



Submission

to the Supporting
People Strategy 2022-
2025 Consultation

April 2022

homelessconnect.org

Homeless Connect Consultation Response to the Supporting People Strategy 2022-2025

Your Details				
Is this submission on behalf of an:		Organisation	X	Individual
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It should be noted at the outset that this response has been informed by feedback received by the Homeless Connect Policy Forum at a meeting which took place on April 5 2022. All members of Homeless Connect are entitled to put forward a representative to be a part of the Policy Forum. It is made up of senior staff from across the homelessness sector including a wide range of providers of temporary accommodation and floating support providers funded through the Supporting People (hereafter SP) programme. The group is currently chaired by Gail McLaughlin, Homeless Services Manager at Ark Housing Association.

At the meeting on April 5, a structured conversation was held to hear the views of members on various aspects of the strategy. Our public policy officer then captured comments and incorporated the views of policy forum members in to the response set out below.

1	Do you agree that the document provides a clear mission and strategic priorities for the Supporting People Programme?	YES	NO
		X	
<p>We do agree that the document provides a clear mission and strategic priorities. We do have some comments to make regarding the content and specific wording of the priorities.</p> <ol style="list-style-type: none"> We would highlight three concerns that we have regarding the second strategic priority. This strategic priority uses the phrase “single homeless people.” We would urge the Housing Executive to avoid the use of the term ‘homeless people.’ In our view, this language implies that homelessness is a constitutive part of the identity of the person experiencing it. This is inherently stigmatising. At other points throughout the strategy the language of “experiencing homelessness” is used. We would recommend that this is consistently used throughout the strategy. Consequently, this strategic priority should read “single people experiencing homelessness with alcohol and drug problems.” <p>Secondly, we note that the second strategic priority lists a number of groups who will be “prioritised” including “older people, people with mental health issues; single homeless people with drug and alcohol problems; and women at risk of domestic abuse.” The priority states that this work will “be underpinned by evidence from the Strategic Needs</p>			

Assessment”. Looking at the Strategic Needs Assessment (SNA), it is unclear to us why other groups are not going to be “prioritised” in a similar fashion to those outlined above. The SNA highlights current unmet need for several other groups experiencing homelessness including “single homeless with support”, “Homeless families with support needs” and “offenders/people at risk of offending.” In all three of these categories, the undersupply of support is projected to increase over the next three years.¹

We absolutely agree with the use of an evidence-based approach to allocating the finite financial resources of the Supporting People fund. Following conversation with SP, we also appreciate that the prioritisation of the groups listed is not meant to imply that groups which are not mentioned will be deprioritised. However, it should be noted that some members of our policy forum have raised concerns about the wording set out here. In addition to the three groups mentioned directly in the Strategic Needs Assessment, it should be noted that young people are also not included in the list of those to be “prioritised.” We would submit that the language used in this priority should be reconsidered to avoid the potential for misunderstanding.

Thirdly, regarding the group “single homeless people with alcohol and drug problems.” This phrase can be understood in different ways. Will only individuals who have both alcohol and drug problems be prioritised? Or will those solely with alcohol or drug problems be prioritised? If it is the latter which is intended, as we think it is, the wording should be “single homeless people with alcohol and/or drug problems.” A further difficulty with this wording arises from the fact that the needs of those experiencing homelessness facing challenges with alcohol can differ from the needs of those facing challenges with drugs. The SNA highlights this by separating the two groups out in its analysis. The trajectory for the two groups over the next three years highlighted in the SNA significantly differs. The undersupply projected for three years from now for support for those with alcohol problems stands at between 59 units and 3 units. The equivalent figures for those with drug problems stands at between 8 units and 170 units.² Those are substantively different scenarios. While admittedly the support provided to both groups does in fact overlap, we would submit the two groups should be considered separately in light of the different trajectories highlighted in the SNA.

2. Regarding Strategic Objective 4, we would submit that emphasis should not only be given to “generating greater value from public funds” but should also focus on achieving better outcomes for service users. The objective could read as follows: “4. Strengthen relationships across health, criminal justice and housing to achieve greater collaboration and sharing of risk with the aim of achieving better outcomes for service users and generating greater value from public funds to enhance available resources for housing support.”

2	Do you agree that the objectives of the document are clear?	YES X	NO
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We do agree that the objectives of the strategy are clear. We would submit that Objective 2 requires amendment in line with our response to Q1.

3	Do you agree with the actions that we will take in order to address the challenges of Objective 1?	YES X	NO
<p>Speaking generally, we do agree and support the objectives set out under Objective 1. We have some specific comments to make on some of the actions.</p> <ol style="list-style-type: none"> 1. "In year one, we will support providers to develop capacity and resilience. ££" <ol style="list-style-type: none"> a. We agree and strongly support this action. Homeless Connect would welcome the opportunity to work with Supporting People in seeking to fulfil this action. If funding is to be made available to achieve this action, we would urge SP to ensure it operates over the life of the strategy rather than in single years and that the administrative burden on providers is limited. 2. "In year one we will fund mental health training for staff working in SP services." <ol style="list-style-type: none"> a. We strongly welcome this action. Especially since the advent of the Covid-19 pandemic, pressures on staff working in SP services have been enormous and some have faced challenges with their mental health as a result. We are aware from our members that deteriorating mental health amongst staff is a significant issue. This has impacted on both frontline staff and management. The difficulties in recruiting and retaining staff have placed significant pressure on staff in the homelessness sector who are often being asked to go above and beyond their hours to fill in for vacant positions. In addition, as SP will be acutely aware, the level of complex needs amongst service users has risen presenting additional challenges for staff in the sector. Some of our members have also highlighted that Covid has caused a notable loss in job satisfaction among staff, as they are unable to engage with service users in the same way they were able to before the pandemic. b. This funding reflects the need to value staff in SP services in a person-centred way. We welcome the commitment to fund this training in year one and the fact that this action does not require additional funding subject to DfC budget confirmation. Homeless Connect would welcome the opportunity to work with the Housing Executive in seeking to fulfil this action. 3. "Throughout the life of the strategy we will support flexibility in contracts, and welcome reconfigurations and service development proposals including those to increase floating support / peripatetic places; in particular those identifying efficiencies and focusing on homelessness, mental health, young people experiencing homelessness and older people". 			

“Support flexibility, reconfigurations and service development to release funds from accommodation-based services to fund additional floating support places to address mental health and homeless prevention.”

- a. Regarding these two actions, the critical question relates to how these actions will be operationalised. We understand the rationale behind each of these actions but much will depend on how they will be implemented.

In terms of how success is measured under this objective, we would make the following comments:

1. “Administer eligible Covid 19 funding to providers.”
 - a. SP has now indicated to providers that no additional Covid funding will be made available in the coming financial year. If this is correct, we do not see why this measurement should be included in the strategy. It is fully understood that at the time the draft strategy was written that the future of possible Covid funding was unclear. However, we believe it is important to raise the reality that Covid is far from over for providers. This has a real impact in two main ways.
 - b. Firstly, for congregate temporary accommodation providers, there is still a requirement to keep rooms available for the purposes of self-isolation in the event that a service user contracts Covid. When Covid funding had been available, providers received funding for those rooms. Now that Covid funding has stopped, this funding has stopped. This can cost providers in this situation significant sums of money over time in already financially straitened circumstances. For the purposes of keeping their staff and service users safe, they have no alternative option but to keep these rooms empty. Additionally, Covid funding has been used by providers to provide in-reach support in some settings which has served a valuable role throughout the pandemic. Without the Covid funding, this too will be impacted.
 - c. Secondly, staff are still required to isolate if they test positive for Covid; if staff are off, this places more pressure on other staff who are already under pressure due to the number of job vacancies or increases the need for agency staff who can be hard to get and are increasingly expensive; and with restrictions being lifted, there is an expectation that the number of cases may start to rise again. Providers, as responsible employers, feel they need to continue to provide Personal Protective Equipment (PPE) to staff to keep them safe. However, now that Covid funding has now stopped, so the cost of providing PPE will have to be diverted from existing budgets when existing stocks of PPE run out. This is another additional budgetary pressure on a sector which is already under enormous pressure. We would urge SP to consider what assistance they can provide to temporary accommodation providers with congregate facilities who still need to keep rooms open for the purposes of self-isolation and in terms of obtaining PPE.

2. "Create 1000 additional floating support/peripatetic places."
 - a. Following discussion with representatives of SP, we have been made aware of the rationale behind the figure of 1000 additional floating support/peripatetic places. While 1000 additional places will not meet the gap in need, we understand that with budget constraints this is a realistic figure to introduce over the life of the strategy. We would suggest, however, that SP allow for flexibility to create more than 1000 additional floating support/peripatetic places in the wording of this action through the insertion of the phrase "at least". The action would therefore read "Create at least 1000 additional floating support/peripatetic places." We will continue to push for funding to be made available to close the gap in need.
3. "Successful Outcomes reported by providers on Covid recovery, capacity, resilience and staff mental health."
 - a. It would be helpful if further detail could be provided on how SP will measure successful outcomes under these four criteria.
4. "Reduction of Major Adverse Incidents."
 - a. The concept of "major adverse incidents" requires some degree of explanation. Members of our policy forum noted the lack of detail provided in this action and the lack of publicly available information on Major Adverse Incidents. This makes it challenging to know the settings in which these incidents are taking place and how the sector as a whole can address these issues.
 - b. The rise in incidents has to be understood in context. Covid has without question been a major factor. However, it is also clear to our members that the crisis in recruitment and retention of staff has been a significant contributory factor. If services are unable to recruit enough staff, this stretches the staff who currently work for the service and can lead to practices such as lone working. Services do not want to require staff to work on their own, but in some services this has become unavoidable due to the challenges being faced. We are concerned about the potential risk associated with staffing challenges. It is right for SP to seek to reduce the number of such incidents, but it is important that this is not solely put down to Covid. The reality is more complex than that.
 - c. It would also be helpful to know what baseline this reduction will be measured against. Would it be for the year 2021?

4	Do you agree with the steps that we will take in order to address the challenges of Objective Two?	YES X	NO
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While we are supportive of many of the actions incorporated here, we have some comments to make regarding some of the actions.

1. "In year one we will link the central cost reduction with maximisation of Housing Benefit (highlights ineligible spend and clarifies cost allocation."

- a. We would submit that further consideration is required regarding this action. A particular concern we have is the impact this may have on service users who are not in receipt of housing benefit. If, as we believe to be the case, the purpose of this action is to allow providers to increase rents and for housing benefit (or the housing element of Universal Credit) to cover the cost of the increase, this could negatively impact on those not in receipt of those benefits. If this action is included in the final strategy, the full consequences of taking this step for providers and service users will need to be explored and understood. Different wording to provide greater flexibility to SP in this area would be advisable.
2. “Throughout the life of the strategy we will remodel low level support services to release funding to floating support / peripatetic support.”
 - a. We would value further detail on what this will involve in practice. This is not to suggest that we oppose this action per se, but much will depend on how it is operationalised.
3. “Throughout the life of the strategy we will Increase the number of people who are in receipt of a SP funded service by 1000 people.” ££
 - a. We welcome the clarification provided here as to how the 1000 figure was arrived at. We would ask how this relates to the action set out in Objective 1 to “Create 1000 additional floating support/peripatetic places.” Would the creation of 1000 additional floating support/peripatetic places be counted for the purposes of increasing the number of people who are in receipt of an SP funded service? It is assumed that it would not, but we would value clarification in this regard.
4. “Throughout the life of the strategy we will Increase efficiency by reducing the number of Providers by 10% by facilitating the current trend of Provider mergers.”
 - a. Following discussion with SP representatives, we understand that the Housing Executive intends to play a constructive role in facilitating mergers to the benefit of providers and service users. Of course, providers are independent entities, mainly charities, in their own right. There have been recent examples of mergers which were mutually beneficial to the organisations concerned. However, any mergers have to be carefully considered and be in the best interests of the organisations concerned as well as service users. We would believe that the language should be amended to avoid any ambiguity and to ensure that the intention SP is clearly understood.
5. “Work with Providers to develop efficiencies from composite contracts. Target a 15% reduction in schemes by focusing on bundling numerous low, cost low support schemes.”
 - a. As with the previous action, we would invite SP to consider the language used here to ensure the intention behind this action is understood.

6. “Use the evidence from SROI and in partnership with health, improve services to meet the needs of homeless people with Drug and Alcohol problems and those with dual diagnosis. ££”
 - a. This is a welcome action and we sincerely hope funding will be available to implement it. For the reasons set out in our answer to Q1, we would submit the language here should refer to “people experiencing homelessness” rather than homeless people.
7. “Remodel services where appropriate to meet the needs of single homeless service users.”
 - a. As with the action above, we would urge this to be amended to refer to “single people experiencing homelessness.” While we do not oppose this action per se, it is not clear precisely what this will involve in practice. We would welcome further conversations with the Housing Executive to clarify what the intention is behind this action.
8. “Develop new services and enhanced delivery for people at risk of domestic abuse. ££”
 - a. We strongly support this action. There is a real need for additional services for those who are at risk of or have experienced domestic abuse. We would submit that this action should refer not only to those at risk of domestic abuse but also those who have experienced it. We sincerely hope that the financial resources will be available to deliver this action.
9. “In collaboration with Health, identify gaps in mental health provision and increase services, in accordance with need. ££”
 - a. We strongly welcome this action. It is well known that challenges with mental health are common amongst those at risk of or experiencing homelessness. Many service users in temporary accommodation need support in managing their mental health but at the current time can struggle to access the services they need. The homelessness sector needs to be involved in the development of the action plans which will emerge under the Mental Health Strategy for 2021 to 2031. We hope that the funding to implement this action will be available.
10. “Support the implementation of the strategic actions from the Strategic Review of Temporary Accommodation including the need for specialist accommodation based services. ££”
 - a. This is a critically important action. In our response to the consultation on the draft Strategic Action Plan for Temporary Accommodation (SAPTA) arising from the strategic review, we noted that the plan only includes one action related to specialist accommodation for a group with particular needs. This action was to “test new models of emergency accommodation for young people, to cater for the full continuum of support needs.”³ In our estimation, there is strong evidence that specialist accommodation based services are needed for other vulnerable groups. This includes single

sex services for women and girls and those impacted by substance use.

In the section entitled “How we will measure success”, four measurements are incorporated. One of these measures is to “provide support to an additional 1000 people.” Is this measurement connected to the action “throughout the life of the strategy we will increase the number of people who are in receipt of a SP funded service by 1000 people?” If so, this measurement is at risk of failure without additional funding being provided by the Department for Communities. This is not made clear under this heading.

The measurement to “enhance programme and provider efficiency by reducing bureaucracy and increasing the proportion of funding available for delivery of frontline services” will be warmly welcomed by providers. However, it is not clear from this how this will be measured practically. How does the Housing Executive propose to measure the reduction of bureaucracy?

In line with our comments above about seeking the maximisation of housing benefit, we would submit SP should reconsider the language used regarding this to ensure this proposal is fully thought through before it would be implemented.

5	Do you agree with the steps that we will take in order to address the challenges of Objective Three?	YES X	NO
<p>Speaking broadly, we are supportive of the actions set out in order to tackle the challenges of objective three. We have some comments to make on each of the actions set out.</p> <ol style="list-style-type: none"> 1. “In year one we will work with providers to establish a forum for SP engagement, service development, staff training and cross-provider benchmarking and information sharing.” <ol style="list-style-type: none"> a. Some members of our policy forum asked whether the establishment of another forum is necessary. It was pointed out that the wording here lacks detail on the specific purpose of the forum; of what this forum would involve in practical terms; and whether it would be a monitoring body for SP. Members already attend a raft of different bodies associated with SP and the question asked was what this group would offer which is not already in place. There is a concern that this new group could run the risk of duplicating what is already happening and taking away time and energy from services which are already under enormous pressure. If this idea is proceeded with, the substantive questions being raised here would need to be addressed. 2. In year one we will work with providers to establish a framework for service users to be engaged in shaping services to reflect their needs. This may include annual surveys, representative forums or further development of service user outcomes.” <ol style="list-style-type: none"> a. As an organisation, we strongly believe in the critical importance of service user involvement in policy and service development. It is welcome to see this included as an action in the SP strategy. The 			

crucial question regarding service user engagement is not the principle of it, but how it is practically implemented. From our experience with service users, we know that it can be challenging in practice to introduce. If this action is to be effectively implemented, the engagement with service users must be meaningful, substantive and properly funded. Tokenistic engagement with service users will not only be ineffective, but it could prove counterproductive. As academic Mark Evans puts it, “the success of co-design is all in the doing. Done badly it can exacerbate social exclusion and destroy trust systems; done well it can help stabilize turbulent lives, improve life chances and foster trust systems.”⁴ Two of the actions set out in the Year 1 Action Plan for the Homelessness Strategy 2022-2027 are relevant regarding service user input. These are Actions 10 and 11: “We will seek to appoint a Strategic Partner to develop and implement a Lived Experience Programme” and “We will host four Service User meetings over the course of 2022/2023.”⁵ It would be helpful if the final strategy could clarify whether it is envisaged that the “lived experience programme” would be a part of implementing this action. We would welcome the opportunity to assist the Housing Executive in developing service user involvement in service and policy development.

3. “In year two we will focus the innovation fund on Covid recovery, collaboration, resilience and capacity building”
 - a. This is a positive and welcome action.
4. “In years one and two we will work with providers to co-produce research on long term impacts of Covid on SP services”
 - a. This is a positive and welcome action reflecting on the fact that Covid will indeed have long-term effects. The emphasis on co-production is particularly welcome. An important ask of any research would be the impact of Covid on staff in SP funded services; as discussed above, Covid has had a major impact on staff members.
5. “Throughout the life of the strategy we will ring-fence £1million non-recurrent monies annually for innovation ££”
 - a. We welcome this action. We hope that while the ringfencing will take place on an annual basis, that the spending can take place over the life of the strategy. As the Housing Executive knows, it can be very difficult to effectively spend money provided in a single year budget. If this funding could be provided over a three year period, it would be spent more efficiently and lead to better outcomes. It should be further noted that in so as possible trying to reduce the administrative burden of schemes such as the innovation fund on providers would assist organisations who are already under enormous pressure.
6. “Throughout the life of the strategy we will drive efficiencies and prioritise projects which propose longevity of outcomes through short term investment/seed money to build into their own structures”
 - a. We have no objection to this action per se. However, in our estimation it is unclear what this will practically involve for SP providers. We would welcome greater detail on this.
7. “Throughout the life of the strategy we will drive collaboration between providers”

- a. We have no objection to this action per se. However, what in practice will this involve? To what end will this drive to “collaboration” be put? Collaboration between providers simply for the sake of collaboration does not seem to us advisable. However, if the collaboration is for the purposes of improving outcomes for service users then this would indeed be welcome.
- 8. “Develop models of support for young people experiencing homelessness including improved emergency accommodation options, Housing First, Nightstop and shared tenancies ££”
 - a. We welcome this action. However, several questions arise regarding it. Firstly, it is not clear why this action is not considered part of the homelessness stream. The box ticked regarding this action is for young people and not homelessness. This likely is an oversight and in the final strategy we would recommend the box for homelessness is ticked. Secondly, while we welcome the inclusion of a specific action related to young people experiencing homelessness, we would recommend a similar action regarding women experiencing homelessness and those impacted by substance use. The second strategic priority calls for the prioritisation of “single homeless people with alcohol and drug problems; and women at risk of domestic abuse.” Admittedly, there are actions included other objectives in relation to these two groups, but these do not include the development of models of support focused on these groups. Thirdly, the term “Housing First” is used here. At no point in this document is this term defined. It is crucial the Housing Executive is clear in its strategies and plans on what it means when this term is used. A simple citation to provide clarity would resolve this issue. Fourthly, a similar issue arises with the “Nightstop” service. While many in the sector will know what is meant by this term, this should not be assumed. Fifthly and finally, we hope the additional funding needed will be available.
- 9. Implement recommendations of the lessons learned exercise in respect of the current Housing First delivery model ££
 - a. We welcome this action. It is important that lessons are learned from experience around the delivery of Housing First. We hope the funding is available to implement these recommendations.
- 10. Contribute to progression of the Strategic Outline Case on the expansion of the Housing First model in NI and the broader Homelessness Strategy ££
 - a. We strongly welcome this action. We believe in the effectiveness of the Housing First model for the small cohort who are experiencing chronic homelessness. We hope this outline case can be progressed so that further expansion of Housing First becomes possible.
- 11. Deliver improvements in services for women at risk of domestic abuse.
 - a. We of course would welcome improvements in the services provided for women at risk of domestic abuse. However, we have two comments to make about this action. Firstly, this action is vague. How would success or failure regarding this action be measured? We would ask for greater specificity on what is desired here. Secondly, we are not sure why this action is gendered. It is well known that domestic abuse can also impact on men. According to official PSNI statistics, in 2020/21 69% of victims of domestic abuse

were female compared to 31% who were male.⁶ While it is the case that the substantial majority of victims of domestic abuse are female, there is a significant cohort of men who are impacted. Is there a reason why this action is specifically focused on women?

In terms of the measures outlined to measure success:

- Improved collaboration and transparency in engagement with providers

This would be welcome. We would ask how in practice SP proposes to measure this.

- Produce Covid 19 research

We welcome this action but would ask for greater specificity on what the research would focus on in the final strategy. Simply producing Covid 19 research in and of itself would not necessarily lead to helpful outcomes for SP providers and service users. To what end is the research to be conducted?

- Administer £1million innovation fund annually

We welcome the innovation fund. However, we would urge SP to administer this fund over the three-year life of the strategy rather than annually. As we know the Housing Executive understands, spending on an annual basis can be less efficient due to the tight timelines involved. It can also limit the measures which can be taken by providers in terms of innovation. If at all possible, we would urge SP to lengthen the period out in which this money can be spent.

- Develop three new young people pilot services

This is a welcome action. We would ask for clarification as to why it is proposed to introduce three young people pilot services as opposed to one or five; whether the Housing Executive has an idea of where they would like these services to be located; and we would call for a further measure of success to be the introduction of additional specific services for women and those impacted by substance use.

- Deliver on objectives set to support women at risk of domestic abuse

Similar to our comments above, we would ask why men at risk of domestic abuse are not included in the consideration of the Housing Executive.

- Deliver on findings of the review into jointly funded young people accommodation services

We welcome this measurement.

- Deliver on the objectives set to improve on the existing Housing First model

We welcome this measurement.

6	Do you agree with the steps that we will take in order to address the challenges of Objective Four?	YES X	NO
<p>Broadly speaking, yes we do agree with the steps outlined in order to address the challenges of Objective Four. We have some further comments to make on the actions included:</p> <ol style="list-style-type: none"> 1. In year one, establish a regular and formal structure to drive collaboration, risk sharing and enhance resource availability <ol style="list-style-type: none"> a. This is a positive action. We look forward to hearing more about what this will involve in practice. 2. In year one, work with DfC to review and rationalise Supporting People Governance and decision making arrangements <ol style="list-style-type: none"> a. We warmly welcome this action. We agree with the assessment set out in the strategy on p25 that “the current oversight framework is characterised by a complex structure.” Members of our policy forum highlighted the fact that there is a distinction between the level of understanding of the SP programme in terms of its operation and its governance. Speaking generally, staff in SP funded schemes have a good understanding of how SP operates in practice. However, when it comes to governance questions, it was noted that staff (including in some cases senior staff) do not fully know and understand the governance of SP. This can lead to a disconnect and a lack of understanding of how particular decisions have been arrived at. This is in all likelihood a product of the “complex structure” currently in place. Consequently, in our view simplifying and rationalising the governance and decision-making arrangements will be beneficial to providers and service users. b. A constructive suggestion put forward by members of our policy forum would be for SP to produce an organisational chart for providers. This would assist SP funded providers to know who to talk to within the organisation when different issues arise. Some members have had experience of being given conflicting information on who to speak to due to confusion over who is responsible for particular areas. An organisational chart which was regularly updated as and when staff move role would be valued. 3. In year one, make bids for additional funding including through monitoring rounds <ol style="list-style-type: none"> a. Our only question about this action is why it is limited only to year one. We would submit that this may well be necessary in years two and three as well. 4. In year one continue to work with Health and Justice colleagues to develop a partnership approach. <ol style="list-style-type: none"> a. While we welcome this action, greater specificity is required on who precisely is meant by “Health and Justice colleagues”. It is quite understandable that a shorthand has been adopted in the high-level strategy document, but we would welcome the full listing of who is envisaged here. Our concern is that without specificity, accountability for much needed progress on this action will prove impossible. We would further submit that “education” colleagues should be included, considering the vital importance the education 			

system can play in preventing homelessness and the role they play in the Interdepartmental Homelessness Action Plan.

5. Throughout the strategy, we will use existing collaboration in place through Community Planning Partnerships to develop pilots between health, housing, social care and justice organisations to share resources and greater target support, such as the Strategic Leadership Group in Belfast, which is developing a programme to target intensive support towards those experiencing homelessness, and with complex needs, including drug and alcohol dependency.
 - a. We strongly welcome this action. It is assumed that the programme referred to here is 'Complex Lives' which we believe has been a positive innovation.
6. Throughout the life of the strategy we will use the SNA and findings in Social Return on Investment to inform bids for additional funding
 - a. This is a sensible and welcome action.
7. Throughout the life of the strategy, work with DfC to enable greater collaboration across Government departments and achieve greater strategic alignment and greater value for the public purse
 - a. This is a sensible and welcome action. The positive collaborative working throughout the pandemic in response to homelessness must be built on. It would be tragic if that positive work is lost.
8. Throughout the life of the strategy use tools such as SNA and SROI to seek more investment as there is evidence that prevention produces significant future savings to the public purse. Investment which may cost more initially will have significant long-term gains.
 - a. This is a sensible and welcome action.
9. Re-define the Strategic Advisory Board to enhance strategic partnership working and outcomes for service users
 - a. While we welcome this action, we would stress that service users should be involved in this process and in the oversight mechanisms for SP. It is acknowledged that this would not be straightforward, but we would welcome the opportunity to work with SP to achieve this end.
10. Identify potential for new co-funded services
 - a. Our only query about this is why this is only for services for young people. Homelessness services may benefit from new co-funded services as well. Is there a reason this action only refers specifically to young people?

In terms of the measurements of success:

- Greater sharing of funding streams

While in principle this is sensible, there needs to be clarity on what funding streams are envisaged here.

- Establish 3 pilot services co-funded with health

Two questions arise around this measurement. Why three pilot services as opposed to one or five? Secondly, which streams of SP in particular are in view here? Are homelessness services envisaged here?

- Secure additional investment to deliver strategic actions

This would be welcome and it is a fair measurement.

7	Is there anything further you believe needs to be included in the strategy document?	YES	NO
We have made suggestions on this throughout our answers to previous questions.			

8	If you have any other comments regarding the strategy document please detail these below
<p>We have a number of additional comments to make on the strategy document:</p> <ol style="list-style-type: none"> 1. We strongly welcome the comments of the CEO of the Housing Executive in her foreword around funding for SP. On p4, she states the following: “I am aware that the funding pot remains static this year, despite evidence of the increasing gap between demand and supply of services. While I accept the importance of working within this funding envelope, I do not accept that funding levels are adequate, and therefore identifying opportunities for funding opportunities, and partnering with other funding streams where we can, is a priority.” Members of our policy forum also unanimously agreed with Ms Long’s assessment that current funding levels for SP are inadequate. We will join with the Housing Executive in pushing for additional funding for SP to ensure that providers can provide effective services for those they seek to serve. 2. It should be stressed that, as we know that SP are aware, service providers in the homelessness sector are under enormous pressure at the current time. On a wide variety of fronts, the resources available to the sector are simply insufficient to meet the needs of those at risk of or experiencing homelessness. Right across the sector, providers are struggling to recruit and retain staff. The salaries which can be offered are insufficient to attract suitable applicants for roles which can be hugely challenging. We are aware of providers advertising and re-advertising roles on five occasions and not receiving any suitable applicants. Some floating support services are already operating with large waiting lists because they simply cannot get the staff to provide the service. The rates being charged by agencies for staff have risen sharply (for some agencies in excess of 20%) and rising energy costs and fuel prices are putting pressure on already stretched budgets. These costs are unavoidable for services. While costs have risen, the contribution via SP has remained the same. The blunt reality is that valuable services are at risk of being scaled down or even closed because of difficulties around staffing and resources. We implore SP to do everything in its power to find a way to get more resources for the homelessness sector. Some services are close to reaching a critical point. We are hugely concerned about what the consequences will be for those who rely on these services if this situation is not urgently addressed. 3. An area where we would ask for much greater clarity from SP is on the question of whether or not SP is intended to provide for full cost recovery 	

for services or if it is intended to only be a contribution to service provision. Members of our policy forum have highlighted to us that the signals given on this question by SP over the years have been mixed. The answer to this question is of major significance for providers in the sector.

4. On p7, we would ask the Housing Executive to amend the language utilised in the section entitled “helping”. The phrase “Homeless Families” should be amended to “people experiencing homelessness” and the phrase “People experiencing homelessness, and Homeless people with support needs” should be amended to “People experiencing homelessness with support needs”. Our rationale for this is outlined in our response to Q1.
5. On p12, we would draw attention to this sentence: “The SP strategy is designed to meet the existing and emerging needs of Homeless, Older People, Younger People and those with a disability.” It seems likely that the word people is missing here after the word “Homeless”. The wording as it stands is unfortunate and should be corrected in the final strategy document. We would urge the Housing Executive to alter this language to “people experiencing homelessness”.
6. On p25, the draft strategy outlines that the document “has been screened for both equality and rural impacts.” It is normal practice for these screening documents to be published by public bodies, but this does not seem to be the case here. In future, these screening documents should be published for comment.
7. We welcome the clear and easy to understand structure of the draft strategy. While at points we would ask for greater detail, we acknowledge the hard work which has gone in to create this document.

¹ Housing Executive, “Strategic Needs Assessment: Research and evidence-based assessment to inform future housing support needs,” November 2020, 180-181.

² “Strategic Needs Assessment”, 181.

³ “Draft Strategic Action Plan for Temporary Accommodation 2022-27”, 2 November 2021, accessed 1 February 2022, <https://www.nihe.gov.uk/Documents/Consultation-Draft-Homelessness-Action-Plan/Draft-Strategic-Action-Plan-for-temporary-accommod.aspx> 18.

⁴ Mark Evans, University of Canberra, 2015, quoted in Ingrid Burkett, “Working Together to Transform Outcomes in Social Services: An Introduction to Co-Design”, <http://www.aodcollaborative.org.nz/vdb/document/98> 10.

⁵ Housing Executive, “Ending Homelessness Together Homelessness Strategy 2022-27 Year 1 Action Plan”, 23 March, 2022, <https://www.nihe.gov.uk/Documents/Homelessness-Strategy-2022-2027/Homelessness-Strategy-2022-27-Year-1-Action-Plan> 3.

⁶ Police Service of Northern Ireland, “Trends in Domestic Abuse Incidents and Crimes Recorded by the Police in Northern Ireland 2004/05 to 2020/21”, November 12, 2021, <https://www.psni.police.uk/globalassets/inside-the-psni/our-statistics/domestic-abuse-statistics/2020-21/domestic-abuse-incidents-and-crimes-in-northern-ireland-2004-05-to-2020-21.pdf>



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