Ministry of Housing,
Communities &
Local Government

Evaluation of the Housing First Pilots: Interim Process Evaluation Report

Final Report

Foreword

This report provides the first evidence from the evaluation of the Housing First Pilots. The pilot programme aims to develop the UK evidence base on delivering Housing First at scale by funding, and robustly evaluating, three pilots in the Greater Manchester, Liverpool and West Midlands combined authority regional areas, with a view to informing future decisions.

This report follows Ministerial agreement to extend the funding period for the Housing First Pilots beyond 2021, so that support for individuals already housed can be continued up to 2023, to sustain their accommodation. This demonstrates the government's ongoing commitment to this programme as well as its commitment to building a robust evaluation.

The report sets out key learning and recommendations, based on two formative visits to each Pilot and the first of four rounds of qualitative fieldwork. These findings are centred on pilot development, preparation and early delivery, and provide learning and recommendations for both central government and sub-nationally.

To inform this report, ICF conducted fieldwork in the three Pilot areas comprising qualitative interviews with Pilot leads and key staff, provider leads and support workers, local partners and strategic stakeholders. In addition, Homeless Link conducted visits to inform a review of fidelity to the Housing First principles.

Future elements of this evaluation programme will include further qualitative fieldwork and fidelity reviews, a quantitative evaluation of the programme and a cost benefit analysis.

I would like to thank ICF and their partners for their hard work gathering information from the Pilot areas, the Housing First Delivery Team and Advisers, whose support was critical to the research, the Pilot staff and other stakeholders who participated in the research, and the analysts in MHCLG who provided input to the research materials and reviewed the outputs.

MHCLG continues to develop its evidence base on the causes of and solutions to homelessness and rough sleeping. For example, the department has recently published an [impact evaluation of the Rough Sleeping Initiative](#) (RSI), a review of the [Homelessness Reduction Act,](#) and [initial findings from the Rough Sleeping Questionnaire](#). This latest piece of research is a further demonstration of that commitment.

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Executive summary

1   Introduction

This is the first interim report from the process component of the evaluation of the Housing First Pilots. The overall evaluation programme also includes a quantitative assessment of client outcomes, a cost-benefit analysis, and a programme of assessments, undertaken by Homeless Link, to review each Pilot's fidelity with the seven Housing First principles developed by Housing First England for the England context.

The Pilots were established following a commitment of £28 million in the Autumn 2017 Budget, and a feasibility study in the Liverpool City Region in July 2017[1]. This commitment represents one of several introduced by the government to reduce rough sleeping, with the 2019 manifesto commitment to end it by the end of the current Parliament. The programme aims to develop the UK evidence base on delivering Housing First at scale by funding, and robustly evaluating, three Pilots in the Greater Manchester, Liverpool City Region and West Midlands combined authority regional areas, with a view to informing future investment decisions. The original Pilot timetable envisaged a three-year delivery period with a further two years of legacy support for individuals still engaged with the Pilots.

Housing First is an intervention which supports homeless people with multiple and complex needs to access and maintain independent housing. The approach was originally developed in the United States and is increasingly being replicated internationally. It is different to traditional 'staircase' or 'treatment first' approaches in that it places people directly in independent long-term settled housing, with personalised, flexible and non-time-limited support. Service users are granted choice and control over both their housing and the support they receive, and there are no preconditions around 'housing readiness' or participation in treatment. Rather, secure housing is considered to offer a stable platform from which other issues might be addressed.

Housing First is based on seven key principles, developed by Housing First England for the specific English context, namely:

- Principle 1: people have a right to a home;

- Principle 2: flexible support is provided for as long as it is needed;

- Principle 3: housing and support are separated;

- Principle 4: individuals have choice and control;

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[1] https://www.crisis.org.uk/ending-homelessness/homelessness-knowledge-hub/housing-models-and-access/housing-first-feasibility-study-for-liverpool-city-region-2017/

- Principle 5: an active engagement approach is used;

- Principle 6: the service is based on people's strengths, goals and aspirations; and

- Principle 7: a harm reduction approach is used.

This report is based upon two formative visits to each Pilot, and the first of four further rounds of qualitative fieldwork undertaken in July/August 2019. References to fieldwork throughout this document relate to the latest round in summer 2019, unless otherwise stated.

Consultees included Pilot leads and key staff, provider leads and support workers, and local partners and stakeholders (including those from local homelessness services, local authority staff, third sector partners, the police, and public health representatives). Subsequent Pilot fieldwork will include consultations with service participants in all three Pilot areas.

2   The Housing First Pilots

A brief overview of each of the Pilots is provided below.

Greater Manchester Combined Authority (GMCA)

The GMCA Pilot (branded as Greater Manchester Housing First, GMHF) covers the ten local authorities of Manchester, Bolton, Bury, Rochdale, Stockport, Oldham, Tameside, Salford, Trafford and Wigan. It is delivered by a consortium of seven partners led by Great Places Housing Group and endorsed by the Greater Manchester Housing Partnership (GMHP).

The Pilot has a central Combined Authority contract management team and a lead provider who are jointly responsible for subcontracting arrangements with other 'end-to-end' and specialist service providers. The region is divided into four zones, each with different lead delivery partner(s), and teams of seven staff (a team leader and six support workers, each with a caseload of six clients with the ability to flex to seven for short periods) in each zone. The first service users were recruited, and housed, in March 2019. The Pilot also has a co-production group made up of individuals who have lived experience of homelessness, facilitated by the Creative Inclusion consultancy on behalf of GMCA.

The GMCA Pilot benefited from previous experiences of delivering Housing First in the region, albeit on a smaller scale. Key features of the GMCA Pilot include:

- Efforts to ensure consistency of delivery across the ten local authorities through the development of the GMHF brand, recruitment of a central team, common job specifications and pay rates, shared training, Quality Assurance framework and standardised referral criteria; and

- The inclusion of specialist mental health input through two Dual Diagnosis Practitioners, with two more planned as the service expands, recruited to help negotiate barriers facing those with co-occurring mental health, drug and/or alcohol issues. The Dual Diagnosis Practitioners work both directly with service users and provide a reflective supervisory and advisory role for support workers.

Liverpool City Region Combined Authority (LCRCA)

The LCRCA encompasses the six local authorities of Liverpool, Sefton, St Helens, Wirral, Halton and Knowsley. The LCRCA Pilot model is strongly influenced by the approach proposed in a 2017 initial Housing First feasibility study, carried out in the region. The Pilot has a central management team and three teams of support workers (comprising one team leader and four support workers) recruited by the Combined Authority to deliver a test and learn pilot prior to commissioning an extended Housing First service. Each team will work with up to 20 service users (a ratio of one support worker to five service users) in the test and learn stage. On commissioning the extended service, the support teams will join the providers to act as Housing First Champions. The test and learn pilot launched in July 2019, with the first service users recruited in the same month and the first housed in August 2019.

The Pilot also has a lived experience group comprising 12-15 individuals, facilitated by the Pilot Lived Experience Lead. The group have contributed to the development of the Pilot from the outset and are expected to do so in future.

The Pilot places a strong emphasis on "systems change", seen as an essential requirement of effective and sustainable Housing First delivery. Two other elements are also emphasised:

- Commissioning two psychologists to work with service users and support Housing First staff - like the Dual Diagnosis Practitioners in GMCA and the clinical staff in WMCA, the psychologists will also help negotiate access to specialist mental health services.

- The development of a 'best practice' approach to service commissioning, based on current thinking on collaborative commissioning and developed with the Housing First Europe Hub to provide a commissioning model which can be applied elsewhere.

West Midlands Combined Authority (WMCA)

The WMCA encompasses the seven local authorities of Birmingham, Coventry, Dudley, Sandwell, Solihull, Walsall and Wolverhampton, with Birmingham City Council (BCC) acting as the lead and accountable body for the Pilot. From the outset, it was decided that each authority would commission their Housing First services separately. To support commonality across the seven areas, BCC commissioned the Birmingham Voluntary Service Council (BVSC) to develop a common tendering process, service specification, and a template job description for support workers. The Pilot follows a strengths-based approach, underpinned by psychologically informed environments (PIE), as the evidence suggests staff trained in this framework work more effectively with clients with complex trauma.

Commissioning was staggered across the WMCA. At the time of fieldwork, two local authorities had chosen to deliver in-house (Dudley and Wolverhampton); the housing association Fry Accord had been commissioned to deliver across three areas (Walsall, Sandwell and Solihull); the homeless charity Shelter were delivering in Birmingham; and the housing association Brighter Futures had been commissioned in Coventry. The first service users were recruited, and housed, in January 2019 through an early adopter pilot. Both Walsall and Birmingham built on early adopters:

in Walsall a self-funded Housing First service (established November 2017) and in Birmingham a service commissioned by BVSC in January 2019.

The Pilot also draws upon an 'Experts by Experience' group, originally established by Mind for the Fulfilling Lives programme, which has been consulted on Pilot development throughout.

Key features of the WMCA Pilot which will be explored in the evaluation include:

- The commissioning model, with each local authority commissioning separately (and featuring a combination of externally commissioned and internally delivered support across the authorities), which provides a rich opportunity for learning.

- The role of BVSC in providing a central coordination function across the seven local authorities, to explore effectiveness and the potential for replication.

Commitment to fidelity

Each Pilot has expressed a commitment to establishing and maintaining fidelity with the seven Housing First principles introduced above. Findings from the 'pre-launch' and first fidelity assessments showed that ensuring compliance with the principles has required their introduction to Pilot staff and providers before their implications can be worked through in practice. Each Pilot has provided training to ensure common understandings of the Housing First principles amongst staff and stakeholders, and in some cases have staff in place who are responsible for ensuring fidelity with the principles is maintained.

In the most recent fidelity assessment (August/September 2019) the Pilots rated between medium and high in terms of compliance with the individual Housing First principles, with none scoring Low and several scoring High for some, especially those within the direct control of the support teams. High ratings were provided for Principle 3 (housing and support are separated) and Principle 5 (an active engagement approach is used) for two of the Pilots, with one rating High for Principle 6 (the service is based on people's strengths, goals and aspirations) and one for Principle 7 (a harm reduction approach is used).

Key areas to be monitored in future include: the ratio of staff to service users (which can be affected detrimentally if staff cannot be recruited in line with the increase in Pilot caseloads); and, the ability to offer choice of quality homes (which can be impaired by the limited availability of affordable housing).

3   Pilot development and preparations for delivery

The process evaluation explored Pilot development and preparations for delivery, and the key enablers and challenges experienced. In each area tackling homelessness was a political priority, and the Pilots have benefited from strong mayoral support from the outset. The 2017 feasibility study was influential both in the Liverpool City Region and nationally, while the Greater Manchester and West Midlands Pilots drew upon previous experience of delivering Housing First, albeit on a small scale, in their areas.

Developing implementation plans

Each Pilot was required to develop an initial implementation plan, which formed the basis of individual Memoranda of Understanding (MoU) between the Pilots and the Ministry of Housing, Communities and Local Government (MHCLG). The format of the implementation plans varied, with each including an initial estimate of demand for services and plans for delivery models, eligibility criteria and potential referral routes.

Common areas for discussion in the early stages of Pilot development included establishing the distinction between Housing First and 'housing led' approaches; developing shared understandings on the Housing First principles and the importance of maintaining fidelity to them; and developing outline eligibility criteria. Some Pilots considered how Housing First might be used in a preventive capacity, to target specific 'at risk' groups (e.g. care leavers).

In each region the planning process was led by the Combined Authority, with steering and associated sub-groups developed to lead the process, and representation from relevant statutory agencies and the local homelessness sector. The timescale to develop later versions of the plans was considered a constraining factor in some cases, and restricted opportunities to engage with all potential partners and stakeholders. This also meant that the Pilots had to work intensively to ensure commitment at the strategic and operational levels prior to delivery.

Engaging stakeholders and gaining commitment

Each Pilot has benefited from the active commitment of their Mayors and other senior stakeholders, and while this may have brought pressures to deliver against CA-wide priorities it was considered key to driving the Pilots forward. Progress was further facilitated in areas where political support and senior commitment was reflected at the front-line. Concerns raised included: shortages of suitable/affordable housing; the implications for other services; and 'cultural resistance' to the "systems change" aspects of the Pilots. In some areas the CAs themselves, as relatively new bodies without statutory responsibilities for homelessness, were finding their feet and developing the structures to commission and manage large scale service delivery.

Stakeholder engagement strategies commonly began by engaging homelessness portfolio holders in each local authority, and through them reaching local operational teams and providers. Resistance was experienced in some areas due to the perceived implication that by introducing Housing First existing services 'were not good enough' and concerns over the sustainability of funding. The ability to demonstrate the early success to stakeholders was key in improving engagement.

A combination of group events, workshops, presentations and individual meetings were used to raise initial awareness, develop common understandings and establish commitment, with key stakeholders also being recruited to Pilot steering and/or working groups. But the key finding is that stakeholder engagement takes time and cannot be rushed if strong and active commitment is to result. Additional time should be factored into future programmes of this scale which require engagement with multiple local authority and provider stakeholders.

Commissioning arrangements

At the time of fieldwork the WMCA and GMCA Pilots had commissioned full Housing First services across their areas, while in the LCRCA a 'best practice' informed

approach to commissioning was being developed with the Housing First Europe Hub. In GMCA commissioning took place centrally across the four zones of the area, while in WMCA it took place at the local authority level, with five of the seven WMCA authorities commissioning externally and two delivering internally.

All three regions/Pilots raised concerns regarding the availability of a suitably experienced provider base with the capacity (and value base) to deliver Housing First at scale, and the availability of support workers in each area to fill posts. More specifically:

- The seven **WMCA** local authorities made their own commissioning arrangements, with a commitment to work collaboratively to establish a common and coherent approach to help fidelity with the Housing First principles. The Birmingham Voluntary Service Council (BVSC) were commissioned to support the development of the tendering process, including a service specification and template job description for support workers. A common support model was agreed, with caseloads of five to seven individuals per support worker and offering support and access to other services. Two authorities subsequently decided to deliver their services in-house.

- In **GMCA** the design of a service specification was followed by a market event, which provided detail of the Housing First approach and built expectations around the single consortium model proposed. Five bids were received and assessed by a panel including individuals with lived experience who assessed two sections of the bids which accounted for 20% of the overall score. After a delay in announcing the successful provider the contracts were awarded to a consortium led by the Great Places Housing Group in February 2019 with delivery beginning in April 2019.

- The **LCRCA** Pilot was yet to commission their full service and were developing an approach building on best practice in service commissioning from the UK and EU. This approach is also intended to influence commissioning within the region, and so contribute to system change by improving commissioning standards within the homelessness and associated sectors. The CA will lead the commissioning process, with the relevant local authorities being represented on the assessment panels, and a commissioning framework was being developed at the time of fieldwork.

Staff recruitment

Different approaches were followed to develop job specifications for delivery staff:

- In GMCA standardised job specifications and rate card were developed for equivalent roles across the four zones;

- In LCRCA input from the lived experience group clarified that a lack of formal qualifications would not be considered a barrier to recruitment; and

- In WMCA elements developed centrally by BVSC and the providers' existing job specifications were combined to devise locally-specific job specifications.

The recruitment process also varied between and within Pilots and was typically determined by the individual delivery partners. In most cases assessment panels

included representatives of the Pilots' lived experience groups. Their input was universally considered helpful, notably in terms of gauging whether applicants were people that clients would be 'able to work with'. The GMCA and LCRCA Pilots also included exercises to assess the alignment of applicants' values with Housing First principles.

Pilot providers had, however, encountered difficulties in recruiting the requisite number of staff, with some having to re-advertise posts to find individuals with the values deemed essential for Housing First delivery. Competition for staff was reportedly exacerbated by the multiple rough sleeping and other initiatives operating concurrently. In addition, while Housing First support worker salaries were higher than the average in one Pilot area, low salaries were seen as a potential recruitment barrier in another. Concerns were also raised regarding the impact of Pilot recruitment on staff availability locally.

Interviewees suggested recruitment pressures might be relieved by considering personnel from 'non-traditional sectors', to target people with the 'right (asset-based) values' and 'teaching them about homelessness and housing'. Support workers recruited at the time of fieldwork came from a range of backgrounds, including housing, criminal justice and substance misuse.

Staff induction and training of staff is coordinated centrally within each Pilot, delivered by a mix of Combined Authority, provider partner bodies, and commonly included subjects such as: Housing First principles, reflective practice, Psychologically Informed Environments (PIE), asset/strengths-based approaches, conflict resolution, self-harm and suicide, and wellbeing and resilience.

Developing eligibility and referral criteria

Each Pilot has established a set of shared eligibility criteria across all constituent authorities. While the detail of the eligibility criteria in each of the three Pilots are described differently, all target long-term homeless people with multiple and complex needs. These typically include a combination of: mental and/or physical health issues; repeated substance use; a history of offending; and/or serial exclusion from other homelessness services.

In GMCA and WMCA common eligibility assessment and referral forms were developed for use by all constituent authorities, both using the New Directions Team (NDT) assessment tool[2]. In WMCA the tool is used to facilitate decision making alongside the professional judgement of staff; and in GMCA a modified version and threshold score is used to facilitate discussions and promote consistency (but is not necessarily the sole basis for decision making).

Referral pathways also vary, reflecting local infrastructure and partnership arrangements. In GMCA, the referral process is determined at the local authority level with the delivery partners, with each local authority establishing referral assessment panels. In WMCA a common referral form has been developed to

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[2] The New Directions Team assessment (NDT, also known as the Chaos Index) is a widely used assessment tool which focusses on the behaviours of an individual, their use of services and levels of risk taking. The tool produces a numerical score for the vulnerability of the individual, to enable targeting of services and resources.

ensure each area collects the same information, although referral routes vary between the individual local authorities. In the LCRCA test and learn pilot local authorities nominate individuals considered suitable for Housing First, with contact made through their existing support worker in the first instance, and potential referrals reviewed at weekly local authority eligibility panel meetings.

The process of establishing shared understanding across local authorities regarding eligibility criteria and agreeing referral processes was widely acknowledged as a key challenge by the Pilots. Stakeholder interviewees commonly emphasised the scale of this task and cautioned that any other area should not under-estimate how long the process takes.

Arrangements for sourcing properties

Key to the success of any Housing First service is the ability to secure properties in sufficient numbers, and of sufficient quality and affordability, to allow choice for service users. The Pilot areas each have different mixes of housing stock - the LCRCA benefits from a high share of social housing, whereas in GMCA the picture is more varied across the authorities (with an overall 60:40 social:private split expected). The picture also varies in WMCA, where Coventry for example has no authority-owned housing and limited social housing stock, while Birmingham City Council has pledged to provide 50% of the properties required. Overall, while at the time of fieldwork current demand was being met through social housing, the private rented sector (PRS) is expected to play a bigger role going forward. In some areas (e.g. Central Manchester) rental costs is expected to restrict the properties that can be used.

Given the importance of securing accommodation, each Pilot prioritised this in their preparatory activities. At the time of fieldwork, GMCA had secured 155 pledges of accommodation from social housing providers and PRS landlords for the first year of delivery. Efforts to integrate the PRS offer include: offering assurances on the support provided to tenants and bonds to PRS landlords; developing relationships with GM's Ethical Lettings Agency; and discussions with social financers and the Combined Authority's own investment fund to acquire properties.

In the LCRCA, attentions initially focussed on securing commitment from the area's housing associations for the test and learn stage (and for full service delivery). A Local Lettings Agency (LLA) is also proposed, to provide properties and including the involvement of PRS landlords. Steps taken to secure commitment from local housing associations included: establishing a Housing First Housing Associations Working Group (meeting monthly with representation from the region's largest housing associations); holding a series of workshops and meetings with housing association staff to introduce Housing First and establish common understandings; and developing service level agreements, a Housing First Commitment Charter and a delivery manual for front-line staff. At the time of fieldwork, the Pilot had secured commitment from the region's 15 largest housing associations to supply properties for the test and learn stage.

In the WMCA two regional events were held to introduce social and private landlords to the Housing First concept, while the Homelessness Task Force continues to play a key role at the strategic level in encouraging the commitment of housing providers in the region. Responsibility for sourcing properties sits with the providers

commissioned to deliver Housing First services, and at the time of fieldwork developments varied across the local authority areas. For example, in Birmingham the City Council had committed to provide half of the housing stock needed. A Property Acquisition Manager was being recruited to work with social and PRS landlords, and resources allocated to a 'crisis fund' to cover rent bonds and any damage done to properties by tenants. Elsewhere in the region a combination of local authority housing, social landlords, and PRS properties will be drawn upon.

Despite the progress made in securing properties, ensuring a sufficient supply of suitable and affordable accommodation for service users as delivery scales up remains the main concern in each Pilot area. Interviewees expressed particular concern regarding the availability of single bedroom properties, given the reported competition from other initiatives, the perceived influence of the spare room subsidy, and the impact of competition on the Pilots' abilities to offer choice. All three areas recognised that identifying properties meeting service users' specific requirements might delay the accommodation process and suggested that alternative interim solutions (such as temporary accommodation) would need to be considered where delays were experienced.

4   Early Implementation and Progress to Date

Progress to date

While all three Pilots were delivering at the time of fieldwork, each was at an early, yet different, stage of implementation. Numbers of people referred, supported, and housed varied quite widely reflecting different launch dates and approaches. It was noted that recruitment had been slower than originally anticipated, with local stakeholders being keen to stress the time needed to commission at scale, recruit staff and establish robust operational processes and policies across the board.

Referral and recruitment

All Pilots had experience of early engagement with individuals referred to their programmes. Overall it was felt that the 'right' people were being identified, although some early problems were reported including inappropriate referrals from some agencies demonstrating a lack of understanding of the criteria for inclusion and/or the Housing First principles.

Frontline staff described a high level of complex need amongst those referred to date, which meant the early relationship building stage could be protracted due to the time needed to build trust. During this stage, assessment of need was typically described as verbal and informal, avoiding the use of formalised paperwork that can be alienating to clients. In some cases assessments included joint working with others already engaged with individuals and/or input from mental health or drug and alcohol practitioners.

Securing accommodation

The ability to offer affordable and secure quality housing was widely recognised as a key challenge by frontline staff. Nonetheless there was a clear commitment to the

principle of choice and a recognition that tenancy success was likely to be contingent on this principle.

Support workers already engaged in housing individuals described how they would discuss details of preferred location and housing type, while also considering a person's support networks and the activities or community groups they might want to engage with. Positive examples were given where housing providers had facilitated people to meet their preferences and needs, including making adaptations for disabled tenants, accommodating pets and sourcing low rise properties where tenants had requested this. However in other areas challenges had been faced in securing tenancies for people, for example in specific locations where there were no available properties.

Pilot partners reported mixed experiences of working with housing providers. For example in Birmingham, where the City Council has pledged to provide 50% of the required properties, staff reported positive working relationships with Housing Officers. The Housing Officers were described as being strongly motivated to make Housing First a success, and were willing to be flexible in their approach to accommodate Housing First tenants. By way of contrast Housing Officers in some other areas were felt to have a poor understanding of Housing First, demonstrating intolerant and inflexible attitudes to tenants and in some case issuing Section 21 notices[3].

Frontline workers highlighted the anxiety commonly felt by service users regarding perceived risks of tenancy failure. They explained that individuals, reflecting on past tenancy failures, can often express doubt over the stability that Housing First offers, belied with a reluctance or inability to believe that it is different to other forms of provision. Social isolation was also described as a problem, with this causing some people to spend time back on the streets when first accommodated.

Support delivery

Support workers were typically working with caseloads of five to eight people, with the intensity of support varying according to people's needs and desire to engage. In a minority of difficulties in staff recruitment meant that caseload sizes were growing, with one area reporting that some staff were working with up to 12 people at a time.

In some areas staff were principally involved in the early stages of engagement with people referred to the service. There could be a considerable time lag between service uptake and entering accommodation, during which building trust and rapport were of primary importance. The period immediately after service users had moved into a property was often described as requiring intense practical and emotional support. This involved helping with a wide variety of tasks including decorating, sourcing furniture and white goods, setting up utilities and council tax, registering the address with the Department for Work and Pensions (DWP) for benefit claims, finding a local GP and/or dentist, and accessing mental health services and new pharmacists for prescriptions.

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[3] In England and Wales, a Section 21 notice is the form which a landlord must give to their tenant to begin the process of taking possession of a property let on an assured shorthold tenancy, without providing a reason for wishing to take possession.

On-going support is designed around the needs of individuals, and could include taking people shopping, budget management, encouraging personal hygiene and developing cooking skills. Providers were also working with their local DWP office to ensure alternative arrangements for payment of rent through Universal Credit (UC) were in place.

Whilst still very early to report outcomes, providers were able to give examples of positive engagement with individuals known to local homelessness services for many years and for whom little had previously been achieved. Examples include housing individuals with a history of multiple failed tenancies, a reduction in recidivism for persistent offenders, and enabling family reconnections.

Engaging specialist provision

Where groundwork had been done to establish understandings of Housing First and secure buy-in, positive examples were identified of productive and effective partnership working. For example, in the West Midlands, efforts to engage with DWP at the regional and local levels had supported the development of processes to facilitate alternative payment arrangements. In both the West Midlands and Greater Manchester, relationships established under other initiatives, for example the Rough Sleeping initiative (RSI), were described as reaping benefits for the implementation of Housing First. Examples include close working with specialist community-based health staff employed through the RSI in the West Midlands, and positive interactions with the police in Greater Manchester.

However, on-going challenges in establishing effective working relationships with key partners were also described. Most significantly these included working with colleagues in Mental Health Trusts, in particular for individuals with a dual diagnosis of substance misuse and mental health problems. While work was being done at the strategic level to improve pathways into mental health services, this was not always translating into collaborative action at the frontline. In all three areas the appointment of specialist mental health workers to staff teams was expected to both provide additional support to people and to break down some of the barriers to access currently experienced.

5   Key Learning and Recommendations

The report sets out the key learning from the development and early implementation stages, with a set of recommendations for MHCLG and the Pilots.

Key learning

A number of key lessons learned during the initial stages of development and delivery, and from the early implementation stage are summarised below.

Learning from development and preparation

- The process of developing implementation plans and preparing for delivery (e.g. agreeing eligibility criteria, referral pathways etc) across Combined Authority and multiple local authority areas takes time - and should not be underestimated when working at scale.

- Securing commitment at the highest level across all partners is essential for effective implementation, although this can also bring pressures to deliver quickly in a high- profile intervention.

- Effort is needed to ensure that frontline staff in stakeholder agencies understand what Housing First is – with active engagement in the design stage fostering the co-construction of 'bottom up' solutions to any concerns or resistance.

- Identifying support workers with the necessary skills, experience and attitudes/values can be challenging. The recruitment of individuals from 'outside' the homelessness sector should be considered going forward.

- Relationships need to be established with housing providers as early as possible, and substantial effort may be required to engage with the PRS and some social landlords. The intensity of support and potential financial incentives offered may be helpful.

- The capacity of the local provider base should be assessed at the outset, to inform decisions on whether services should be commissioned or delivered 'in house'.

- The involvement of people with lived experience of homelessness and complex needs in service development is valuable if it is not tokenistic, focused, and acted upon. Both LCRCA and GMCA Pilots have full time workers paid to facilitate Lived Experience work, which has helped ensure that the Lived Experience voice is strong and not lost among other priorities.

Learning from early delivery

- **Referral**: Staff making referrals to Housing First must fully understand the eligibility criteria and service offer - with networking and education being required.

- **Early engagement**: The importance and potential length of the pre-tenancy engagement process, when service users establish trust in support workers, should not be underestimated.

- **Assessment**: Informal assessment processes are more acceptable to Housing First clients than traditional formal assessments, and where service users have mental health issues or are dually diagnosed it may be appropriate to develop joint assessment processes with dual diagnosis specialists or mental health clinicians.

- **Accommodation**: Challenges in securing accommodation represent a threat to the Housing First principle of choice and are likely to intensify as referral numbers increase. On-going work with housing providers to broaden their understanding of Housing First will be important.

- **Delivering support**: The intensity of support required by service users varies depending on individual need and stage of engagement, appearing most intense on entering a tenancy and reducing as they become established in their homes. Housing First's flexibility and lack of conditionality facilitate both ongoing engagement and housing retention.

- **Specialist provision**: High levels of strategic buy-in are not always reflected amongst specialist service providers. Particular challenges include getting mental health and drug and alcohol services to work jointly.

Recommendations

The report includes a series of initial recommendations for MHCLG and the Pilots, including:

Recommendations for MHCLG

- Allow a **longer lead time after funding is confirmed before delivery is expected**, to allow for relationship building, securing commitment and establishing systems and processes – given the challenges of preparing to implement at scale across multiple local authority areas.

- Consider **potential routes to service sustainability and to sustain the progress made by users**, as many will have support needs extending beyond the Pilot period.

- **Facilitate the sharing of practical experiences and learning** from service delivery between the Pilots, including both what did and what did not work well.

Recommendations for the Pilots

- Continue to **prioritise steps to ensure the fidelity** of the Housing First services offered, which may face competing pressures as delivery scales up.

- Take steps to **collect learning** from delivery on an ongoing basis, and through **facilitated exchanges** of learning, inform ongoing delivery across the Pilot areas.

- Ensure that the **lived experience perspective is captured** as delivery scales up, and routes are in place so that service user experiences can inform service delivery.

- While most accommodation across all three areas is expected to be sourced from social housing/Housing Associations, **continue to take steps to engage PRS landlords**, and share learning on what works in engaging the PRS.

- Given concerns over the housing supply, and to maximise choice for service users, **continue to identify new opportunities** in the private and social housing sectors.

- Pilots should consider how to **ensure a sufficient supply of support workers** as delivery scales up and how any negative impact on the staffing of local homelessness services can be minimised – e.g. recruiting outside the homelessness sector or by secondments.

- As they emerge, **capture early success stories and individual case studies** to share with stakeholders to evidence the benefits of, and foster commitment to, Housing First.

1   Introduction

This report is the first interim report of the process component of the evaluation of the Housing First Pilots. The evaluation also includes a quantitative assessment of client outcomes (drawing upon survey and administrative data), a cost benefit analysis, and qualitative research with Housing First service users to explore their experiences and the benefits and impacts resulting for them.

The Housing First Pilots were established following a commitment of £28 million announced in the Autumn 2017 Budget and the completion of a Housing First feasibility study undertaken in the LCRCA which reported in July 2017. This commitment represents one of several measures introduced by the government to reduce rough sleeping, with the 2019 manifesto commitment to end it by the end of the current Parliament. Funding allocations for the programme were announced in May 2018.

The Pilot programme aims to develop the UK evidence base on the effectiveness of Housing First delivered at scale by funding, and robustly evaluating, three regional programmes. Set in the three combined authority areas of Greater Manchester, Liverpool City Region and the West Midlands, learning from the development and implementation of their Housing First services is intended to inform future investment decisions going forward. The Pilot timetable initially envisaged a delivery period of three years, ending in Autumn 2021, with a further two years of legacy support to allow for individuals recruited and still engaged with the Pilots at this point.

1.1   An introduction to Housing First

Housing First is an intervention which supports homeless people with multiple and complex needs, which most commonly relate to co-occurring mental health issues and alcohol and/or drug misuse, to access and maintain independent housing[4]. Its traditional target group has historically been poorly served by mainstream services given the nature of, and overlaps between, support needs. The approach was originally developed in the United States, but is being replicated increasingly across North America, Europe, and Australasia. As is true of other UK jurisdictions, England has been comparatively late in the adoption and roll-out of Housing First by international standards[5], but a number of (typically small-scale) pilots and projects do exist[6].

Housing First departs from traditional 'staircase' or 'treatment first' approaches by circumnavigating transitional forms of accommodation, for example hostels and other forms of temporary accommodation such as bed and breakfast premises, and housing people directly in independent long-term settled housing with personalised, flexible and non-time-limited support. The individuals using it are granted choice and control over both housing and support elements, and there are no preconditions

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[4] Tesmberis, T. (2010) Housing First: the Pathways model to end homelessness for people with mental illness and addiction. Center City, Minnesota: Hazelden.
[5] Johnsen, S. and Teixeira, L. (2010) 'Doing it already'?: stakeholder perceptions of Housing First in the UK. International Journal of Housing Policy, 12(2), 183-203.
[6] Homeless Link (2018) The Picture of Housing First in England. London: Homeless Link.

around 'housing readiness' or participation in treatment. Rather, secure housing is considered to offer a stable platform from which other issues might be addressed.

Housing First is based on seven key principles[7], developed by Housing First England for the specific English context, namely:

- Principle 1: people have a right to a home;

- Principle 2: flexible support is provided for as long as it is needed;

- Principle 3: housing and support are separated;

- Principle 4: individuals have choice and control;

- Principle 5: an active engagement approach is used;

- Principle 6: the service is based on people's strengths, goals and aspirations; and

- Principle 7: a harm reduction approach is used.

There is substantial variation in how the model is implemented in practice[8], but existing evidence indicates that programmes offering greater levels of fidelity to the core principles report better outcomes [9].

The international evidence on Housing First's effectiveness is far stronger than is true of other housing-focused interventions targeting single homeless people[10] . Existing international impact evaluations indicate convincingly that Housing First 'works' for the vast majority of individuals using it, with housing retention statistics typically coalescing around the 80% mark. Non-housing outcomes tend to be less impressive, but many Housing First programmes report improvements in health, reductions in substance misuse, reduced involvement in criminal activity, and/or improved quality of life. These findings serve to emphasise the complexity of the issues facing the Housing First target group.

To date, the evidence base on the effectiveness of Housing First within the UK has been limited to a number of primarily qualitative evaluations of small localised pilot projects[11]. This evaluation will make a contribution to the UK evidence base by including a quantitative assessment of client outcomes, cost benefit analysis, and process evaluation for the three Pilots delivered 'at scale' in England.

This interim report focuses on the process evaluation, which considers explicitly the influence of national and local contextual factors such as housing markets and welfare systems on service implementation and effectiveness.

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[7] Homeless Link (2016) *Housing First in England: the principles*. London: Homeless Link.
[88] Blood, I., Goldup, M., Peters, L. and Dulson, S. (2018) *Implementing Housing First across England, Scotland and Wales*. London: Crisis.
[9] Mackie, P., Johnsen, S. and Wood, J. (2017) *Ending Rough Sleeping: What Works? An international evidence review*. London: Crisis.
[10] Ibid
[11] Ibid

1.2   Process evaluation methodology and approach

The process evaluation has both formative and summative components, with the aims of:

- Understanding how the Pilots prepared for the delivery of their services – and the key lessons for replicating the development of Housing First at scale elsewhere;

- Exploring the effectiveness of these services at scale over time – in terms of what has worked well and what less so, the enablers and challenges experienced, and how the new services fit within the wider homelessness structure; and

- Understanding how Housing First makes a difference to the individuals receiving services – including their experience of service delivery and the benefits resulting for them.

The evaluation also includes an assessment of each of the Pilots in terms of their **fidelity with the seven principles of Housing First**, undertaken by Homeless Link. Following an initial assessment prior to the start of service delivery, four fidelity assessments are scheduled to take place across the Pilot period, with the first full assessment being completed in August/September 2019. A summary of the first full assessment is provided in section 2.4.

The process evaluation comprises a programme of qualitative data collection, preceded by two initial visits to introduce the evaluation and undertake an initial formative review. The main process evaluation features four rounds of fieldwork activity in each Pilot area, including qualitative interviews (face to face, grouped and by telephone) with:

- Pilot leads and key staff, including individuals with lived experience who have contributed to project design and implementation;

- Provider leads and support workers – in individual or group interviews;

- Local partners who are referring individuals to or delivering services on behalf of the Pilots; and

- Local 'strategic' stakeholders, including those from the local homelessness infrastructure, local authority staff, third sector partners, the police and community and public health representatives.

The process work will also include qualitative interviews with individuals receiving Housing First services, beginning as part of the next round of qualitative fieldwork. In addition, a programme of peer research is being developed, which will involve close working with the Pilot lived experience teams and will explore participants' experiences of service delivery.

This initial report draws upon fieldwork undertaken as part of a series of visits to each of the Pilots in December 2018 and July/August 2019, but also refers back to fieldwork undertaken earlier in the study as part of the methodology scoping and co-production stage. Consequently, the report focuses on the Pilot's experiences of their design, development and early implementation stages, with subsequent fieldwork and reporting focusing on how services have embedded locally, the

outcomes and impacts achieved (and the active elements of the service which underpin them) and an exploration of key learning to inform any future roll out. References to fieldwork throughout this document relate to the latest round in summer 2019, unless otherwise stated.

1.3   Report structure

This report is structured as follows:

- Chapter 2 - The Housing First Pilots: which provides an overview of the programme, the three Pilots, and summary findings from the most recent fidelity assessment undertaken by Homeless Link.

- Chapter 3 - Developing the Pilots and Preparing for Delivery: setting out the key steps and tasks in the development of the Pilots and their preparations for delivery and highlighting key learning.

- Chapter 4 – Early Implementation and Progress to Date: exploring the Pilots' early experiences of service delivery, progress in terms of numbers joining the programme, and early successes and challenges.

- Chapter 5 provides our conclusions and recommendations, with the key learning to date.

The report also has two annexes: Annex I provides an overview of national homelessness funding initiatives, and Annex II presents a summary of the eligibility criteria applied in each Pilot area.

2 The Housing First Pilots

This chapter provides an introductory overview of the three Housing First Pilots, their key features, and the findings from the recent assessment of Pilot fidelity.

2.1 The Housing First Pilot programme

As Section 1 described, there is a strong international evidence base that a Housing First approach can secure sustained accommodation outcomes for individuals with histories of homelessness and associated multiple and complex needs. The Pilot programme was designed to test Housing First delivery at scale, in the Liverpool City Region Combined Authority (LCRCA), Greater Manchester Combined Authority (GMCA) and the West Midlands Combined Authority (GMCA), which collectively encompass 23 local authority areas.

The Pilot programme originates from a feasibility study, jointly funded by the then Department for Communities and Local Government (DCLG) and the homelessness charity Crisis, undertaken in the LCRCA area in 2017. The feasibility study set out a proposed model for delivering Housing First at the Combined Authority level, and the potential impacts and financial savings.

The three Combined Authorities were invited to prepare initial implementation plans, setting out their intentions for piloting Housing First in their areas, with estimates of the number of individuals engaged and housing outcomes achieved. The central government funding secured for each Pilot is shown in Table 1, with the programme originally designed to operate for a three-year period between Autumn 2018 and Autumn 2021.

Table 2.1   Pilot Budgets

Pilot Area	Budget
Greater Manchester CA	£8 million
Liverpool City Region CA	£7.7 million
West Midlands CA	£9.6 million
Total Pilot funding	*£25.3 million*
Central costs	£2.7 million
Total Pilot programme funding	**£28 million**

All three Pilots emphasise a commitment to the delivery of Housing First to a high degree of fidelity with the Housing First principles. Three different models emerged, in terms of their: intended approaches to commissioning, management and accountability; staffing structures; and the extent to which a 'single model' is applied across constituent local authority areas.

2.2 The Pilot models

The key features of the Pilot models are outlined in the following sections.

2.2.1 The Greater Manchester Combined Authority

The GMCA includes the ten authorities of Manchester, Bolton, Bury, Rochdale, Stockport, Oldham, Tameside, Salford, Trafford and Wigan, as in Figure 2.1.

Figure 2.1   GMCA constituent local authorities
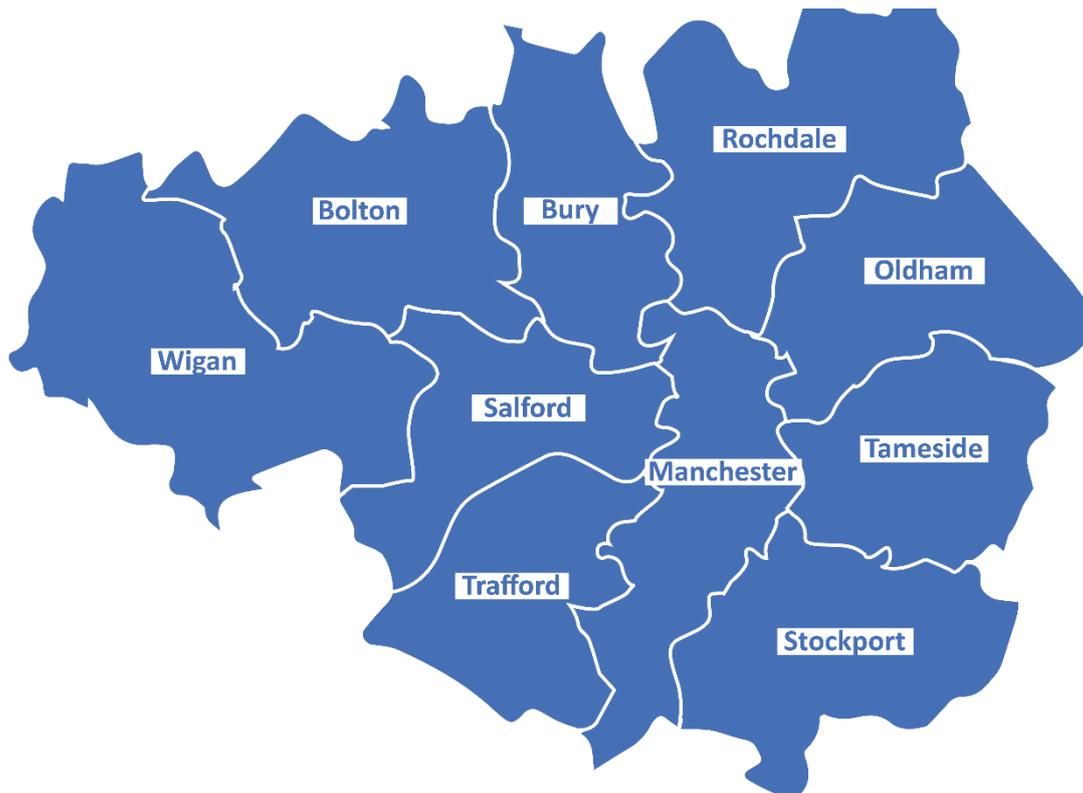
The GMCA pilot is being delivered by a consortium of seven partners led by Great Places Housing Group (Zone A leads) and endorsed by the Greater Manchester Housing Partnership (GMHP). Other partners include: Riverside (Zone A lead), Regenda Homes and The Bond Board (Zone B lead and support resp.), Jigsaw Homes Group and Stockport Homes Group (Zone C lead and support resp.), and Greater Manchester Mental Health Trust (GMMHT).

Branded as Greater Manchester Housing First (GMHF), the Pilot has a Combined Authority management team providing oversight, and a lead provider (Great Places), who are responsible for subcontracting arrangements with other 'end-to-end' and specialist service providers to ensure coverage across the Combined Authority. The Pilot central team includes a Programme Lead, Project Manager, Quality and Assurance Managers, Quality Support Officer (Year 2 recruitment), a Data Coordinator, Communications Partner and a Finance Officer (see Figure 2.2 below).

Figure 2.2   GMCA Pilot central team structure

The Combined Authority has been divided into four geographic zones, with different delivery partners having lead responsibilities in each area but all managed centrally by the central management team (see Figure 2.3). Each zone has a team leader who oversees a team of six support workers, who each have a maximum caseload of up to seven clients. All have the same job specifications and are employed on standardised pay rates, as part of a wider effort to ensure consistency of approach across the region. The first service users were recruited in March 2019, with their first person housed in the same month.

The Pilot also has a co-production group including individuals with lived experience of homelessness and complex needs (see Figure 2.3 below). The group was recruited and is facilitated by the Creative Inclusion consultancy on behalf of GMCA. Initially the group comprised a coordinator and 16 individuals, each of whom has lived experience of homelessness, with three core members who continue to contribute to Pilot development on an ongoing basis.

Figure 2.3   GMCA Pilot consortium structure
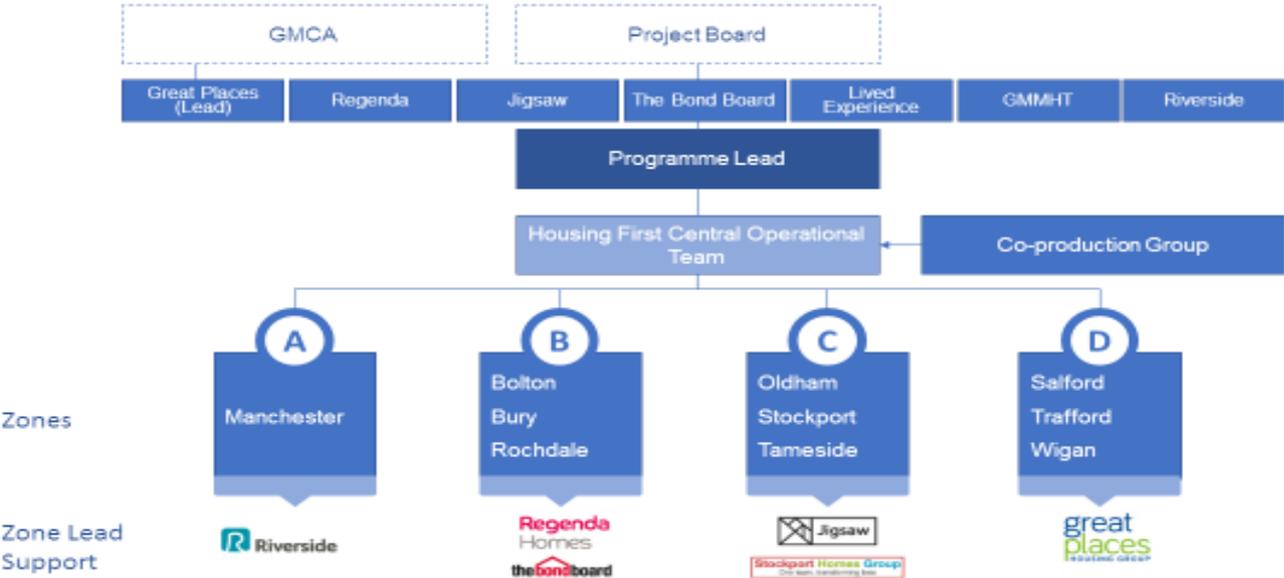
The GMCA Pilot benefited from previous experiences of the delivery of Housing First services in the region, albeit on a smaller scale.

Key features of the GMCA Pilot include:

- Efforts to ensure consistency of service delivery across the ten GM local authorities through the development of the GMHF brand, recruitment of a central team, common job specifications and pay rates for delivery staff, shared training, and standardised (if flexible in their application) referral criteria and thresholds; and

- The inclusion of specialist mental health input provided by the recruitment of two Dual Diagnosis Practitioners, with two more planned as the service expands, to help negotiate barriers in the support system experienced by those with co-occurring mental health, drug and/or alcohol issues. The Dual Diagnosis Practitioners will undertake direct case work with service users as well as providing a reflective supervisory and advisory role for the Housing First workforce.

2.2.2 Liverpool City Region Combined Authority (LCRCA)

The LCRCA encompasses the six local authorities of Liverpool, Sefton, St Helens, Wirral, Halton and Knowsley, as shown in Figure 2.4. The Pilot represents the first delivery of Housing First in LCRCA, and while there was an awareness of the approach amongst the homelessness sector direct experience of Housing First 'in action' was limited across the area.

Figure 2.4   LCRCA constituent local authorities
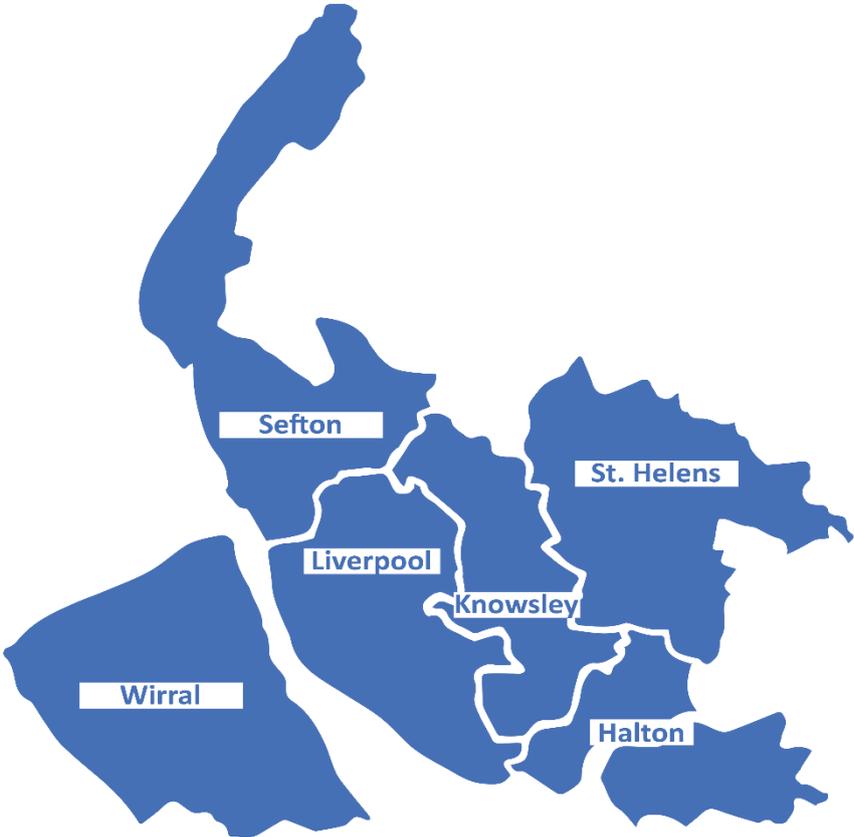
The LCRCA Pilot model is strongly influenced by the findings, and approach proposed, in the initial Housing First feasibility study[12]. In addition to a central management team, three teams of support workers have been recruited by the Combined Authority to deliver a test and learn pilot[13] prior to commissioning an extended Housing First service (intended to be in place by end December 2019[14]). The test and learn pilot launched in July 2019 and was in its early stages of service delivery at the time of the most recent fieldwork. The first service users were recruited in July 2019, and the first housed in August 2019.

At the time of fieldwork, the Combined Authority Pilot management team comprised a Programme Lead (seconded from Crisis, and the Region's Strategic Lead on homelessness), with lead staff for Best Practice and Partnerships, Commissioning, Lettings and Lived Experience, an Operations Manager and a Project and Data Coordinator. The Pilot had also commissioned two psychologists (one FTE post) to work with service users and to support the Housing First frontline staff.

The Pilot has a lived experience group comprising 12-15 individuals, facilitated by the Pilot Lived Experience Lead, and in most cases recruited from a previous Fulfilling Lives project[15]. As the group pre-dates the Pilot, some members had contributed to the initial Housing First feasibility study undertaken in 2017. The group meet at least monthly, have contributed to the development of the Pilot from the outset and are expected to do so in future.

Each of the three support teams comprise four support workers and a senior support worker/team leader, who will work with up to 20 service users per team (i.e. a ratio of one support worker to five service users) throughout the test and learn stage. On commissioning of the extended service, the support teams are intended to join the appointed providers to act as Housing First Champions.

The LCRCA Pilot has placed a strong emphasis on "systems change"[16], seeing this as an essential requirement of effective and sustainable Housing First delivery. Two other elements are also emphasised:

- The commissioning of two psychologists to undertake both case work with service users and to provide support and reflective practice opportunities for HF staff. In common with the Dual Diagnosis Practitioners in GMCA and the clinical staff to be appointed in WMCA, there is also the expectation that the psychologists will help

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[12] https://www.crisis.org.uk/ending-homelessness/homelessness-knowledge-hub/housing-models-and-access/housing-first-feasibility-study-for-liverpool-city-region-2017/

[13] The test and learn pilot features the delivery of Housing First on a small scale (estimated approximately 60 participants), with the aims of informing the development of the commissioning framework for the full Housing First service, helping establish high quality practices and procedures, and providing learning for full service delivery.

[14] Since the time of the fieldwork, we understand that LCRCA have re-scheduled their commissioning process to July 2020.

[15] The Fulfilling Lives programme is an eight-year, £112 million investment by the National Lottery Community Fund to support people experiencing multiple disadvantage. The programme funds local partnerships in 12 areas across England to test new ways of ensuring individuals receive joined up and person-centred services which work for them.

[16] Many commentators consider that change in the homelessness system is a key requirement for effective Housing First delivery, and that system change can itself be achieved through service delivery (see Nelson et al https://onlinelibrary.wiley.com/doi/full/10.1002/jcop.22095)

negotiate access to specialist mental health services and ensure staff are supported in a challenging environment.

- The development of a 'best practice' approach to service commissioning (see Section 3.7.3), based on current thinking on collaborative commissioning (and ongoing monitoring), and developed with the Housing First Europe Hub[17] to provide a commissioning model which can be applied elsewhere.

2.2.3   West Midlands Combined Authority

The WMCA encompasses the seven local authorities of Birmingham, Coventry, Dudley, Sandwell, Solihull, Walsall and Wolverhampton, as shown in Figure 2.5.

Figure 2.5   WMCA constituent local authorities
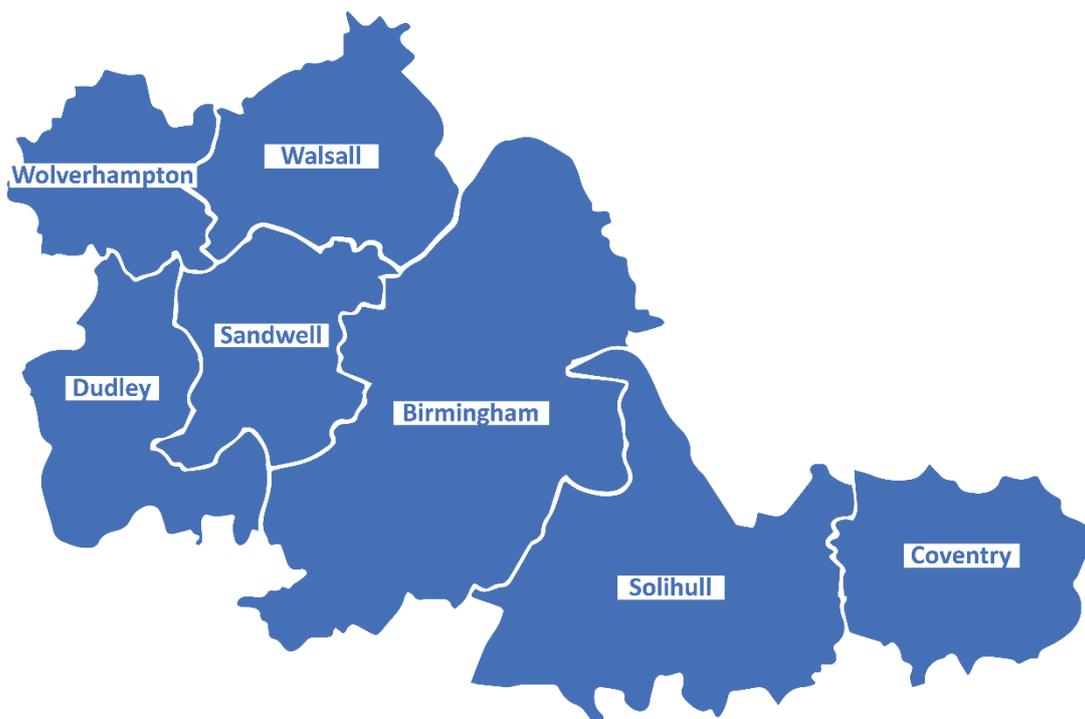
In WMCA there was agreement from the outset that each local authority would commission their local Housing First services separately. In order to support commonality of approach across the seven areas, Birmingham Voluntary Service Council (BVSC) were commissioned by BCC (the lead and Accountable Body for the Pilot) to develop a common tendering process through the production of a shared service specification and a template job description for Housing First support workers. It was also agreed early on that all LA areas would adopt a delivery model

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[17] The Housing First Europe Hub is a network of organisations, public authorities and foundations working to scale up Housing First in Europe. The Hub organizes training on Housing First, conducts and publishes research, and produces tools for practitioners and policy makers to understand, explain and deliver Housing First. See: https://housingfirsteurope.eu/

whereby support workers would work with small caseloads (five to seven people), to provide intensive support on a needs-led basis and to act as broker to other services.

There was consensus that the approach would be strengths-based and underpinned by psychologically informed environments (PIE)[18] . This consensus was informed by the strength of the evidence that staff trained to work within this framework work more effectively and positively with clients who have complex trauma. Training on PIE has subsequently been commissioned through St. Basils in Birmingham and will be delivered to all support workers employed through the Pilot. Commissioning was staggered across the Combined Authority, with some services going live earlier than others. At the time of fieldwork two local authorities, Dudley and Wolverhampton had chosen to deliver in-house; Fry Accord had been commissioned to deliver across three areas Walsall, Sandwell and Solihull; Shelter were delivering in Birmingham; and Brighter Futures had recently been commissioned in Coventry. The first people were recruited, and the first housed, in January 2019 through an early adopter pilot.

At the time of fieldwork, services were at very different stages of development and all were still in the process of recruiting and evolving their staff teams. Both Walsall and Birmingham were building on early adopters. In Walsall this was their earlier self-funded Housing First service (established November 2017). In Birmingham, this was a service commissioned by BVSC in January 2019, to build on their experience of delivering an earlier Lead Worker and Peer Mentor project (funded through Fulfilling Lives and sitting under the Birmingham Changing Futures Together (CFT) programme).

In terms of team structure at the time of fieldwork:

- **Birmingham**: the Shelter Housing First staff team comprised four Navigators, one Peer Mentor and a Team Leader, with the intention of recruiting a further eight Navigators, two Peer Mentors, a Service Manager and an additional Team Leader. In Birmingham there was also funding allocated for a specialist housing allocation post as well as mental health clinician, but these were yet to be appointed at the time of fieldwork.

- **Walsall**: the team comprised five Support Workers, a Peer Mentor and Scheme Manager. With the decision taken to commission Fry Accord to deliver in **Sandwell** and **Solihull**, the Walsall Scheme Manager had recently been given the task of managing and co-ordinating all three services and was actively engaged in recruitment.

- **Dudley**: there had been no street outreach team in place prior to Housing First. The new team included two 'Intensive Housing Support Officers' with the intention to appoint a third.

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[18] A Psychologically Informed Environment (PIE) "... is one that takes into account the psychological makeup – the thinking, emotions, personalities and past experience - of its participants in the way that it operates." It is an approach to supporting people out of homelessness, in particular those who have experienced complex trauma or who are diagnosed with a personality disorder. It also considers the psychological needs of staff: developing skills and knowledge, increasing motivation, job satisfaction and resilience. See Robin Johnson, "Psychologically Informed Services for Homeless People –Good practice guide" 2012 Dept of Communities and Local Gov and developer of http://pielink.net/.

- The in-house service in **Wolverhampton** was in the process of being reviewed.

- **Coventry**: Brighter Futures had developed a staff recruitment and training plan. As well as intense support workers this also included Peer Support workers and a specialist housing **officer** post.

The WMCA Pilot draws upon an established Experts by Experience group to provide the lived experience input to the Housing First Pilot. The mental health charity Mind were initially commissioned to facilitate the group under the Fulfilling Lives programme. The group meet regularly and have been consulted on issues related to the development of the Pilot throughout.

2.3   Fit with other services

Each of the Pilots had developed and are implementing their services within a complex network of existing local provision for individuals experiencing homelessness and with multiple and complex needs, as well as services provided under national funding initiatives. While links between Housing First and these services are developing and will be reviewed in subsequent stages of the evaluation, the presence of national funding initiatives were found to offer both opportunities and challenges for the Pilots (namely Homeless Prevention Trailblazer, Rapid Rehousing Pathway (RRP), Rough Sleeping Grant, Rough Sleeping Social Impact Bonds (SIBs) and Rough Sleeping Initiative (RSI) funding)[19].

In **Greater Manchester**, rough sleeping interventions included: a regional SIB (over 500 entrenched rough sleepers have been recruited); Homelessness Prevention Trailblazer (supporting Homeless Hubs as an extension of 'no second night out'[20] provision, where some clients were expected to be referred to the Housing First Pilot); Rough Sleeping Grant (Bolton only); and RSI funding (Manchester, Wigan, Salford; and in Tameside where this includes a specialist Housing First provider for female clients).

When existing sources of support across the GMCA region were also considered, concerns were raised over the potential for inconsistency of support depending on whether Housing First was either the sole, or one of several, options available. The combination of funding options also presents potential challenges for establishing referral systems and other processes. for example, GMCA were establishing a 'task and target' group to ensure services, including the Pilot, are coordinated to best effect.

In the **West Midlands** a similar picture emerged, with all but two of the local authorities receiving RSI funding. This included funding in Birmingham to support a multi-disciplinary street intervention team (including a specialist nurse) and drop-in services.

In Walsall RSI funding was used to support street outreach, and part-fund a Housing First 'early adopter' model, which as well as informing the development of the Pilot

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[19] See Annex I for a summary overview of current national homelessness funding initiatives.
[20] No Second Night Out (NSNO) is a pledge made to people new to the streets and is part of a commitment to ending rough sleeping. NSNO GM works to prevent rough sleeping by targeting support at people who are new to rough sleeping.

was expected to make referrals. Stakeholders considered that the Housing First and RSI funding streams sat well together, and that combined they formed part of a "systems change" endeavour.

In **LCRCA**, this web of national and local interventions were also considered to present both opportunities and challenges. On one level, involvement in existing national initiatives meant that LCR were having to engage with their local authorities on multiple fronts, which could lead to confusion. However early examples of cooperation include the Assertive Outreach service funded with Homelessness Prevention Trailblazer Area Programme monies but will also serve the Housing First Pilot.

Overall however, the introduction of the 2017 Homelessness Reduction Act[21] was felt to be changing the culture among housing staff, in terms of the treatment of clients and by promoting a focus on placement quality rather than quantity. This was expected to benefit Housing First downstream. One risk is that, with progress towards Pilot delivery being slower than expected by some stakeholders, concerns were raised by some Pilot teams that LAs could use the available Housing First funding to launch new homelessness services. This could potentially divert attentions away from the Pilot towards the implementation of their own services.

2.4 Commitment to fidelity with the Housing First principles

All three Pilots have expressed a commitment that their Housing First services will have a high degree of fidelity with the seven Housing First Principles. Each Pilot has been designed to ensure that fidelity was 'built in from the start', from influencing characteristics of their delivery models through to the recruitment processes ensuring staff member's values align with the principles.

Ensuring compliance with the principles has required them to be introduced to Pilot staff and providers, to develop common understandings, before their implications are worked through in practice. Each of the Pilots has provided training to ensure this understanding is in place, and in some cases there is a staff member responsible for ensuring fidelity is maintained as service delivery is scaled up.

In the most recent assessment of fidelity, undertaken in August and September 2019 by Homeless Link, the Pilots most commonly rated between medium and high in terms of compliance with the individual Housing First principles, with none scoring Low. Several scored High for some principles; especially those within direct control of the support teams. These were: for Principle 3 (housing and support are separated)

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[21] The Homelessness Reduction Act 2017 reformed England's homelessness legislation by placing duties on local authorities to intervene at earlier stages to prevent homelessness in their areas and required housing authorities to provide homelessness services to all those affected, not just those who have 'priority need'. These include: (a) an enhanced prevention duty extending the period a household is threatened with homelessness from 28 days to 56 days, meaning that housing authorities are required to work with people to prevent homelessness at an earlier stage; and (b) a new duty for those already homeless so that housing authorities will support households for 56 days to relieve their homelessness by helping them to secure accommodation. See https://www.gov.uk/guidance/homelessness-code-of-guidance-for-local-authorities/overview-of-the-homelessness-legislation https://www.gov.uk/guidance/homelessness-code-of-guidance-for-local-authorities/overview-of-the-homelessness-legislation

and Principle 5 (an active engagement approach is used) for two of the Pilots; with one rating High for Principle 6 (the service is based on people's strengths, goals and aspirations); and one for Principle 7 (a harm reduction approach is used).

From the fidelity assessment, key areas to be monitored include the ratio of staff to service users, which can be affected where staff cannot be recruited at the same pace as Pilot caseload grows, and the ability to offer choice of quality homes, which can be affected by the availability of affordable housing.

The fidelity assessment process also provided reflections on the key learning and challenges in developing and delivering Housing First at scale, which are reproduced below.

1. **Housing supply and welfare support** - one of the biggest challenges for delivering Housing First at any scale is housing supply. Access to the right social homes requires changes in policy, procedure and culture for all stakeholders involved. The demand for homes of many types of households also far exceeds supply. Local Housing Allowance and Universal Credit were felt by participants to exacerbate this further, particularly in accessing the private rental market. Success at obtaining housing for Housing First is the result of focussed and localised influencing; consistently restricted by wider structural issues of housing supply and affordability.

2. **Relationships with, and commitment from, stakeholders** - Housing First challenges the status quo and requires the influencing and coordination of numerous systems to work differently. Successful provision at scale therefore requires others to understand and buy into the intention of Housing First, and to be willing to then work differently. The learning from these pilots so far demonstrates how much time is required to achieve this but also how existing relationships are beneficial. Delivering Housing First properly in England, at any scale, requires systemic and culture change and this takes considerable time.

3. **Understanding of the principles** - commitment to the approach and understanding the principles is necessary for those delivering the support provision. Having a consistent understanding of the nuances and ethical dilemmas of implementing the principles can be supported through training and reflective practice. The culture and buy-in of delivery organisations can impact the ability to deliver high fidelity Housing First should existing procedures conflict with the approach.

4. **Availability of the right staff** - delivering Housing First means recruiting staff that have the right attitudes, values and skills to provide creative and flexible support. Finding people that have empathy, resilience and a 'whatever it takes' attitude is difficult, especially when so many staff are needed relative to the caseload.

5. **Commissioning at scale** - learning from the mobilisation of these pilots has exposed several challenges for commissioning and accountability. Where there is multi-layered commissioning, we have heard some evidence of unfeasible expectations and pressures around service delivery. This is in addition to many areas having competing priorities to deliver other programmes such as SIB and RSI funded provision. As these pilots have also circumvented local commissioning cycles, buy-in from some local commissioners, in addition to the potential for sustaining the services locally, might be reduced.

3 Developing the Pilots and Preparing for Delivery

This chapter reviews the development of each of the Pilots and the preparation for service delivery in their areas describing key enablers and challenges. It is important to note, however, that despite commencing delivery the Pilots are continuing to develop their offer, in the spirit of the 'pilot' nature of the programme.

After reviewing the context for and histories of the Pilots, the chapter goes on to review the development of the 'key components' required for delivery, structured as follows:

- Establishing management and governance arrangements;

- Engaging stakeholders and gaining commitment;

- Staff recruitment;

- Arrangements for sourcing properties; and

- Commissioning arrangements.

3.1 Pilot context and history

Tackling homelessness, and particularly rough sleeping, is a political priority across each of the three Pilot City Regions, and the Pilots have benefited from strong mayoral support throughout. For example, in Greater Manchester there is a mayoral commitment from Andy Burnham to end the need for rough sleeping across the area by 2020 and to radically reduce all forms of homelessness by 2027.

The West Midlands Combined Authority (WMCA) has established a 'Homelessness Task Force' (HTF) which provides the partnership arrangement for tackling homelessness across the region. The HTF works preventatively to intervene before crises happen, as well as enabling people who are street homeless to progress towards recovery. The HTF was also the body that led the on producing the initial Pilot implementation plan.

In the LCRCA, the level of Combined Authority, and mayoral, commitment is also high. In 2017, LCRCA part-funded (with the former Department for Communities and Local Government) an initial assessment of the feasibility of establishing Housing First at scale across the city-region. This has since directly informed the development of the Pilot model. LCRCA was selected on the basis of its new Combined Authority status and the large existing stock of social housing in the area.

In LCRCA, the Pilot represents the first time Housing First has been delivered in the area. In the other two regions, the Pilots have been able to draw upon previous experience of delivering Housing First locally, albeit on a small scale. Stakeholders in both GMCA[22] and WMCA reported that levels of interest in Housing First were

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[22] Two of the previous Housing First providers in Greater Manchester are currently involved in the consortium delivering the Pilot.

high, on the basis of the strength of the international evidence on its effectiveness, and previous experience of its delivery locally.

3.1.1 Developing the implementation plans

Each Pilot area was required to produce an initial implementation plan, which would form the basis of individual Memoranda of Understanding (MoU) between the Pilots and MHCLG. The format of these initial plans varied, but each included an initial estimate of the demand for Housing First services in their areas and plans for delivery models, eligibility criteria and potential referral routes.

Common areas for discussion in the early stages of Pilot development included:

- Establishing the distinction between Housing First and 'housing led' approaches;

- Developing shared understandings on the principles of Housing First and the importance of maintaining fidelity to them; and

- Developing outline eligibility criteria to ensure the intervention is targeted appropriately.

From the outset, some Pilots also considered how Housing First might also be used in a preventative capacity. This was particularly the case in Greater Manchester, where early contributions from the lived experience group included considering how the target group could be extended to include young people and female street sex workers.

In LCRCA, the initial feasibility study informed the development of the Pilot implementation plan, including a model for delivery drawing on the experiences of sector stakeholders and individuals with lived experience of homelessness. The plan also emphasised the importance of setting the Pilot within a wider context of service transformation and "systems change" within the homelessness sector if effective delivery is to result. The other two Pilots were able to draw upon previous experience in delivering small scale Housing First programmes, to influence their initial implementation plans.

In each Pilot, the planning process was led by the Combined Authority, with steering and associated sub-groups developed to lead the process, with contributions from Local Authority staff and representatives from the homelessness sector. The time-scale to develop subsequent versions of the implementation plan was considered to be a constraining factor in some cases. Further, in some areas it limited the opportunity to engage directly and in-depth with all potential partners and stakeholders. This also meant that the Pilots had much work to do to ensure commitment at both the strategic and operational levels prior to the start of delivery, as described at section 3.3.

This said, stakeholder interviewees involved in the development process reported generally high levels of commitment to the Pilot at the senior strategic level, with few objections to the Pilots voiced. However, as described in sections 3.3 and 4.4, commitment at the strategic level was not always reflected at the operational level. Where resistance to the Pilot was experienced at the outset, and to a varying degree on the road to implementation, the issues raised included concerns over shortages of suitable/affordable housing, the implications for existing local services, a perceived

implied criticism of existing service quality, and 'cultural resistance' to the "systems change" aspects of the Pilots.

3.1.2 Forecasting demand

As part of preparing their initial plans, each Pilot produced forecasts of the likely numbers of individuals who could potentially benefit from the Housing First service within their areas.

Each Pilot drew upon existing local intelligence to estimate potential demand for their services. In LCRCA, data from the feasibility study was used, which itself drew upon the Mainstay system which holds data on homeless assessments, interventions, and characteristics for individuals presenting as homeless across the region. In the West Midlands each of the seven local authority areas undertook a scoping exercise to assess the likely demand for Housing First services. The approach to assessment varied, with some areas using the New Directions Team (NDT) assessment tool[23], whilst other smaller areas relied primarily on local intelligence. In Greater Manchester, each local authority also produced assessments of demand, some using the NDT to do so, whilst others approximated numbers based on local intelligence (e.g. the Council's Housing Options or other local data sources).

In each case the Pilots were reluctant to specify expected recruitment on a period basis early in the development of their services, in part as details of the funding available to them were uncertain and until more detailed referral and delivery arrangements were established. Nevertheless, each produced initial estimates of expected demand[24] although these have all subsequently been revised.

3.2   Establishing governance arrangements

Each of the areas had established governance arrangements for their Pilots, which reflected the strategic arrangements for tackling homelessness in their areas. The governance arrangements in each Pilot area are summarised below.

3.2.1   Governance arrangements – Greater Manchester Housing First (GMHF)

The GMHF programme is overseen by a Steering Group consisting of the GMCA Pilot Lead, plus officer-level representatives of all ten local authorities (with another GMCA representative, and a representative of the Health and Social Care Partnership, sometimes attending as observers). A Working Group, comprising the GMCA Pilot Lead and representatives of each of the four geographic zones (Salford, Manchester, Oldham and Bolton) was formed as part of the development of the programme, and has been superceded by the governance arrangements shown below. The Coproduction Group has largely worked in parallel with these groups, with one or more delegates attending as required. The relationship between these

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[23] The New Directions Team assessment (NDT, also known as the Chaos Index) is a widely used assessment tool which focusses on the behaviours of an individual, their use of services and levels of risk taking. The tool produces a numerical score for the vulnerability of the individual, to enable targeting of services and resources.

[24] For example, in GMCA demand was estimated as between 650 and 700 people

and wider governance arrangements within Greater Manchester are indicated in Figure 3.1.

Figure 3.1   GMCA Pilot governance structure
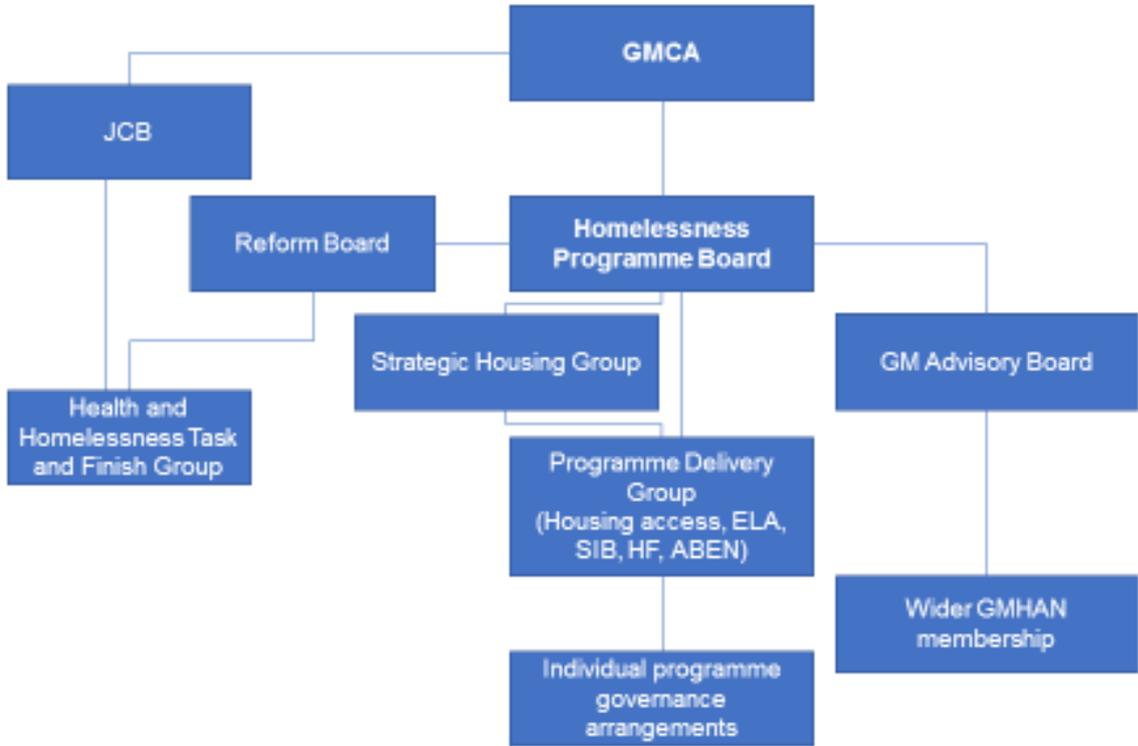
Operational governance is provided via a Housing First Steering Board, which aims '*to provide effective leadership to the Partnership that will enable the delivery of the vision and outcomes of GMHF*'[25]. Chaired by a senior representative of Great Places Housing Group (the lead contractor for the Pilot), the Steering Board includes representatives of the partner organisations, each of whom is a thematic lead for a specialist area on the basis of their expertise (e.g. partnerships, coproduction, fidelity, accommodation, SIB alignment, health).

Underpinning this are two further governance groups namely the Zone Leader Group (ZLG) and Operational Team Leader Group (OTLG). The ZLG aims '*to provide effective leadership for the delivery of the service in their allocated zones and contribute to the strategic development of the pilot across GM*'[26], and comprises the Programme Lead, Project Manager, and the four zone Leaders representing partner organisations. The OTLG aims '*to provide operational management of the service, ensuring a high fidelity Housing First service is delivered and contractual compliance within their zones*'[27]. It consists of the Programme Lead, Programme Manager, and four Team Leaders representing each geographic zone (and relevant partner organisation). All three governance groups meet on a monthly basis. Contract management and quality assurance frameworks have been put in place and are

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[25] GM Housing First: Steering Board Terms of Reference
[26] GM Housing First: Zone Leader Group Terms of Reference
[27] GM Housing First Operational Team Leader Group Terms of Reference

being monitored through monthly zone progress meetings between the central team and the lead delivery partners.

3.2.2 Governance arrangements – LCRCA

Oversight and scrutiny of the LCRCA Pilot are provided by the Combined Authority's Housing and Spatial Planning Advisory Group (HSPAG), to whom the Housing First Project Group (comprising Pilot lead staff) and the Housing First Steering Group are strategically accountable. The governance arrangements for the Pilot are shown as Figure 3.2.

Figure 3.2   LCRCA Pilot governance structure

The Housing First Steering Group was established in December 2018, and features representation from the LCRCA, each of the six local authorities, local housing associations, the lived experience group, Merseycare NHS Foundation Trust, Merseyside Community Rehabilitation Company, DWP, Police, MHCLG, the Combined Authority lead on Public Health, and the Housing First Europe Hub. Meeting every six weeks and chaired by the Head of Strategic Planning at LCRCA, the steering group provides oversight, guidance and direction to support Pilot implementation. In addition, an internal Housing First project board provides oversight of delivery within the Combined Authority, meeting monthly with representatives of relevant Combined Authority commands to ensure all are informed of progress and can most effectively support delivery.

A series of working groups have also been established to support the development of the Pilot. These include a Housing Associations working group, which meets monthly and features membership from the large Associations across the region. The working group focuses on property supply to the Pilot and has analysed property availability to support delivery. Members considered the group had been useful in setting common understandings of Housing First as a concept, and so furthering commitment to its successful implementation. This was reflected in practice by the agreement in principle by group members to provide properties for the test and learn pilot.

An additional working group, the Housing First Commissioning Consultation Group, had also been established, attended by the local authority commissioning representatives and focussing on both Housing First and associated service commissioning. Finally, the Pilot has a lived experience group, representatives of which also attend steering group meetings.

3.2.3 Governance arrangements – West Midlands

Birmingham City Council (BCC) is the lead authority for the WMCA Housing First Pilot, with a Partnership Agreement in place between the Pilot and each of the six other constituent authorities. Oversight and scrutiny are provided by the WMCA Homelessness Taskforce, to which the Housing First Steering Group is strategically accountable, summarised as Figure 3.3.

Figure 3.3   WMCA Pilot governance structure

The Housing First Steering Group features representation from each of the seven local authorities, as well as key partners including the WMCA Homelessness Taskforce, Social Housing, Mental Health, MHCLG, DWP, Birmingham Voluntary Service Council (BVSC), and homelessness sector experts St Basil's and Crisis. Since his appointment in Summer 2019 the embedded researcher from the Housing First evaluation team[28] has also been a member of the group. Interviewees report that the Steering Group is well attended, and functions as an '*open and honest space*' that is '*focused on finding solutions to problems*'.

An operational group has also been established to provide a forum for generating collective responses to implementation problems and issues, share mutual learning, and exchange good practice. The group will also feed up to the Housing First Steering Group, and so influence the strategic agenda. The operational group is chaired by the Strategic Partnership and Delivery Manager for Housing First, based at BVSC. BVSC were commissioned by Birmingham City Council to oversee operational implementation across the seven West Midlands local authorities, with a focus on ensuring fidelity to the Housing First principles and parity of approach.

3.3   Engaging stakeholders and gaining commitment

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[28] Each Pilot has been allocated an embedded researcher, employed by ICF but working at each Pilot site to collect baseline and follow-up data from service users to inform the quantitative outcomes assessment, and support a programme of qualitative fieldwork with service users.

As described previously, each of the Pilots has benefited from the active support and commitment of their Mayors, and other senior strategic staff in partner organisations, from the outset. While this may have also attracted attendant pressures to deliver against Combined Authority-wide priorities, support from and the influence of senior strategic staff was widely considered key in driving the Pilots forward and into delivery. This included providing the necessary influence to help overcome the external and internal barriers faced on the road to delivery. Progress was more effectively facilitated in areas where the political support and senior commitment was reflected at the front-line. Furthermore, the Combined Authorities, as relatively new bodies without any statutory responsibilities for homelessness, were in some areas still finding their feet and developing the necessary infrastructure to commission and manage large-scale service delivery.

In one Pilot area, and reflecting the experiences in the other two, a stakeholder engagement strategy was developed. This began by engaging the homelessness portfolio holder in each local authority, and through them reaching out to their operational teams and local providers through a series of meetings and events. However, resistance had been experienced in some authorities, largely due to the perceived implication that existing services 'were not good enough' coupled with concerns over their continued funding. Changes in stakeholder staff had impacted on the process. The Pilot was continuing its efforts to engage local authority stakeholders at all levels, although there were reasons for optimism given the local response to early service delivery. The ability to demonstrate the impact of the service early, and to communicate it to stakeholders, was also considered key in helping extend engagement.

Across the Pilots a range of strategies had been employed, and structures established, to engage stakeholders in both the development and delivery of the services. A combination of group events, workshops, presentations and individual meetings were employed to raise initial awareness of the Pilots, develop common understandings of Housing First and the principles which underpin it, and start to establish commitment both strategically and operationally. Key stakeholders (for example the local authorities, housing providers, etc) have also been recruited to Pilot steering and/or working groups, where they can have a role in Pilot governance as well as contributing to service development. Despite the strong political and senior-level support in the majority of the areas, each Pilot has had to invest considerable effort in raising both awareness and commitment at the operational level. In some cases, this also involved countering concerns raised about the Pilots and overcoming political differences that had hindered commitment.

Across the Pilots, interviewees emphasised that 'active listening to' and engagement with concerns expressed by stakeholders in each Pilot during the design and/or mobilisation phases had fostered the creative co-construction of 'bottom-up' solutions and facilitated the process of consensus development re eligibility and referral. The values of pragmatism, personal communication, and importance of relationships between service providers, stakeholders and the commissioning body were repeatedly emphasised.

Perhaps the key finding with regard to the effective engagement of stakeholders is that the process takes time and cannot be rushed if strong and active commitment at all levels is to result. Sufficient time should be allocated for this and should be included in future programmes featuring this scale of coverage and the requirement to engage with multiple local authority and provider stakeholders. The time required

will be dependent on a range of factors, but should be fully considered at the outset in planning a Housing First service.

3.4   Staff recruitment

Each of the Pilots employed a different approach with regard to formulating the job specifications of staff involved in service delivery. In Greater Manchester, a standardised job specification was developed for equivalent roles across all (multiple) partners. In LCRCA, input from the lived experience group clarified that a lack of formal qualifications would not be considered a barrier to recruitment. In the West Midlands, elements developed centrally by BVSC and the partners' own existing job specifications and understandings of what the role should entail were brought together to devise job specifications for the Pilot.

The staff recruitment process also varied between and within Pilots and was typically determined at the level of individual delivery partners. The majority of assessment panels included representatives of the Pilots' lived experience groups. Their input was universally considered to have added value, particularly in terms of gauging whether applicants were people that clients would feel 'able to work with'. However, some lived experience group representatives noted that provider organisations' degree of readiness to accommodate this level of lived experience input in staff recruitment varied.

Two of the Pilots (GMCA and LCRCA) integrated exercises to assess the alignment of applicants' values with Housing First principles. In LCRCA the shortlisting process for the internal support teams included 'speed dating' style interviews with members of the lived experience group, to enable an assessment of the desired attributes and to filter out applicants where these were absent. There was a strong consensus that these values-based exercises were valuable, but one stakeholder interviewee in Greater Manchester cautioned that such exercises may 'knock out too many applicants too early'. They explained that most people experience something of a 'journey' in their understanding of Housing First, noting that they themselves had 'taken a while to think differently'.

The Pilots (and where relevant their providers) had, however, encountered difficulties in recruiting the requisite number of staff. Some providers also reported having to re-advertise posts, given a perceived disconnect between many applicants' values and those deemed critical for effective Housing First delivery. High levels of competition amongst providers for staff with the right skill-set and attitudes was said to have been exacerbated by the multiple rough sleeping and other initiatives operating concurrently. Further to this, whilst support worker salaries were higher than the average for similar roles in one Pilot area, the issue of low salary was flagged as a potential barrier to recruitment in another. Concerns were also expressed in some areas regarding the potential 'knock-on' effect of Pilot recruitment on the availability of quality staff for the sector more generally.

Some interviewees suggested that the staffing capacity issue might be mitigated to at least some extent going forward if the 'net' was cast more widely, by advertising in sectors outside those typically targeted (to include Community Development, for example). This would be with a view to recruiting people with the 'right (asset-based) values' and then 'teaching them about homelessness and housing'. This, they noted, may provide a viable (and possibly preferable) alternative to attempting to reorient

the attitudes of people who are already familiar with homelessness/housing but committed to traditional resettlement approaches.

The induction and training of staff is coordinated centrally within each of the three Pilots. Full details of the training matrix were still under development for each at the point of fieldwork, but those Pilots that were further ahead in development had delivered (or planning to deliver) training on subjects such as: Housing First principles; reflective practice, Psychologically Informed Environments (PIE), asset/strengths-based approaches, conflict resolution, self-harm and suicide, and wellbeing and resilience, amongst others. Training was being delivered by a mix of Combined Authority, Pilot provider and partner organisations, lived experience group representatives, and external stakeholders including but not limited to Homeless Link (on principles and fidelity).

The support workers recruited by the point of fieldwork had come from a variety of backgrounds, including housing, criminal justice and substance misuse fields. A number had experience of working in existing Housing First projects. The extent to which Peer Mentors / Support Workers were integrated into staff teams varied significantly. They were included in teams within some WMCA authorities (Walsall and Birmingham, with plans also in place for their inclusion in Coventry), and a (volunteer) peer mentor scheme will be developed and integrated in Greater Manchester going forward, to be co-produced with GMHF providers with input from the lived experience group.

None of the Pilots had a full complement of frontline support workers at the point of fieldwork; all had further rounds of recruitment planned as delivery scaled up. A desire to further standardise, and potentially co-produce, the approach to recruitment and the contribution of people with lived experience going forward was reported in Greater Manchester.

3.5   Developing eligibility and referral criteria

The eligibility criteria for each of the Pilots[29] are described in different ways, but all target long-term homeless people with multiple and complex needs. That said, whilst the GMCA Pilot plans to target the 'traditional' Housing First client group (i.e. individuals who are homeless with multiple and complex needs, which most commonly relate to co-occurring mental health issues and alcohol and/or drug misuse) in initial stages of delivery, it also expressed an intention to consider how the model might be used for other groups going forward. This includes, for example, vulnerable young people who may not have a history of rough sleeping, survivors of domestic violence and abuse, and female street sex workers. In a similar vein, the criteria employed in WMCA makes clear that priority should be given to those with the most complex needs, but also makes reference to the availability of Housing First as a preventative measure 'for those people with a clear trajectory onto the streets, and without other solutions available'.

Each Pilot has established a set of shared eligibility criteria across all constituent authorities. In WMCA this includes at least two of the following in addition to being homeless: being a long-term rough sleeper, being affected by poor (self-reported)

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[29] The eligibility criteria applied at the time of the most recent fieldwork are summarised for each Pilot at Annex II

mental and/or physical health; having a history of offending; experience of domestic abuse or substance misuse; or being serially excluded from homelessness services. Eligibility criteria for the LCRCA test and learn pilot (to be viewed 'in the round') includes a history of homelessness or unstable housing, repeated substance misuse, enduring mental and/or physical health issues, profound learning difficulties, and repeat offending. Priority is given to rough sleepers and those at imminent risk of homelessness. For the GMCA Pilot, an individual has 'to fit the definition of being a person facing multiple need and exclusion and be someone who could not be accommodated through an existing pathway'.

Common eligibility assessment and referral forms, used by all constituent authorities, have been developed by both the GMCA and WMCA Pilots. Both make use of the New Directions Team (NDT) assessment tool but do so in different ways. In WMCA those assessing eligibility are encouraged to refer to the tool to facilitate decision making, but the agreed eligibility and demand criteria guidance states that the professional judgement of staff working with the person should be key in determining whether Housing First is appropriate. The GMCA Pilot uses (a modified version of) the NDT in a more formalised way to facilitate discussions and promote consistency in assessment of eligibility across the programme. At present, a lower score threshold (38 out of possible 60) is employed, but the associated guidance emphasises that this should not be used as the sole means of making decisions. The threshold will also be reviewed going forward given concern that some groups (e.g. women or individuals not known to services) may be (unintentionally) overlooked.

Referral pathways vary between and within Pilots. In Greater Manchester, the referral process is determined at the local authority level in conjunction with delivery partners. The intention is that each local authority set up a referral assessment panel (seven of which were operational at the point of fieldwork), with some 'piggy-backing' on existing fora (e.g. Task and Target groups). The capacity to recruit each month is assessed at the zone level, and priority accorded to each case determined at that point.

One of the first tasks of the WMCA Pilot Operational Group was to develop a common referral form to ensure that each area collects the same information on potential clients, although referral routes vary substantially between individual local authorities. In Birmingham, for example, referrals can be made by multiple providers via a variety of routes. In Dudley, referrals currently come through the local authority Homelessness Team (the latter of whom know all the named candidates), and a team member decides who is eligible. In Walsall, referrals largely come through the street outreach team.

For the LCRCA test and learn pilot, potential participants were identified through the use of their Mainstay records, with individuals identified in the feasibility study and remaining homeless being prioritised and further cases added in discussions with each local authority. A total of 107 individuals were identified, almost half of which were from the Liverpool and Wirral authorities. Contact is then made with potential recruits, through their existing support worker, to establish whether they want to be considered for the pilot. If they are, information about them and their accommodation preferences is compiled for presentation at a weekly eligibility panel meeting comprising Housing First staff and relevant local authority representatives. After full rollout it is anticipated that the Pilot support workers will identify their own cases directly.

The process of obtaining shared understanding across local authorities regarding eligibility criteria and agreeing referral processes were widely acknowledged as some of the main challenges reported to date by the Pilots. Stakeholder interviewees commonly emphasised the scale of this task and cautioned that any other city region attempting it should not under-estimate how long the process takes. High levels of political will, garnered by mayoral commitment, was nevertheless regarded as very helpful by lending impetus and engendering buy-in.

3.6   Arrangements for sourcing properties

Fundamental to the success of any Housing First service is the ability to secure properties in sufficient numbers, of sufficient quality and cost, in the required configuration (especially re. single bed properties) and sufficiently spatially distributed to allow choice for service users.

Each of the three Pilot areas have different mixes of housing stock both across and within them. The LCRCA, for example, benefits from a high share of social housing, whereas in GMCA the picture is more varied across the authorities (overall a 60:40 social:private split is expected), with efforts to engage the Private Rented Sector (PRS) from the outset being required. The picture varies across the WMCA authorities, where, for example Coventry has no authority-owned housing and limited social housing stock, while in Birmingham the local authority has pledged to provide 50% of the total number of properties required by Housing First. While current demand is being met through social housing, PRS landlords are expected to play a bigger role going forward. In some areas rental costs are high, for example in central Manchester where the issue is especially acute, which will restrict the properties that can be used.

Given the importance of securing accommodation, each Pilot prioritised efforts to secure accommodation, for early implementation stages at least, as part of their preparatory activities.

In GMCA, at the time of fieldwork, the Pilot had secured 155 pledges of accommodation from social housing providers and PRS landlords for year 1, distributed fairly evenly across the four zones. In some cases, the accommodation providers were also contracted to provide support, although individuals' housing and support is not linked, meaning that any tenancy failure would not affect their entitlement to support. Like other areas, GMCA has been exploring approaches to integrate the PRS offer within the Housing First service, including working to offer assurances regarding the intensity, flexibility and longevity of support provided to tenants, and bonds, to potential PRS landlords; linking and developing relationships with GM's Ethical Lettings Agency (which has led to 16 properties being pledged); and early discussions with social financers and the Combined Authority's own investment fund to acquire properties suitable for Housing First tenancies.

In LCRCA, attentions initially focussed on securing commitment to the Pilot from the area's housing associations, to help ensure a sufficient supply of properties for the test and learn stage (and looking forward to the full service delivery). A Local Lettings Agency (LLA) is also proposed, to provide a supply of properties and including the involvement of PRS landlords.

Local Lettings Agency

Local lettings agencies (LLAs) are a form of PRS access scheme, although the term has been applied specifically to schemes operating on a commercial basis. LLA models vary depending on the nature of existing services, housing markets and client types, with common features including:

- Offering a competitive package to landlords, normally at a fee below mainstream lettings agents.

- Operate on a not for profit basis, and run by charities, housing associations or local authorities.

- Specifically targeting clients not normally able to use 'mainstream' lettings agencies, e.g. clients in receipt of housing benefit.

- Providing person-focused services, often linked to other services or support, either through the host or a partner agency.

- Develop and maintain good working relationships with, and provide support to, landlords.

- Not relying on grant funding as the income generated offsets the costs of delivery.

See https://www.yhne.org.uk/wp-content/uploads/Local_Lettings_Agency_Guide.pdf

An options appraisal has been commissioned to specify the LLA, which will extend beyond the Pilot to support other groups with housing needs across the region. The LCRCA Pilot took a range of steps to secure commitment from the housing associations in the region, including: establishing a Housing First Housing Associations Working Group (meeting monthly and featuring representation from the largest housing associations in the region); holding a series of workshops and individual meetings with housing association staff to introduce Housing First and establish common understandings; developing service level agreements for housing associations providing properties; drafting a Housing First Commitment Charter; and producing a delivery manual for front-line staff in housing associations which sets out the test and learn model and details of the Housing First approach. At the time of fieldwork, the Pilot had secured the commitment from the 15 largest housing associations to supply properties for the test and learn stage. In addition, a forum for PRS landlords was established to explore options for engagement, and while issues were identified the Pilot staff are confident that the PRS will engage and contribute properties.

In the WMCA a regional event, organised by the Homelessness Task Force, was held early in the Pilot development stage for social and private sector landlords to introduce Housing First, establish common understandings and engender commitment to providing properties. The HTF continued to play an important role at the strategic level in encouraging the engagement and commitment of housing providers in the region through the delivery of a second later event to further promote Housing First. Responsibility for sourcing properties sits with the providers commissioned to deliver Housing First services, and developments varied across the local authority areas. In Birmingham, which is the largest area and expected to account for the majority of Pilot clients, the City Council has made a commitment to house half of the housing stock needed by Pilot clients in the city. A Property Acquisition Manager was in the process of being recruited at the time of fieldwork, who will work with social and PRS landlords to try and ensure a sufficient supply of

housing. The area has also allocated resources for a 'crisis fund' to cover rent bonds and to pay for any damage done to properties by their Housing First tenants. Elsewhere in the region a combination of social landlords and the PRS will be drawn upon on the basis of existing stocks – in Coventry for example the council does not have its own housing stock, so will rely on Registered Social Landlords (RSLs) and the PRS, and they have also allocated funding for a specialist housing officer post.

3.6.1   Concerns and challenges

Despite the progress made in securing commitments to provide properties across the Pilots, ensuring a sufficient supply of properties as delivery scales up remains the main concern in each of the Pilot areas. Common concerns across the Pilots included:

- Whether **sufficient properties, of the required quality and at an affordable cost,** could be secured for Pilot participants. This was reported to particularly be the case with single bedroom properties, given competition for such properties and the influence of the spare room subsidy (providing further competition as individuals move from larger properties). Competition for single bedroom properties was seen to have been further exacerbated by other recent government homelessness initiatives, and as a result of the priority accorded to housing other vulnerable groups such as care leavers. Cost pressures could also vary widely between individual local authorities within a Pilot area.

- Following from the above, whether the available housing supply would be sufficient to offer service users **choice** over where, and the type of property, they took up – with support workers expected to play a key role in managing expectations of what accommodation options were realistic. In the LCRCA, for example, support workers have been visiting areas in which service users expressed a preference to check the availability of local services and have a look round. This resulted from early requests being based on memories of an area from some point in the past, and the joint visits allowed individuals to review their choice based on an up to date assessment of the area.

- **Approaches taken by stakeholders** - where a degree of risk aversion had made securing firm commitments to supply difficult in some areas, and concerns were expressed over the costs of voids on properties allocated for Housing First use, there was a perception among some **Housing Association** staff of 'queue jumping', and in one area that Housing First staff would be undertaking initial tenancy interviews (being perceived as a loss of control by some). In addition, a reluctance was also reported amongst some **PRS** landlords to offer properties to clients in the Housing First target group.

- **Meeting needs and offering choice** – it was recognised across all three regions that identifying properties that meet specific service users' needs, and allowed choice, might cause delays in the housing process. Pragmatically, each Pilot described that alternative solutions (such as using temporary accommodation in the first instance) would need to be considered where delays were experienced.

3.7   Commissioning arrangements

At the time of fieldwork the WMCA and GMCA Pilots had commissioned full Housing First services across their areas. In GMCA commissioning took place centrally across the four zones of the area, while in WMCA commissioning took place at the individual local authority level, with five of the seven WMCA local authorities commissioning externally and two following internally delivered approaches.

In the LCRCA, a 'best practice' informed approach to commissioning the full Housing First service is planned, although some small commissioning had been completed (for the Pilot's psychologists) at the time of fieldwork. The Pilot is working with the Housing First Europe Hub to develop their commissioning model, which will inform future commissioning guidance at the European level, and more widely offers the opportunity contribute to raising the standard of commissioning, and so improving outcomes, across the homelessness and associated sectors.

3.7.1   West Midlands Combined Authority

In WMCA the decision was taken early in the development of the Pilot for each of the seven local authorities in the region to commission their services individually, but with a commitment to work collaboratively to establish a common and coherent approach which will help ensure fidelity with the Housing First principles. To facilitate this, Birmingham City Council commissioned the Birmingham Voluntary Service Council (BVSC) to support the development of a common tendering process, including a service specification and a template job description for support workers.

Following a series of briefing and early training on the Housing First principles provided by Homeless Link, it was agreed that a common support model would be followed, with small caseloads (five to seven individuals per support worker) to offer support and brokering access to other services. This commitment to a shared approach was formalised through a Partnership Agreement, which was reflected in the tender documents produced by each local authority.

As each local authority was at a different stage of readiness to commission, a staggered approach was followed. Following a market engagement day in Autumn 2018, Birmingham, Walsall and Solihull issued invitations to tender, with bid assessments taking place in January 2019. Provider interest was greatest for the Birmingham tender, given the scales of the existing provider base and of the potential client base, with the contract for the full Housing First service being awarded in April 2019 to the homeless charity Shelter. The housing association Fry Accord (who also delivered the early adopter) were commissioned in Walsall in January 2019 and subsequently in Solihull and Sandwell. Brighter Futures were commissioned to deliver in Coventry. The remaining two local authorities, Wolverhampton and Dudley, decided to deliver their Housing First service in-house, in one case reflecting a preference for this approach and in the other based on the small scale of the expected eligible population and the strengths of their existing team of support staff. In both cases the authorities expected that an internal delivery model would improve the speed of access to local authority owned properties.

Interviewees felt that the ability to commission multiple providers and test out different models and approaches represents a strength of the WMCA Pilot, enabling risk to be spread so that '*if one area fails it will be easier to tackle and put straight than if there was a whole project failure*'. Commissioners and Steering Group representatives reported that, where services had been out-sourced they were pleased with the quality of the providers, feeling that they had commissioned those

who had submitted the most robust bid in each local authority. Although the stakeholders interviewed did not refer to any weaknesses of the approach, future fieldwork will explore the extent to which any issues are experienced, such as inconsistencies in delivery and variations in practice which may risk fidelity with the Housing First principles.

In addition to the commissioning process followed for the full Housing First service, BVSC commissioned an 'early adopter' service to operate in Birmingham from January 2019. Delivered by Shelter, the early adopter built upon a previous service for individuals homeless and with complex needs, which included several features of the nascent Housing First service and worked with 25 clients. Close working between Shelter and BVSC enabled learning to inform the development of the full Housing First service, as well as establishing referral and assessment processes and working with DWP to enable flexibility in benefit payments. In addition, Fry Accord had also delivered a small-scale Housing First project in Walsall, which provided learning to inform full service delivery.

3.7.2   Greater Manchester Combined Authority

In GMCA a service specification was designed as an initial task for the Steering Group. This included inputs from the working group and Co-production group, the latter of which emphasised the importance of establishing relationships with clients, and the value of peer support, as part of the service.

This was followed by a market event, involving presentations from GMCA and Homeless Link, which provided detail of the Housing First approach and built expectations around the single consortium model proposed. This was seen by several stakeholders to have helped the process of partnership development.

Following the issue of the service specification five bids were received, which were assessed by a panel. The assessment panel included individuals with lived experience from the Coproduction Group who assessed the two sections of the bids (relating to the two issues they had highlighted, as noted above), which together accounted for 20% of the overall score.

After a delay in announcing the successful provider due to bureaucratic processes, the contracts were awarded to a consortium led by the Great Places Housing Group in April 2019.

3.7.3   Liverpool City Region Combined Authority (LCRCA)

As described above, the LCRCA Pilot was yet to commission their full Housing First service and were developing an approach which builds upon best practice in service commissioning from across the UK and EU. This approach, once developed, is also intended to influence commissioning within the region, and so contribute to system change by improving commissioning standards within the homelessness and associated sectors.

At the time of fieldwork, the intention was to commission the full service in lots as part of a single commissioning process, with the existing support teams being transferred across. The Combined Authority will lead the commissioning process, with the relevant local authorities being represented on the assessment panels. A commissioning framework was being developed, with a market engagement event

planned and invitations to tender being planned for distribution in mid-September 2019, with a view to the successful provider being in place in mid-December[30]. The tender review process will include contributions from the lived experience team, and the final decision to appoint being signed off at Combined Authority Board level.

The commissioning process is intended to follow a 'Human Learning System' approach[31], which will also be applied to delivery monitoring post award. This approach requires close working on an ongoing basis with providers, in an environment of openness and collaboration, and with frequent discussions to identify any problems and working jointly to find solutions. As this approach will be new to many providers, the Pilot saw their role including educating and upskilling both providers and local authorities on the approach ahead of their involvement in full service commissioning.

While full service commissioning was scheduled to complete in December 2019, the Pilot has been involved in two commissioning exercises. The first was for the psychological services from Aintree hospital; and the second, through the Commissioning Group, a joint commissioning exercise for an Assertive Outreach service, serving the Pilot and wider local provision and funded through Homelessness Prevention Trailblazer Devolution funding. The process followed to commission the psychologists included some of the features of the intended full service model, including a contribution of the lived experience group to the specification design and the appraisal of the resulting bids.

3.7.4   Concerns and challenges

One issue raised across all three Pilot areas related to the availability of a suitably experienced provider base with the capacity (and value base) to deliver the Housing First service at scale. There were also concerns related to the number of suitable support workers available in each area to fill posts (as explored in Section 3.4).

At the time of fieldwork GMCA and WMCA had commissioned services, with concerns over the capacity of the local provider base leading at least one local authority to deliver their full Housing First provision in-house. In GMCA the lead provider described expecting to commission additional services from other (likely to be smaller) local providers as delivery scales up. It remains to be seen whether each area can meet the demand for support workers, and so allow the necessary level of support Housing First services demand.

3.8   Lived experience contribution to Pilot development and preparation

As described in Chapter 2, all three of the Pilots were able to draw upon a lived experience resource during their development and preparation for delivery stages, which will continue to be consulted and engaged throughout the implementation

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[30] Since the time of the fieldwork we understand that the commissioning process has been rescheduled to July 2020, to fully utilise the Human Learning Systems approach.
[31] The Human Learning Systems approach recognises that outcomes are produced by whole systems rather than individuals, organisations or programmes, and that to improve outcomes 'healthy systems' must be created where services are able to co-ordinate and collaborate more effectively. See also http://wordpress.collaboratei.com/wp-content/uploads/Exploring-the-New-World-Report_MAIN.pdf

stage. All three had contributed to the development of their Pilots across a range of areas, as summarised below. In all three Pilots the lived experience contribution was expected to continue as service delivery scales up, including playing a role in the monitoring of service delivery.

3.8.1 Contribution to developing the Pilot approach

All three Pilots benefited from accessing existing lived experience groups from the outset of the programme, enabling them to help to inform the design of the Housing First programmes from the outset. This was realised in several ways:

- In GMCA, the Coproduction Group initially focused on identifying the extent to which service providers' implementation of the key principles of Housing First (or otherwise) had affected their own experiences and wellbeing. These discussions led to the production of a paper titled 'The Housing First principles: a continuous improvement framework', which considered the factors which might enable the operationalisation of the Housing First principles, and how the extent to which providers adhere to them might be assessed, which was presented to the Steering Group.

  The Coproduction Group were also responsible, in part, for the extension of the Pilot target group to include young people and female street sex workers, and to consider how Housing First could be used in a preventative capacity. Looking forward, the Co-production Group will take a central role in the development of a volunteer peer mentor programme.

- In LCRCA the lived experience group were consulted on an ongoing basis throughout the Pilot development process, with some members of the group having previously contributed to the initial Housing First feasibility study and subsequently a review of the local register of social and affordable homes.

  The group described how their views had been sought on topics such as potential eligibility criteria, how to introduce the service to potential participants, and which aspects of the service would ensure sustained participation and the achievement of outcomes.

- In WMCA the Pilot draws upon a lived experience group commissioned through Mind and based in Birmingham, whose insights are available to the other authorities who are yet to establish their own groups. The group were consulted on issues related to the development of the Housing First service, although take-up of their services has been mixed across the other local authorities.

3.8.2 Contribution to staff recruitment

The lived experience groups had also contributed to staff recruitment, in LCRCA and GMCA, and across all three Pilots in recruiting the embedded researchers:

- In GMCA, representatives of the Coproduction Group attended most of the assessment panels for the recruitment of provider staff (support workers), which was seen to have added considerable value to the process. The intention is to follow a similar approach and involve individuals with lived experience in future recruitment rounds. However, in some cases the providers were less prepared for the lived experience involvement, and while it was not clear whether this related

to organisational red tape or individual attitudes the lesson was that providers may need to be prepared for such input.

- In LCRCA the lived experience group were directly involved in the recruitment of Pilot staff, including participating in interviews with the psychologists and the delivery team/support workers recruited. Their role in the recruitment of the support workers included contributing to the job specification (including specifying that formal educational qualifications were not necessary and ensuring that individuals with lived experience could be considered) and using a 'speed dating' approach to test individuals' values and attitudes. This speed-dating session was a discrete section of the selection process, devised and delivered solely by the Lived Experience Group. Around 25% of applicants were removed from the process at this stage. This was felt to be important by the Lived Experience Group as it represented a genuine transfer of power to the group.

3.8.3   Contribution to the commissioning process

In GMCA, the Coproduction Group made a substantial input to the development of the service specification, which highlighted the importance of relationships between service users and support workers and the value of peer support as part of the process, based upon their experiences as service users. Their involvement in the commissioning process also included assessing two questions in the tender documents on relationships and peer support, which the group saw as a tangible expression of the value associated with their inputs.

While the LCRCA lived experience group contributed to the appraisal and interview process for the psychologist commission, they are expected to continue to input to both the development of the full service commissioning model and the appraisal of responses received under it. In the WMCA representatives of the lived experience group were consulted about the development of the service specification.

3.8.4   Benefits for individuals

When delivered effectively, work with individuals with lived experience can offer benefits to both service development and delivery and to the individuals making the contribution. Interviews with the lived experience groups in LCRCA and GMCA, for example, found that contributors welcomed the opportunity to 'give something back' and improve services for other people experiencing homelessness. They also reported gaining new skills and experience, considered that their contributions were valued (as they saw change resulting), and feeling that they were engaged in a truly co-productive approach.

It is important to note that lived experience group representatives may need support themselves, should they experience a crisis which requires help to resolve, and that sufficient resource should be allocated to support their involvement in recognition of this.

4 Early Implementation and Progress to Date

Having reviewed the development and preparatory stages in each of the Pilot areas, this chapter explores experiences of service delivery to date. Although all three Pilots were delivering at the time of fieldwork, each was at an early, and different, stage of implementation, so the focus and detail of the experiences described varied.

4.1 Progress to date – numbers recruited and housed

The numbers of individuals recruited to the Housing First service, and the numbers housed, to the end of September 2019 in each of the three Pilot areas are provided in Table 4.1.

Table 4.1   Pilot progress – numbers recruited and housed

Pilot area	Numbers recruited to service	Total numbers housed	Up to 1 month housing duration	1 to 3 months housing duration	3-6 months housing duration	6-12 months housing duration
GMCA	89	27	11	16	--	--
LCRCA	44	9	6	3	--	--
WMCA	193	69	6	27	15	21

Source: Pilot MI to end September 2019

Each Pilot launched their services at different points, with the WMCA Pilot recruiting in January 2018 (and the first housed in the same month) under the early adopter, GMCA in April 2019 and LCRCA in July 2019.

Across all three Pilots delays to commissioning processes and the time needed to mobilise services have meant that the numbers of people referred and accepted onto programmes has been lower than originally anticipated. Concern was expressed amongst stakeholders across all three Pilots with regard to a perceived political pressure to house people and demonstrate 'quick wins'. Interviewees across the Pilots highlighted the enormous amount of time needed to develop both robust commissioning and operational processes and recruit and train staff. Added to this was the concern from the frontline that there has been insufficient recognition given to the importance and scale of the early engagement and relationship building work with clients.

4.2 Referral and recruitment

Although the three Pilots were at different stages of delivery all had experience of early engagement with individuals identified and referred through to their programmes. While in the main it was perceived that 'the right people' were being recruited into services there were some on-going problems with referral process requiring further work in terms of improving understandings of Housing First eligibility among partner agencies. In GMCA a level of concern was expressed over the quality of some of the referrals made. Here, there were occasions when referral forms had

been poorly completed making it difficult to assess eligibility. Others were described as inappropriate, for example where an individual had not expressed a desire to obtain an independent tenancy and referral agents (particularly Housing Officers) "*apparently didn't know what else to do with those cases*". In LCRCA it was reported that of the 107 people that had been referred at that point 35 were found to be either not be eligible, currently in accommodation or that their circumstances had changed, and the service was not required. Support workers in LCRCA also reported concerns amongst staff in other homelessness services making early referrals that Housing First posed a risk to their jobs, a circumstance they hoped would be resolved during the test and learn phase through further awareness raising. In both the West Midlands and Greater Manchester there were reports that in a few instances potential clients were unaware they had been referred to the programme.

Despite these issues interviewees from all three programmes broadly agreed that that those with whom they had engaged with thus far would benefit from Housing First describing a high level of complex need amongst clients to date. Where assessments were made by a panel (e.g. Manchester and Birmingham) interviewees reflected positively on these describing them as offering a valuable degree of oversight and scrutiny over referral.

Following referral, a lengthy early engagement and relationship building phase was described which interviewees across all three Pilots agreed was critical to success and should not be rushed. Frontline staff explained that this could sometimes involve up to two weeks spent in trying to locate an individual on the streets. In some cases, a level of scepticism and fear had to be overcome with individuals reluctant or unable to believe that Housing First would be different to other forms of provision.

In all three Pilots assessment of support and housing preferences are led by Navigators/Support Workers and undertaken on an informal verbal basis, with frontline staff keen to stress that they wanted to avoid the use of formalised paper-based processes so as not to build unnecessary barriers and enable trust to be established rapidly. Assessment might also involve joint meetings with workers already engaged with individuals and input from mental health or drug and alcohol practitioners. Across WMCA work was being done on a more strategic level to establish joint assessment procedures in partnership with a specialist nurse funded through RSI, and in the longer term involving a specialist mental health nurse yet to be appointed but funded through Housing First. In GMCA the Dual Diagnosis Practitioners will be involved in assessing the mental health support needs of service users as well as helping to broker in support from elsewhere within and beyond Greater Manchester Mental Health Trust (GMMHT).

4.3   Securing accommodation

As detailed in section 3.6 the availability of suitable and affordable housing represents the biggest challenge faced by all three Pilots and presents a potential threat to the principle of offering choice with regard to accommodation. Navigators and Support Workers are, however clearly committed to the principle of choice recognising that the success of a tenancy is in large part dependent on meeting individuals' housing preferences. Affording flexibility through removing the burden of conditionality was also identified as key to securing enduring engagement. Frontline workers considered that behavioural challenges in tenancies '*will continue to be an issue for this group*' but that '*the principles of Housing First mean that this is*

something that can be worked through and addressed' in a way that would be conducive to sustained accommodation outcomes. The Housing First offer was contrasted to other housing options and hostels which were described as too inflexible and therefore unsuitable for people with complex needs. The option of an open referral, whereby individuals could refuse a first referral but choose to engage at a later date, was also considered a positive.

Those interviewees who had already housed people or were in the process of sourcing properties described how they would discuss details of preferred location and housing type, while also considering a person's support networks and what activities or community groups they might want to engage with. In the West Midlands practical examples were given that included locating people in the same neighbourhood as family members, close to a gym and on particular bus routes. In Birmingham the City Council has committed to supply 50% of the total number of properties that will be required by Housing First. Interviewees reported that housing staff here demonstrated a good understanding of Housing First principles and had facilitated people to meet their preferences and needs, including making adaptations for disabled tenants, accommodating pets and sourcing low rise properties where tenants had requested this. BCC were also described as having been '*very understanding*' in cases where people had missed appointments or not shown up for viewings, demonstrating recognition that people's lives '*might be chaotic and that not showing up doesn't mean they don't want the property*'.

In a number of cases difficulties in meeting a person's housing preferences could mean that there is a considerable time lag between first engagement and moving into a property. In Walsall, for example sourcing the housing of choice was reported to be challenging for some clients given that local housing providers do not have properties in particular geographical areas. One example was given of an individual who wanted to live in a specific part of the borough to be near to his family and wider support network. With no available properties in the area the individual had been housed in temporary accommodation while they continued to wait for an appropriate property to become vacant.

Strategies that frontline staff across the Pilots considered helpful in engaging people in the pre-tenancy stage included: never making promises (given the risk that they may be broken as a result of circumstances beyond a support worker's control); never giving timescales (given the ever-present risk these may change); and emphasising the message that "It's your life – your choices".

The Pilots have developed or were in the process of developing a variety of ways to furnish and decorate properties. Across WMCA providers have access to personalisation funds and this has been used to purchase furniture and white goods. Providers have also built relationships with charities and local businesses who have supplied furniture and carpets as well as helping with decorating. In Greater Manchester, the Pilot's personalisation funds were devolved to and managed by individual providers, some of whose procurement processes were reported to have slowed up the acquisition of furnishings and white goods and restricted the pool of approved providers.

Interviewees in both WMCA and GMCA reported challenges in working with some housing officers who they commonly described as lacking knowledge and understanding of Housing First. In WMCA some Housing Association (HA) staff were described as 'inflexible and intolerant' and there were reports that a small number of

Housing First tenants had been issued with Section 21[32] notices. Strategies to safeguard against this included regular meetings with housing officers and in Birmingham an alert to the Housing First provider on the Northgate system[33]. Conversely where housing providers understand the Housing First approach and it's principles they have proved willing to be flexible and adaptive when working with Housing First tenants. For example, in Birmingham the City Council were praised for their willingness to make Housing First work, and examples were given of HAs making exceptions to their normal practices to accommodate Housing First clients – for example by offering tenancies as opposed to licenses and providing furnished accommodation.

In the West Midlands frontline workers discussed the challenge of overcoming people's fears and anxiety around tenancy failure and dealing with social isolation when moving from the streets into secured accommodation. They explained that individuals, reflecting on past tenancy failures can often express doubt over the stability that Housing First offers. Across all Pilots frontline staff noted a reluctance or inability to believe that Housing First is different to other forms of provision, albeit that this stance tends to shift as trust and rapport is developed. In WMCA workers reported that a fear of failure can persist throughout the early stages of a tenancy when individuals will commonly express anxiety that they will lose their property, in some cases leading to a return to rough sleeping or a reluctance to engage. The principle of choice was also described as alien to many highlighting the need to work at the pace of the individual without applying undue pressure:

"*Because the onus is on the person not the process…I think they can struggle with the idea that have to say yes or no. They can struggle with the idea that no one is going to take it off them…the choice issue is radically different [from other housing support]*" Community navigator

Once in accommodation social isolation is a potential problem with people missing the perceived community of the streets, particularly if they moved some distance from the city centre. Interviewees described how a number of the people they were working with have struggled with continuing to engage in periods of rough sleeping.

"*There is a big pull back to the street – the reality is that this is very challenging for people. They will also gravitate back to homelessness services*" (Service Manager)

Preventative and remedial actions include immediate community engagement work and making sure there are local resources that match any hobbies or interests individuals might have. Examples of simple measures to support people overcome isolation were given. One young person who had experienced multiple moves and hence lacked a support network had been supported to take up a voluntary role to enable him to socialise with people, while a laptop had been bought for another individual to enable him to communicate with family and watch films.

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[32] In England and Wales, a Section 21 notice is the form which a landlord must give to their tenant to begin the process of taking possession of a property let on an assured shorthold tenancy, without providing a reason for wishing to take possession.
[33] Northgate Housing is the housing management software system used by Birmingham City Council

4.4   Support delivery

In GMCA and LCRCA support workers primarily reported on the work they had been doing to support people at the pre-tenancy stage. As described above, this stage was considered critical to later success and there were concerns expressed that there has not always been given enough recognition of the time needed to engage and build relationships with potential clients. In LCRCA frontline staff in the test and learn pilot were still at the early stages of relationship building and arranging joint meetings with clients and their existing support workers. In GMCA some local authorities were aiming to conduct a three-way introductory meeting between a potential service user, referral agent and GMCA team member. This was said to work very well when achievable but attempts to set up such meetings were, in some cases reported to have caused considerable delays if any one party is difficult to contact and/or has limited availability. While these meetings were considered best practice, they would therefore be circumnavigated where necessary.

Delivering the appropriate level of support to the number of people that Housing First is expected to work with was described as a key challenge by stakeholders in the West Midlands. Here the roll out of the programme so far has demonstrated that they are working with some '*very complex people who need a significant number of support hours to ensure success of a tenancy'*. At the strategic level work was being done to embed processes to track the number of support hours being delivered with reports that for one individual a total of 90 support hours had been delivered by multiple agencies in one week alone.

On the frontline Navigators and Support Workers described an intense support phase once individuals first move into their properties. Once properties are matched activity 'can be very whirlwind' with 'a lot to do in a short amount of time'. This includes sourcing furniture for which staff in WMCA have recourse to various charities and local businesses with whom they have built relationships. There is also a personalisation fund available for purchasing items such as furniture, white goods, clothing and bus passes. Food vouchers may also be provided, and in Birmingham they had started providing home starter packs. On moving in Navigators and Support Workers help people with a variety of essential tasks including setting up utilities, council tax, updating their address with DWP for benefits, registering with a local GP and/or dentist, and accessing mental health services and new pharmacists for prescriptions:

"*It's all hands on deck…you want people to settle as quickly as possible because it's easy for them to go back to their old habits if they're going into the city centre.*" (Navigator)

After moving people in, support is provided on a case by case basis. Depending on need this can range from fortnightly home visits with telephone contact in between to daily contact, although this tends to tail off once people become more settled. Practical support differs depending on individuals' independent living skills, but can include taking people shopping, budget management, encouraging personal hygiene and developing cooking skills. Making sure that alternative arrangements for payment of rent through Universal Credit (UC) is key. Frontline staff also explained that they have applied to have UC deductions reduced where individuals' payments had been reduced to pay off previous debts. At Shelter there is also specialist support for people with hoarding disorder available both before and after they move

in. Examples of intensive support were also given, with one interviewee describing how she had spent a whole day with one individual who had taken an overdose of their pain medication, keeping them awake by various means on the advice of a doctor.

Interviewees described the need to manage a tension between providing an appropriate level of support and encouraging independence. They also felt that some individuals had unrealistic expectations around the level of support they should get, saying that they would challenge people on some requests such as collecting prescriptions. This was balanced by the understanding that there can be unrealistic expectations placed on individuals with complex needs in terms of their ability to, for example, meet council tax deadlines or navigate health care systems. For other individuals being 'careful to not overstep the boundaries' was described as important in keeping them engaged.

Peer Mentors[34] and support staff described how they work together in complementary ways. Peer Mentors clearly make a unique contribution by sharing their experiences of services and giving insights into how they have worked – or not worked - for them. There was also a recognised shared responsibility between Peer Mentors and Support Workers, especially in situations that were experienced as particularly stressful for example where individuals have been at risk of losing their property. At the time of fieldwork both Walsall and Birmingham were aiming to increase the number of Peer Mentors on their teams which they felt would enable them to match Housing First individuals to a mentor more closely.

Support workers operate an on-call system at weekends when they are available to respond to crises. They also cover for each other when away on leave, but reported that service users will not always accept the input of workers with whom they have not built a relationship.

Frontline workers were able to give a number of examples of constructive engagement with individuals who had been known to local homelessness services for many years and for whom little had erstwhile been achieved. These included housing individuals with a history of multiple failed tenancies, for example one person who had been a heavy butane user had been previously evicted and subsequently banned as a fire risk. Securing a tenancy for this person was described as a major success, especially as he had been moved into a property that he 'was 'overwhelmed by' and keeping in 'immaculate condition'. Transformations in individual's independent living skills were also described:

"*I've got one client who you used to see in the city centre with no shoes and the last time I saw her she was cooking a chicken curry*" (Navigator)

Interviewees reported a reduction in recidivism for some individuals, with the example given of one client who had previously been arrested on an almost daily basis for shoplifting (reportedly as a way to secure accommodation for the night in a cell) that had not been arrested for over two months. Some success with family reconnection was also reported, but this was described as a 'very difficult process' particularly

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[34] Peer mentoring is a form of mentorship that usually takes place between a person who has lived through a specific experience (peer mentor) and a person who is new to that experience (the peer mentee).

where individuals were being supported to have contact with children who had been taken into care. There were some success stories however, with one person having been reconnected with their young adult son who was actively supporting his parent to engage with drug and alcohol services.

4.5   Engaging specialist provision

The level of strategic buy-in across partner agencies in both WMCA and GMCA were described as 'very high'. However, this was not always reflected at delivery level where frontline staff reported on-going challenges in working with some housing providers and mental health services. Interviewees attributed this in part to a lack of understanding of Housing First and the client group highlighting the importance of relationship building and awareness raising amongst key partners. In GMCA it was noted that where agencies were better informed a lot of the 'leg-work' had been done during the tender development process. This was also reflected in the West Midlands where there had been effective work done to engage with DWP at the regional and local levels that had supported the development of processes to facilitate alternative payment arrangements. Relationships in both areas that had been established as part of the implementation of other initiatives, including, for example the RSI and the SIB were also described as reaping benefits for the implementation of Housing First. Examples include close working with specialist community-based health staff employed through RSI in the West Midlands and positive interactions with the police in GMCA.

Establishing effective working relationships with colleagues in Mental Health Trusts was a particular challenge for staff in both WMCA and GMCA. In WMCA, work is being done strategically to look at improving pathways into mental health, but at the time of fieldwork the experience at the frontline continued to be one of frustration. Here encouraging local addiction and mental health teams to work together to support individuals with dual diagnosis was described as particularly difficult as mental health services '*will refuse to work with people until they have stopped taking drugs*' and '*there are tussles at delivery level over who is responsible, mental health or substance misuse teams?*' At the time of fieldwork both BCC and Solihull had expressed the intention of commissioning additional support around dual diagnosis with provision for this built into their service offers. The BVSC based Partnership and Implementation Manager for Housing First was also intending to undertake a mapping exercise across the WMCA region to determine where gaps in provision and barriers to access in exist.

In GMCA where similar challenges were being faced, GMMHT have been contracted by the Pilot to provide two FTE Dual Diagnosis Practitioners in the first year of delivery, scaling to a peak of four later in the pilot. The inclusion of this specialist mental health provision was universally welcomed by interviewees. Many stakeholders held high hopes regarding "the difference they will make" to joint working with mental health and substance misuse services and were optimistic that their input would help to overcome widely experienced barriers encountered by the target group when attempting to access support for mental health and drug/alcohol issues. In LCRCA the intention is to appoint two psychologists who will work with both staff and service users. In common with the Dual Diagnosis Practitioners in Greater Manchester and the clinical staff to be appointed in WMCA there is the expectation that they will help negotiate access to specialist mental health services.

5   Conclusions and Recommendations

This chapter sets out the conclusions of the first interim process evaluation report, summarises key learning from the development and early implementation stages, and offers a series of recommendations for MHCLG and the Pilots.

5.1   Conclusions

Each of the three regional Pilots has taken a very different approach to the design, commissioning and delivery of Housing First. In the Liverpool City Region particular emphasis has been placed upon fostering broader "systems change". In the West Midlands Housing First services are commissioned at the level of individual local authorities, and sometimes provided in-house. In Greater Manchester a consortium will deliver Housing First across all constituent authorities under the single banner of GMHF. This diversity in approach offers substantial potential for the process evaluation to reflect on the implications for delivery and outcomes.

The Pilots have to some extent provided a shared focus for conversations within each of the three combined authorities regarding responses to homelessness at the regional level. A huge amount of time, effort and expertise has been invested by a wide range of stakeholders in the design and development of the Pilots – across statutory and voluntary sectors, and homelessness and allied sectors, including people with lived experience. Levels of political buy-in at the senior strategic levels are described as high across the Pilots, as is commitment to the importance of fidelity to the Housing First principles. This level of commitment has been a key factor facilitating Pilot operationalisation but has not always filtered down to the frontline of stakeholder (e.g. referral) agencies.

The design of each Pilot has been informed by lessons learned via the delivery of existing services for the target group locally and beyond, including existing Housing First projects and other initiatives such as the Rough Sleeper Initiative (RSI) and Social Impact Bonds (SIBs), and in the case of LCRCA a detailed feasibility study. The innovative inclusion of specialist mental health resources, in response to the common challenge of accessing mental health support for the target group, and incorporation of creative approaches to engaging with private landlords (e.g. via ethical lettings agencies), represent responses to such learning. Some of the Pilots are nevertheless having to deal with some more negative legacies of recent initiatives, such as an assumption amongst some stakeholders that Housing First may be a similarly 'short-lived' intervention.

Some very positive stories are already emerging regarding successful interactions with and outcomes for service users that have been recruited to the Pilots to date. These successes have not come without challenge, however. The acquisition of sufficient quantity of suitable properties is widely regarded as the greatest challenge and ongoing risk to scaling up Housing First. The recruitment of high quality staff with the right skills and values has proved to be another significant challenge. Whilst a number of strategies are in place to increase access to housing, further thought needs to be given to how the pool of high quality frontline delivery staff might be expanded.

At the time of fieldwork, each of the Pilots was at a very different stage in its development and/or implementation. All were however further behind where the providers and governing bodies had initially anticipated them being at this point in time, in terms of the number of service users recruited and housed. These delays resulted in large part from the substantial time required to design and delivery Housing First 'at scale' but have also in some areas led to a truncation of the mobilisation phase. A number of key lessons have been learned during these initial stages of development and delivery. Each of these is detailed below.

5.2 Key learning

This section provides the key learning points from the Pilot development and preparation and early implementation stages.

5.2.1 Learning from development and preparation

While it should be recognised that the Pilot development process is in effect still ongoing across the three Combined Authority areas, either as they prepare to commission their full services or to scale up delivery, a series of lessons from the development and preparation stages were identified. These are set out below.

- A key lesson from each of the Pilots is that the process of developing implementation plans, designing necessary tools, and establishing agreements for delivery across Combined Authorities and multiple local authority areas takes time. It is here that the difference between establishing small/single authority and region-wide delivery at scale are most acute, but also where it is important to establish a balance between commonality of approach and accounting for local contextual factors.

- In this context, a high level of 'buy in' and commitment across all partners is essential if Housing First is to be implemented effectively. Securing commitment at the highest level, i.e. mayoral and by Chief Officers and senior staff, is key, although this can also bring attendant pressures to deliver quickly in a high profile intervention.

- It is important that efforts are made to ensure that frontline staff within other stakeholder agencies understand what Housing First is and to address any initial issues and concerns they might express from the outset. Active listening to and engagement with stakeholders during the design and mobilisation phases fosters the co-construction of 'bottom up' solutions.

- The time required to develop and agree the processes and procedures required for effective delivery should not be underestimated, particularly when preparing for implementation at scale. This can include developing and agreeing eligibility criteria, establishing referral pathways, and agreeing the required data sharing processes to enable referral information to be shared effectively and securely.

- Previous experience of delivering Housing First services, either within the Combined Authority or through staff recruited, was helpful in enabling services to progress towards delivery. However, this experience is not universal, and so time must be invested to ensure common understandings of the model, and the

importance of maintaining fidelity with the Housing First principles, through promotion and training.

- There is value in being aware of the concerns raised regarding, and potential resistance to, Housing First services amongst other representatives of the homelessness infrastructure and being prepared to counter such concerns. These may include the implications for existing local services, perceived implied criticisms of their effectiveness, and cultural resistance particularly around "systems change".

- Early findings from Pilot efforts to identify suitable staff, and particularly support workers with the necessary combination of skills, experience and attitudes / values, show this can be challenging. The recruitment of individuals from 'outside' the traditional homelessness sector and training them in homelessness/housing should be considered to help address capacity issues going forward.

- It is crucial that relationships are established with housing providers as early in the process as possible, and knowledge shared between the Pilots on the most effective ways of doing this. Additional efforts may be required to ensure effective engagement with both the PRS and some social landlords, where demonstrating the intensity and longevity of support available, alongside potential financial incentives and reducing the impact of voids, may be helpful in fostering buy-in.

- A robust assessment of the local provider base, and its ability to support the expected numbers of Housing First service users, should be made at the outset. This would allow decisions on whether services should be commissioned or, particularly for smaller scale services, delivered 'in house'.

- The involvement of people with lived experience of homelessness and complex needs in service development and preparation is valuable if not tokenistic, focused on things which are important to people with lived experience, and acted upon. Both LCRCA and GMCA have full time workers paid to facilitate Lived Experience work, which has helped ensure that the Lived Experience voice is strong and not lost among other priorities.

5.2.2 Learning from early delivery

Lessons from the Pilots' experience of delivering Housing First services, although at an early stage, are set out below:

- **Referral**: It is important that staff in organisations making referrals to Housing First fully understand the criteria for inclusion and what the service offers. In some areas understandings of Housing First are good but in others further networking and education is needed to support this. Despite these issues there is a consensus view across the Pilots that the 'right people' are being accepted onto the programme and that these people have complex needs.

- **Early engagement**: Once a Housing First referral is accepted support workers enter into what can be a fairly lengthy pre-tenancy engagement process. The importance of this phase should not be underestimated, nor the time taken to engage constructively with individuals and build trust. It is imperative that support workers do not feel pressured to 'push' service users, as doing so will

compromise fidelity to Housing First principles, jeopardise attainment of positive outcomes, and risk provoking user disengagement.

- **Assessment**: Informal assessment processes that avoid paperwork are more acceptable to people referred to Housing First and more likely to be effective than traditional formal assessments. It is anticipated that where there are issues related to mental health or dual diagnosis, it may be appropriate to develop joint assessment processes with dual diagnosis specialists or mental health clinicians.

- **Accommodation**: Challenges in securing accommodation represent a threat to the Housing First principle of choice. As the number of referrals onto the programme increase sourcing accommodation is likely to become increasingly challenging. On-going work with housing providers to broaden their understanding of Housing First and the level of support available to tenants will be important. Where Pilots are able to appoint to specialist housing officer posts this should reap benefits.

- **Delivering support**: The intensity of support required by service users varies depending on individual needs and the stage of engagement. The most intense stage appears to be on entering a tenancy when there are a multitude of practical tasks to complete and when people's emotional and other support needs are high. This tends to reduce as people become more established in their homes. The flexibility Housing First offers and the lack of conditionality both facilitate ongoing engagement and housing retention.

- **Specialist provision**: The high level of strategic buy-in into Housing First described above is not always reflected amongst specialist service providers. Most significantly pathways into mental health services are not always clear or easy to navigate. There are particular challenges in getting mental health and drug and alcohol services to work collaboratively in supporting Housing First clients. Further work is needed at all levels and it will be interesting to see what impact that specialist mental health resource integrated into the Pilots will have going forward.

5.3 Recommendations

Recommendations for MHCLG and for the Pilots are set out below.

5.3.1 Recommendations for MHCLG

- **A longer lead time following the confirmation of funding** for such initiatives is needed to allow the necessary relationship building, securing of commitment and establishment of the necessary systems and processes prior to the start of delivery. The challenges of developing and preparing for the implementation of Housing First at scale across multiple local authority areas should not be under-estimated.

- Consider **potential routes to sustainability for the new services introduced and to sustain the progress made by service users** once Pilot funding ends. The Housing First target group includes individuals with entrenched homelessness, variable engagement with support services and multiple and complex needs, and for whom existing services have been ineffective previously.

Many will be facing challenges of such scale that they make take more than three years to address, and many will have ongoing support needs beyond the Pilot period.

- **Facilitate the active sharing of practical experiences and learning from service delivery between the Pilots**, in an environment where lessons can be shared on what did not work (and so avoided elsewhere) as well as what did. While the Pilots currently share information, tools and tips with each other, this is often on a bi-lateral basis and a more structured and comprehensive approach would be valuable.

5.3.2 Recommendations for the Pilots

- Continue to **prioritise steps to ensure the fidelity** of the Housing First services offered, which may face pressures as delivery scales up.

- Take steps to **collect learning from delivery** on an ongoing basis, to inform service development locally and, through **facilitated exchanges of learning**, inform delivery across the three Pilot areas.

- Ensure that the **lived experience perspective is captured** as delivery scales up, and that there are routes for the user experience to be fed back to inform service delivery.

- While the majority of accommodation across all three areas is expected to be sourced from social housing/Housing Associations, **continue to take steps to engage with PRS landlords** to help ensure a sufficient supply of housing, and share learning on what works in engaging the PRS. More widely and given concerns regarding the supply of suitable properties across the Pilot areas, the Pilots should **continue to make efforts to identify new opportunities** in both the private and social sectors, and by so doing maximise the extent to which choice can be offered.

- Pilots, and their providers as appropriate, should **consider how to best ensure a sufficient supply of appropriate support workers**, particularly as services scale up delivery. In so doing, the Pilots should consider their impact on the wider homelessness infrastructure, while at the same time ensuring the most appropriate individuals are recruited. Pilots should seek to be **creative in their recruitment plans**. Existing examples of this include recruiting outside of the traditional homelessness sector (on the basis of attitudes and behaviours rather than detailed knowledge of the sector) and using secondments (which also the benefit of 'spreading the word' within the home organisation).

- As they emerge, **capture early success stories and document individual case studies** and share these with stakeholders (including landlords reluctant to offer properties to the cohort) to show the benefits of, and foster commitment to, the Housing First approach.

Annex I – Overview of National Homelessness Funding Initiatives

National Homelessness Funding Initiatives

		Presence in GMCA	Presence in LCRCA	Presennce in WMCA
Homelessness Prevention Trailblazer Area Programme	Launched prior to the introduction of the Homelessness Reduction Act (April 2018) to help local authorities and their partners develop and implement innovative approaches to homelessness prevention.			√
Homelessness Prevention Trailblazer Devolution projects	A subset of the Trailblazers, the funds were allocated to the Greater Manchester and Liverpool City Region Combined Authorities. They aim to drive the prevention and reduction of homelessness in the city regions, with the combined authority providing the leadership and governance.	√	√	
Rough Sleeping Grant	Finding to help new rough sleepers, or people at imminent risk of sleeping rough, get the rapid support they need to recover and move-on from their homelessness.	√	√	√
Rough Sleeping SIBs	Providing outcomes funding for Social Impact Bonds (SIBs) to support the most entrenched rough sleepers.	√		
Rough Sleeping Initiative (RSI)	The Rough Sleeping Initiative was launched in March 2018 and targeted towards local authorities with high numbers of individuals sleeping rough, with the aim of supporting those sleeping rough off the streets and to improve their wellbeing and stability.	√	√	√
Rapid Re-housing Pathway (RRP)	The Rapid Rehousing Pathway combines four policy elements (Somewhere Safe to Stay, Supported Lettings, Navigators and Local Lettings Agencies) to help rough sleepers, and those at risk of rough sleeping, access support and settled housing.	√	√	√

Annex II – Summary of Eligibility Criteria Applied in each Pilot Area

GMCA eligibility criteria

Individuals eligible for the GMHF programme must be facing multiple needs and not able to be accommodated through an existing pathway. A common methodology is applied to ensure consistency across authorities/zones, and an assessment tool developed based on a slightly adapted version of the New Directions Team assessment, although it is emphasised that the resulting scores are not in themselves the sole means of determining an individual's eligibility. The assessment tool comprises 12 domains, covering:

- Current accommodation and housing history,

- Engagement with frontline services,

- Intentional and unintentional self-harm,

- Stress and anxiety,

- Social effectiveness,

- Risks to and from others,

- Alcohol and drug abuse,

- Personal self-care and hygiene, and

- Meaningful use of time.

Each is rated on a five-point scale to capture an individual's level of multiple need and exclusion. With a maximum overall score of 60, an indicative threshold score to be eligible for the programme has been set at 38 but this is not applied rigidly and will be subject to review.

In addition to this score, other considerations should include: the level of interest shown in taking up the Housing First offer and willingness to take up an independent tenancy; the level of perceived risk posed by their current lifestyle; and any forthcoming events which are likely to have a positive or negative impact on their ability to start a tenancy within a month.

LCRCA eligibility criteria

A set of criteria to determine an individual's eligibility for the LCRCA test and learn pilot have been established. As the Housing Association Delivery Guide states, eligibility is not determined by the use of a single tool but rather through a combination of methods which include personal choice and histories of:

- Homelessness or unstable housing,

- Repeated substance misuse,

- Enduring mental and/or physical health issues,

- Profound learning difficulties and

- Long term and deteriorating physical health; and

- Repeat offending.

In addition, the criteria also include judgements on whether other alternative service options would pose a significant risk to the individual.

On referral, individual circumstances and histories were viewed in the round by a multi-agency panel set up for the Pilot to establish whether the threshold for participation had been reached.

WMCA eligibility criteria

To be eligible to joining the WMCA programme, individuals should in addition to being homeless have at least two of the following needs:

- Entrenched rough sleeping,

- Affected by poor mental and/or physical health,

- A history of offending,

- A history of domestic abuse,

- Individuals serially excluded from services, and

- Individuals with substance misuse issues.

The criteria applied for joining the programme are therefore:

- Being homeless or at risk of becoming so, or entrenched rough sleeping, and have complex needs,

- Individuals with complex needs and are identified by housing advice agencies or other partners likely to become homeless within 56 days,

- Having at least two additional needs (listed above), with the chaos index/New Directions Team Assessment being applied where needed to determine eligibility based on the highest need,

- Being at risk of exclusion from mainstream or supported housing due to behaviour, previous behaviour or complexity of needs, and

- Having the mental capacity to enter into and understand that they are entering into a legally binding tenancy agreement.

However, as in other areas, the professional judgement of staff will be key in determining an individual's appropriateness for the service.