Local Government and Communities Committee

Homelessness

Submission from Turning Point Scotland

1. Introduction

The following paper is a response to the Scottish Government’s call for evidence on Homelessness, launched on 3 May 2017. It draws on Turning Point Scotland’s experience of delivering a range of different homelessness services and the evidence and insight we have gained.

The response focuses primarily on those who have Multiple Complex Needs (MCN) and describes how current homelessness interventions (Housing Options, permanent accommodation and supported accommodation) find it challenging to meet individual’s needs this this group are hard to engage successfully and do not meet the requirement of housing readiness.

The paper goes on to discuss Housing First as an evidence based model (both in Scotland and internationally) which offers a successful alternative approach to addressing homelessness and is currently delivered by Turning Point Scotland. It describes the key principles of Housing First, considerations around scaling-up Housing First provision and the importance of a psychologically informed environment as part of the approach.

Finally our response concludes with some general points about sector-wide good practice and discusses specific barriers that have been raised by TPS staff or service users within our homelessness service provision.

We would be very willing to provide further evidence or to attend a session of the committee if that would be helpful.

2. Who we are and what we do

Turning Point Scotland is a national organisation working to ensure that services fit people. We are committed to innovating service delivery models which are evidence based and effective in meeting the needs of those who are most vulnerable. We currently work within a number of social care areas including: criminal justice, learning disabilities, substance misuse, mental health and homelessness. We base our practice on the belief that sometimes the same person can be viewed in multiple ways depending on what need is being considered and that the interconnectedness of need should be better understood and responded to.

We are currently working across eighteen Scottish local authorities and delivering commissioned services to homelessness people in seven of these authorities. Our service delivery models include: direct access service for rough sleepers; Housing First services to specific groups such as those with substance misuse and those with mental health issues; and housing support services for more than a thousand individuals and families affected by homelessness who are currently resident in
temporary accommodation. We believe that this level of activity within the sector gives us useful insights into the experiences of people affected by homelessness.

3. MCN and a housing pathway

3.1. People affected by homelessness have different levels of need
People affected by homelessness are not a homogenous group and as such provision and interventions have to be shaped to meet different levels and types of need. Within this call for evidence we will particularly focus on those with **multiple complex needs** and their interaction with both statutory and non-statutory services. Multiple complex needs are usually defined in terms of three or more different needs. However, it is important to also consider the severity of the need and how this might impact on a person’s ability to be active participants in the services they require.

An example of those with multiple complex needs failing to engage with a successful intervention is the lack of uptake for this group in **Housing Options**. Housing Options has been a successful intervention, in terms of prevention, for many and has seen a cultural and attitudinal shift in relation to statutory front line workers. The difficulty is that those who have the most enduring complex needs are often unable to engage successfully with this process due to challenges such as keeping appointments.

3.2. Permanent accommodation
Traditionally those with multiple complex needs have not been allocated permanent tenancies due to their perceived lack of housing readiness. Even those individuals who do engage with the process of achieving statutory homelessness are likely to be given some form of supported accommodation.

The **staircase model** has been the traditional pathway for those with multiple complex needs. In this **treatment first** approach individuals have to demonstrate a
willingness and ability to change their behaviour, such as a reduction or stabilisation in substance use, before they are deemed to be housing ready. Consequently there are a group of the most vulnerable service users who are never likely to successfully demonstrate housing readiness and are therefore unlikely to be allocated a tenancy.

3.3 Supported Accommodation
Those individuals who have the most enduring multiple complex needs can also find it difficult to sustain a supported accommodation placement. This is because they will often exhibit behaviours which are deemed too risky for themselves and others and can result in the most vulnerable individuals being excluded by service providers, creating a revolving door into homeless services.

4. What Works?

4.1 Housing First
In May of this year Turning Point Scotland, in conjunction with Glasgow Homelessness Network, held a Housing First conference which was attended by over two hundred and fifty participants. One of the opening presentations was given by Professor Sarah Johnsen from Heriot-Watt University, who laid out the evidence base for HF. She concluded that, whilst Housing First is not a panacea, the evidence base on its effectiveness is far stronger than for any other intervention and that it demonstrates exceptionally positive outcomes for a group that has historically been poorly served.

She drew on international evidence from across the USA Canada, Australia and Europe (including the UK) that showed: 80-90% housing retention rates after 2 years, with some of the early projects showing similar retention rates after 5 years; improving health outcomes; decreasing involvement in criminal activity and anti-social behaviour; and improved cost-effectiveness of service delivery and cost savings.

Turning Point Scotland currently operates Housing First services in Glasgow, Renfrewshire, and East Dunbartonshire. The most mature of these services is Glasgow HF, which currently works with forty two service users who have multiple complex needs and are managing to sustain their own permanent tenancy.

The 2015 study Further Validation of the Pathways Housing First Fidelity Scale by Goering et al. found that Housing First shows a greater degree of efficacy where there is a higher level of fidelity to the original pathway model in New York. We believe that there are some key principles which must be adhered to:

- Individuals using HF should be able to access a Scottish Secured Tenancy without having to demonstrate any housing readiness
- **individuals on the street are housed within six weeks** of referral
- HF services need to have an assertive outreach component so that they can look for those service users who would not normally engage

If someone has multiple complex needs and is a rough sleeper it is unlikely that they will keep housing or support appointments. HF Glasgow specifically works with individuals who have long standing substance dependency issues and does not
require a condition of treatment before the person accesses a tenancy. It is important to emphasise that housing and support should be kept separate, so if someone loses their tenancy the support can continue.

Another key principle that TPS has included within their model is the role of peer support workers. We believe that the role of the peer support worker can bring an authenticity to the relationship with the service user and that this is directly attributable to the success of our Housing First services.

4.1.1 Structural considerations when scaling up Housing First

Turning Point Scotland is part of a FEANSTA European Housing First Hub. As part of a work stream, led by Crisis UK, we are considering the structural issues in relation to the scaling up of HF. Significant in the implementation of a HF approach are local housing markets e.g. stock transfer local authorities; local authorities that have particular pressures on Private Rented Sector (PRS) and have a predominance of properties above the Local Housing Allowance.

Another consideration in the scaling up of a HF approach is bringing on board supported accommodation providers. A transition from supported accommodation to HF can be as threatening and challenging to providers as to local authorities. The European Housing First hub is looking at creating a road map for different municipalities and local authorities so that lessens can be learned in the scaling up of Housing First.

4.2 Psychologically Informed Environments (PIE)

Although we believe that HF should be the default model for those who are rough sleeping or have multiple complex needs we also recognise that some individuals are not ready or yet able to commit to having a permanent tenancy. Therefore when supported accommodation is provided it should be within a **psychologically informed environment (PIE)** and adopt established psychologically informed approaches. The received wisdom tells us that those who have the most enduring and severe multiple complex needs often have underlying issues in relation to trauma. Therefore when supported accommodation services are being commissioned, the tender should require providers to demonstrate an understanding of these approaches. There are key psychological processes which if applied would enable those who are most often excluded to be included within supported accommodation models. Some key elements of PIE which should be included are:

- Creative inclusion policies
- Reflective practice for staff
- Understanding of key psychological theories such as Attachment theory
- Environments which are properly considered in relation to the PIE framework
- Services which are low threshold for access and have a high tolerance built into their design and delivery.
5. Other considerations

5.1. Month rent in advance for homeless service users accessing social housing

TPS service managers have reported a higher instance of Registered Social Landlords in Glasgow asking for one month’s rent in advance. We believe this creates a financial obstacle particularly for those who are on benefits; often service users are forced to ask family or friends to loan them money to enable them to pay this. On some occasions TPS staff have been able to negotiate this to a week’s rent in advance, but on other occasions the RSL has been resolute. We believe this practice has been more apparent post Welfare Reform.

5.2 No more silo thinking when considering the needs of vulnerable people

We welcome the change in some local authorities in recognising that there should be greater fluidity and flexibility in funding streams and have started to refer to a group who are ‘Vulnerable,’ as opposed to labelling them in terms of mental health, criminal justice, homeless. However, neither would we like to see the diminishment in the significance of the statutory rights of the homeless person.

5.3. Greater joined up working and longer funding periods

We welcome some local authorities approach to exploring alternative commissioning arrangements, such as Strategic Alliances, and the longer funding periods being increased to up to seven years. We believe that this approach will engender greater cooperation and shared innovations which will ultimately benefit those affected by homelessness.

5.4. Homelessness Impact Centre

We value evidence based practice and believe that the conception of a Homelessness Impact Centre in Scotland would add to the existing plethora of innovative service delivery models. We would therefore like to add our support to the development of this centre by Crisis UK and Glasgow Homelessness Network.

5.5 Scottish Government using existing forums to implement Housing First

Using the Housing Options hubs or replicating similar networks, the Scottish Government should apply national levers to embed and implement a Scottish wide commitment to Housing First as the default model of choice for those with MCN.

6. Conclusion

We would assert that not all people are equally homeless and, as a result, interventions have to be responsive to all those who are affected by homelessness. We have to be particularly innovative and sticky when trying to successfully engage those who have the highest and deepest levels of complex needs. Consideration should be given to Housing First as a default, with a well-established success rate, for those who would not have accessed housing within the traditional housing
pathway. We would welcome the Scottish Government using existing policy networks to embed a Housing First approach across Scotland.

Patrick McKay  
Operations Manager and Strategic Lead for Homelessness  
Turning Point Scotland