additional capacity would allow more focus on a smaller number. Our recommendation is therefore to maintain or expand the HAST function in MHCLG.

3. Provide support for local authorities to realise the benefits of H-CLIC data

H-CLIC has been a source of some initial frustration and difficulty for local authorities but, as reported in Chapter 3, the potential operational value of the data is widely recognised. Senior local authority staff would like to be able to use the data to understand more about the characteristics and drivers of homelessness in their local area, and thereby inform decisions about the design and delivery of their provision. This can only be of benefit for the effectiveness of implementation and delivery in different local areas under the Act.

However, H-CLIC data is currently perceived by local authorities to be difficult to access and interrogate, and most indicated they do not have the internal capacity and/or capability to "make sense of the data" and use it for this purpose.

Our recommendation is that MHCLG should provide support for local authorities to address this, for example through guidance, tools and resources to assist them in analysing and interpreting the data.

4. Consider building more flexibility into requirements of the Act

As reported in Chapter 3, the new processes and reporting required under the Act are perceived by local authorities to have placed increasing demands on staff capacity and to potentially limit the time they have to conduct initial casework with service users. This has implications for both the costs to local authorities of delivery under the Act and the effectiveness of support being delivered to service users. Equally, the new requirements are central to the design of the Act and some local authority staff and service users do perceive them to have benefits (or at least the potential to have benefits in the future, in the case of H-CLIC data).

Balancing these different considerations, our recommendation is that MHCLG consider building more flexibility into the requirements of the Act. Some flexibility is already built into the Code of Guidance (which, for example, allows that a PHP can be deferred in certain circumstances) and H-CLIC requirements (with some data fields mandatory and others non-mandatory). Any further flexibilities or concessions that could be made would help to reduce the perceived administrative burden on staff and create more time for effective casework with service users.

Respondents were rarely specific about the elements of the requirements where they thought greater flexibility should be applied. However, in general terms, reducing the number of mandatory H-CLIC data fields and reducing (or just giving

local authority staff greater discretion over) the number of letters they are expected to write to service users were most frequently mentioned.

5. Further promotion of the Duty to Refer at a national level

Chapter 5 highlighted the positive but uneven progress to date, across different public authorities and in different areas, in the implementation of the Duty to Refer. Jobcentres and probation services were reported to have responded positively in most areas but beyond this there was wide variation. In one area a public authority would be reportedly responding very effectively to the Duty to Refer but in another area the same public authority could be reported to be making few if any referrals under the duty.

While the onus on promoting and making the Duty to Refer work is partly on local authorities and local public authorities themselves, the findings of the evaluation indicate there will be value in MHCLG further engaging with national departments and agencies to ensure a more consistent response to the Duty to Refer in all local areas.

6. Review in future the scope of the Duty to Refer

As reported in Chapter 5, there was support amongst local authorities and several stakeholders for the Duty to Refer to be expanded to a Duty to Collaborate. This would require other public authorities not just to make referrals but also to work with housing options teams to meet servicer users' needs – either through joint multi-disciplinary casework or ongoing communication and coordination between the public authority and housing options team in cases where a service user needed support from both. This would prevent public authorities from "dumping" responsibility for a case onto the housing options team at the point of referral (as was perceived to be happening in some instances currently) and help to ensure more effective, holistic and joined-up support for service users who need it.

There was also support for the Duty to Refer or a new Duty to Collaborate to be extended to GPs, mental health and drug and alcohol services. GPs are well placed to pick up on potential housing needs because they may be one of the first ports of call for someone in crisis and have an ongoing relationship with their patients. Mental health and drug and alcohol services were perceived by local authority housing staff to be an important potential partner in helping the increasing number of service users they are seeing with complex needs.

Either or both of these changes would have potential resource implications for the public authorities concerned and require negotiation and agreement at a national level. Nonetheless both have the potential to enable more local authorities to achieve positive outcomes with more services users (especially those with the greatest needs) under the Act. Our recommendation is that their feasibility is explored by MHCLG with the relevant national departments and agencies.

7.2.2 Recommendations for local authorities

7. Conduct additional training to reinforce culture and casework

The findings from service users in Chapter 6 illustrate that the embedding of the ethos of the Act is not currently universal across all staff in every local authority. Many service users did report very positive experiences of engaging with local authority staff. However, even in certain case study areas where the local authority thought their staff were delivering fully on the ethos of the Act, more negative experiences were described by some service users.

Local authority staff are also coming into contact with groups of services users that they often had limited experience of working with previously (e.g. young men and women without children), including those with more complex needs. As reported in Chapter 2, some staff were open in saying they had found this more challenging. In addition, the findings in Chapter 3 indicate that the perceived value or otherwise of PHPs depends partly on the attitude and ability of staff to use a PHP effectively as a tool within their casework.

Positively, most local authorities said they intended to undertake further staff training in the next 12 months as part of their ongoing response to the Act. As reported in Chapter 4, 96% planned to do this. Our recommendation is that future training should include a focus on the areas highlighted above, i.e.: embedding the ethos of the Act; conducting casework with different and/or more complex types of services users; and how to effectively use PHPs as part of their casework with all types of service user.

8. Get input and feedback from service users on their experiences

Chapter 2 described the planning and activities that local authorities had undertaken in responding to the Act. Few mentioned having consulted or conducted research with service users to inform this. When talking about their future plans, as reported in Chapter 4, this was also rarely mentioned.

Local authority frontline staff generally believed they had a good understanding of service users' perceptions and experiences through the direct contact they have with them. Equally, more senior staff acknowledged that feedback and insights from service users would be beneficial in helping them better assess the effectiveness of their services and delivery by frontline staff.

The findings reported in Chapter 2 also highlight that many local authorities have changed or modified elements of their provision as part of their response to the Act, for example with the adoption of a triage model or the completion of some processes by telephone and online. Staff had a broad sense of how these new approaches were working in practice, and their obvious pros and cons, but generally not a detailed understanding of how service users experienced them, and how and why this may vary between different service user types in their local area.

Conducting research with service users is not without its challenges and local authorities may argue that they have limited resources to devote to this in the context of other demands arising from the Act. That notwithstanding, a greater understanding of local service user experiences can only be of benefit to the effectiveness of delivery under the Act, and we recommend that local authorities undertake or commission research to provide this understanding.

9. Consider diverse and more senior staff recruitment

As reported in Chapter 2, initial staff recruitment by local authorities has focused on increasing frontline capacity, and this focus has largely been justified by the increasing demands on frontline staff capacity reported under the Act. Equally, elements of the Act, such as H-CLIC reporting, promoting the Duty to Refer, and supporting frontline staff to deliver on the new requirements of the Act, have stretched their capacity too.

Some local authorities also took a conscious decision to recruit people from a non-housing background but with experience in more customer service-orientated roles. As in the Trailblazer programme, local authorities that had taken this approach were positive about the results, particularly in terms of the impact of new recruits on the culture and ethos of their workforce.

As reported in Chapter 4, 55% of local authorities are planning additional recruitment in the next 12 months. Senior staff capacity should not be overlooked in the decisions local authorities make about where to focus this additional recruitment. Local authorities that haven't already may also benefit from recruiting new staff from a non-housing background.

10. Consider further scrutiny of expenditure on homelessness services

As described in Chapter 1, case study local authorities generally found it difficult to provide data on the costs of delivering different stages in the process and the costs of different prevention and relief activities in the evaluation. Equally, several did reflect that the process was useful, and that knowing these costs would help to inform future planning of their provision.

To an extent, differences in costs between local authorities will simply reflect differences in service design. However, looking at expenditure through as consistent lens as possible and in line with the standard H-CLIC fields has value in making differences in approach between local authorities more transparent. This itself may be a means of identifying both potential areas of efficiency and future areas of service development based on learning from other similar authorities.

11. Provide feedback to public authorities on referrals

Public authorities interviewed in the case study research said that feedback from their local authority after they had made a referral under the Duty to Refer was useful and did help to motivate staff to make further referrals.

As reported in Chapter 5, public authorities said that feedback from their local authority after they had made a referral under the Duty to Refer was useful and helped to motivate staff to make further referrals. While avoiding the creation of further new processes, local authorities should try to ensure that exchanges with other public authorities are two-way in nature. The more mature and active these relationships are, and especially the extent that they are mediated via formal or semi-formal groups/networks that are in place, the easier it is for local authorities to share intelligence and success stories with referrers.

7.2.3 Recommendations for other national government departments and agencies

12. Introduce national guidelines and monitoring arrangements around the Duty to Refer

Recommendation 6 calls for further promotion of the Duty to Refer by MHCLG at a national level. We also recommend that the relevant national government departments and agencies further promote the Duty to Refer to the local public authorities they represent. This could be through national guidelines for how they are expected to respond to it, and some form of monitoring and accountability of the referrals being made.

ANNEXES

Annex 1   Survey questionnaire

1. Which of the following statements best describe what stage your local authority is currently at in effectively implementing the Homelessness Reduction Act?
READ OUT. SINGLE CODE.

    1. We have fully implemented all the changes we plan to make

    2. We have implemented most of the changes we plan to make

    3. We have implemented only some of the changes we plan to make

    4. We have not implemented any changes

2. And, using the same scale, which of the following statements best describe what stage you are at in effectively implementing the different elements of the Homelessness Reduction Act. So starting with.. [Using same response options as above]:

    a. The extended prevention duty

    b. The extended relief duty

    c. The information and advice provision element of the Act

    d. The introduction of Personalised Housing Plans

    e. The new H-CLIC data reporting requirements

    PROMPT IF NECESSARY. SINGLE CODE.

    1. We have fully implemented all the changes we plan to make

    2. We have implemented most of the changes we plan to make

    3. We have implemented only some of the changes we plan to make

    4. We have not implemented any changes

    Don't know (DO NOT READ OUT)

3. Which, if any, of the following changes or activities have you implemented in response to the requirements of the Homelessness Reduction Act? Please say yes or no for each statement I read out.
    a. Staff training

    b. Recruitment of new staff

    c. Introduced or commissioned new services

    d. Taken additional measures to increase local affordable housing supply

    e. Introduced new IT systems

    f. Any other changes or activities (please specify)

    PROMPT IF NECESSARY. SINGLE CODE.

INTERVIEWER: ONLY CODE YES IF AS A RESULT OF THE HOMELESSNESS REDUCTION ACT – ANY UNRELATED CHANGES SHOULD BE CODED AS NO.

1. Yes

2. No

Don't know [DO NOT READ OUT]

4. Which, if any, further changes or activities do you plan to implement to respond to the Homelessness Reduction Act in the next 12 months? Please say yes or no for each statement I read out.
INTERVIEWER: ONLY CODE YES IF AS A RESULT OF THE HOMELESSNESS REDUCTION ACT – ANY UNRELATED CHANGES SHOULD BE CODED AS NO.

a. Staff training

b. Recruitment of new staff

c. Introducing or commissioning new services

d. Taking additional measures to increase local affordable housing supply

e. Introducing new IT systems

f. Any other changes or activities (please specify)

PROMPT IF NECESSARY. SINGLE CODE.

1. Yes

2. No

Don't know [DO NOT READ OUT]

5. Overall, how effectively do you think your local authority has responded to the introduction of the Homelessness Reduction Act?
READ OUT. SINGLE CODE.

a. Very effectively

b. Fairly effectively

c. Neither effectively nor ineffectively

d. Fairly ineffectively

e. Very ineffectively

Prefer not to say [DO NOT READ OUT]

6. What, if anything, have been significant challenges for your local authority to respond to the Homelessness Reduction Act?

[Open question]

None [DO NOT READ OUT]
Don't know [DO NOT READ OUT]

7. What, if anything, has helped or facilitated your local authority to respond to the Homelessness Reduction Act?

   [Open question]

   Nothing [DO NOT READ OUT]
   Don't know [DO NOT READ OUT]

8. Which, if any, of the following activities have you carried out to encourage or enable referrals by the public authorities subject to the new Duty to Refer, since this was introduced? Please say yes or no for each statement I read out.
   a. Information and/or guidance for the public authorities
   b. Training for staff in the public authorities
   c. Colocation or secondment of local authority housing staff in the public authorities
   d. Creation of new referral processes for the public authorities to use
   e. Creation of new data sharing agreements between the local authority and the public authorities
   f. Anything else (please specify)

   PROMPT IF NECESSARY. SINGLE CODE.

   IF NECESSARY: colocation means local authority staff and staff from the public authorities working in the same location together.
   1. Yes
   2. No
   Don't know [DO NOT READ OUT]

9. Which, if any, further changes or activities do you plan to implement to encourage or enable referrals by the public authorities subject to the new Duty to Refer in the next 12 months? Please say yes or no for each statement I read out.
   a. Information and/or guidance for the public authorities
   b. Training for staff in the public authorities
   c. Colocation or secondment of local authority housing staff in the public authorities
   d. Creation of new referral processes for the public authorities to use
   e. Creation of new data sharing agreements between the local authority and the public authorities
   f. Anything else (please specify)

   PROMPT IF NECESSARY. SINGLE CODE.

   IF NECESSARY: colocation means local authority staff and staff from the public authorities working in the same location together.

1. Yes
2. No

Don't know [DO NOT READ OUT]

10. How effectively do you think the following public authorities are responding to the new Duty to Refer?
    a. Adult social services
    b. Children's social services
    c. Local health providers
    d. Local jobcentres
    e. Prison services
    f. Probation services
    g. Youth offender institutes
    h. Other local public authorities subject to the new Duty to Refer

    READ OUT FIRST TIME THEN PROMPT IF NECESSARY. SINGLE CODE.
    1. Very effectively
    2. Fairly effectively
    3. Neither effectively nor ineffectively
    4. Fairly ineffectively
    5. Very ineffectively

    Don't know [DO NOT READ OUT]

    Prefer not to say [DO NOT READ OUT]

    Not applicable [DO NOT READ OUT]

11. To what extent do you agree or disagree with the following statements about the impact of the Homelessness Reduction Act in your Local Authority?
    a. The extension of the prevention duty to 56 days is enabling us to prevent homelessness more effectively
    b. All our frontline housing staff fully understand the new prevention and relief duties introduced through the Homelessness Reduction Act
    c. Personalised Housing Plans are having a positive impact on outcomes for service users
    d. The Homelessness Reduction Act has contributed to service users having a better overall experience of accessing and using our housing services
    e. We expect the number of referrals being made by public authorities affected by the new Duty to Refer to increase in the next 12 months

f. H-CLIC case level data is a valuable resource for understanding more about the risk factors associated with homelessness in our local area

READ OUT FIRST TIME THEN PROMPT IF NECESSARY. SINGLE CODE.

1. Strongly agree
2. Somewhat agree
3. Neither agree nor disagree
4. Somewhat disagree
5. Strongly disagree

Don't know [DO NOT READ OUT]

12. What impact do you think the implementation of the Homelessness Reduction Act in your local authority has had on the following groups at risk of homelessness or already homeless:

a. Rough sleepers
b. Single people and couples without children
c. Families with children

READ OUT FIRST TIME THEN PROMPT IF NECESSARY. SINGLE CODE.

1. Very positive impact
2. Fairly positive impact
3. No impact
4. Fairly negative impact
5. Very negative impact
6. Too early to say [DO NOT READ OUT]