Support for single homeless people in England

Annual Review 2018
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## Annual Review 2018

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## Produced by

The Homeless Link Research Team, March 2019

## Acknowledgements

We are grateful to all the homelessness services who took time the out of their busy schedules to complete our survey and to all those who took part in the case studies. This research is funded by the Ministry of Housing, Communities and Local Government (MHCLG).
Executive Summary

For the past 11 years, Homeless Link has produced an annual review of the available support for single homelessness in England.¹ Single homelessness people are less likely than families to be to be entitled to housing by their local authority, ² and therefore often have to rely on homelessness charities for accommodation, advice and other forms of support. This study provides vital evidence of the support provided by these services and is the only available data source of its kind of the homelessness sector in England.

The findings are based on five key data sources, including a representative survey of 362 accommodation projects and 54 day centres from across England. The findings provide a detailed overview of the nature and availability of key services, the challenges and opportunities faced by the sector, the needs and circumstances of the people accessing services, and the various ways in which the sector helps people move out of homelessness and achieve other positive outcomes in their lives.

Trends in single homelessness

- In 2018, a total of 4,677 people were estimated to be sleeping rough in England on any given night, representing a 2% decrease from the previous year.
- In April 2018–June 2018 local authorities made 11,630 main homelessness duty decisions. 1,200 people were found not to be in priority need and were still homeless at this point. The introduction of the Homeless Reduction Act has changed the landscape for single homeless people in England, with many now owed additional prevention and relief duties by their Local Authority. In April 2018 - June 2018 34,980 people were assessed as owed a prevention duty and 26,410 people were assessed as owed a relief duty.

Availability of homelessness services

- There are currently 1,085 accommodation projects in place for single homelessness in England.
- A total of 186 day centres currently operate throughout England.
- Homeless England data³ indicates that over the past year, there has been a reduction in both the number of accommodation projects (-3%) and the number of day centres (-5%).
- The number of bed spaces in accommodation projects in England has increased by 1% over the past year, and now stands at 34,900.
- 53% of responding accommodation services reported no change in funding over the period from April 2017 – March 2018, with 30% reporting a decrease, and 17% reporting an increase.

Delivery of services

- Accommodation providers and day centres provide a wide variety of services to help people address their needs. These services are delivered either in-house on the service premises, or via referral to an external agency.
- People who are homeless face difficulties in accessing mental health services.
- Services offered in-house are less likely to have access barriers than services offered externally.

¹The term ‘single homelessness’ is frequently used in the homelessness sector. It does not denote relationship status and is shorthand for ‘people who have no dependent children in their household and who are not owed a statutory homelessness duty by a local authority.’ The term can cover couples. Throughout this report we refer to single homelessness, and single homeless people. In both cases, this is the group to which we refer.
Outcomes, move on, and service development

- 82% of accommodation projects provide informal move on support.
- Among people accessing accommodation providers, moving into employment remains a challenge.
- People accessing accommodation services face significant structural barriers in moving on from homelessness services. Respondents identified the lack of affordable housing as both a contributory barrier (77%) and the main barrier (30%).  

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4 The MHCLG defines affordable housing that which includes social rented, affordable rented and intermediate housing, provided to specified eligible households whose needs are not met by the market.
Chapter 1: Introduction

For the past eleven years, Homeless Link’s national study on support provided by the homelessness sector in England, has provided crucial evidence to inform policy and practice. By exploring key trends in single homelessness and the nature and availability of support, this eleventh edition of our Support for Single Homelessness people in England: Annual Review makes an important contribution to the evidence base on single homelessness provision in England. The research aims to help service providers, commissioners, policy makers, and local authorities, understand and respond to the needs of people experiencing homelessness.

Methodology

The findings featured in this report are drawn from the following five key data sources:

1. Telephone and online survey from 362 accommodation projects (30% response rate). Key topics include: services provided, move on, funding, outcomes and client characteristics.

2. Telephone and online survey from 54 day centres (28% response rate). Key topics include: services provided, funding, outcomes and client characteristics.

3. Existing data on homelessness trends, including national statutory homelessness and rough sleeping figures as published by the MHCLG.

4. Homeless England database figures on project and bed space availability.

5. Case studies of certain projects and initiatives in England.

The Appendix (pg.47) provides further details on the survey methodology, including our sampling approach. For both accommodation providers and day centres we achieved 95% confidence intervals of ±5% and stratified each project type by region and local authority. The findings are therefore representative and generalizable to the wider homelessness sector in England.

Data accuracy

The survey asked services to provide data for the period of April 2017 – March 2018, allowing a year on year comparison with last year’s report. Certain questions ask for ‘snapshots’ of data relating to client records of ‘last night’ and ‘last year’. Within different homelessness services, amounts and methods of data collection tend to vary however, and some survey questions may therefore be based on informed estimates provided by the responding organisation, rather than exact figures (Table1).

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5 This database is managed by Homeless Link and holds information on approximately 1,271 services. Although the data is not live, it is updated regularly and considered to be the most accurate data source on homelessness services in England. Data on the availability of services and bed spaces were extracted from the Homeless England database, allowing a comparative analysis with previous publications of the Annual Review.

6 This year we revised and shortened the survey, resulting in significantly higher baseline responses for each question than was achieved in previous years.
Table 1: Data accuracy, Annual Review Survey 2018

<table>
<thead>
<tr>
<th></th>
<th>Accommodation providers</th>
<th>Day centres</th>
</tr>
</thead>
<tbody>
<tr>
<td>All exact figures</td>
<td>10%</td>
<td>9%</td>
</tr>
<tr>
<td>Mostly exact figures</td>
<td>41%</td>
<td>9%</td>
</tr>
<tr>
<td>About half and half</td>
<td>20%</td>
<td>19%</td>
</tr>
<tr>
<td>Mostly estimates</td>
<td>19%</td>
<td>31%</td>
</tr>
<tr>
<td>All estimates</td>
<td>9%</td>
<td>19%</td>
</tr>
</tbody>
</table>

Homeless England (N: 354) Day centres survey (N: 54)

Accommodation projects provided mostly exact figures, with day centres mostly providing estimates. When compared to accommodation projects, day centres often face issues that can impact their ability to collect systematic data on people accessing their services, such as: inadequate IT facilities, absence of formal key working process, limited time and reliance on volunteers.

Accommodation provider respondents

Graph 1 shows the various types of accommodation providers that responded to our survey. Most respondents were charity/voluntary or social enterprise organisations (178), organisations registered with the Homes and Communities Agency (84), and Housing Associations (75).
Chapter 2: Single homelessness in England

This Chapter provides an outline of the various categories of homelessness and explores recent evidence on trends in the numbers and geographical distribution of single homelessness in England. The findings are based on an analysis of statutory homelessness and rough sleeping data as published by the Ministry of Housing, Communities and Local Government (MHCLG).

Key headlines

- The 2017 Homelessness Reduction Act came into effect on 3 April 2018. This significantly extends the support that single homeless people are entitled to from their local authorities by introducing prevention and relief duties for those at risk of, or currently, homeless.
- In April 2018 – June 20187 local authorities made 11,630 main homelessness duty decisions.1,200 people were found not to be in priority need and were still homeless at this point.
- In 2018 the total number of people counted or estimated to be sleeping rough in England was 4,677. Whilst this is the first time in 10 years the figure has decreased (-2%), it still represents an increase of 165% since 2010.

Types of homelessness

The term ‘homelessness’ has a broad meaning and does not only cover those sleeping rough or those housed by their local authority in temporary accommodation. People experiencing homelessness face a wide array of circumstances that are captured within certain defined categories and are measured in a number of ways. The Housing Act 1996 provides a legal definition of homelessness, and states that a person is homeless if they do not have a home in the UK or anywhere else in the world. Local authorities will use this definition, alongside other key criteria (see below), to determine statutory entitlements and to allocate housing to people and families who are experiencing homelessness. The main categories of homelessness can be summed up as follows:

Statutory homelessness

This term covers all households (i.e., families or individuals) who are owed a homelessness duty by their local authority. The 2017 Homelessness Reduction Act (HRA) significantly amended homelessness legislation and expanded the definition of statutory homelessness to include those threatened with homelessness from within 28 days to 56 days. A household approaching a local authority for assistance on or after the 3 April 2018 would be assessed under different criteria than was previously the case. Local authorities are required to make inquiries into a homeless application whenever they have reason to believe that an applicant household may be homeless or threatened with homelessness within 56 days.

The Housing Act 1996 (Part VII) specifies four main groups that are defined as having priority need: households with dependent children; pregnant women; those who are threatened to become homeless

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7 The data presented here covers Apr-Jun 2018, whereas the data presented by research participants covers Apr 2017-Mar 2018. This decision was taken because data from Q4 of 2017-18 was not available at the time of analysis. This data also enables us to look at the first data released after the introduction of the Homeless Reduction Act. MHCLG live tables on homelessness available at: https://www.gov.uk/government/statistical-data-sets/live-tables-on-homelessness
because of an emergency (such as a flood); and those who are vulnerable. The 2017 HRA created new statutory duties that are owed irrespective of whether the applicant may or may not have priority need or whether they are considered to be intentionally homeless. As single homeless people do not have dependent children, it is unlikely that they will be found to be in priority need, and the 2017 HRA therefore significantly extends the help they are entitled to receive from local authorities.

Households who are statutory homeless and eligible for assistance are now owed one or more of three statutory duties:

Prevention duty: The local authority must try to prevent a household who is threatened with homelessness within 56 days, from becoming homeless (e.g., help to stay in current home);

Relief duty: The local authority must try to relieve homelessness, that is to help households who are homeless secure alternative accommodation;

Main homelessness duty: The local authority must secure accommodation for households whose homelessness cannot be prevented or relieved, if they are eligible. People are considered eligible for accommodation from their local authority if they meet the criteria set out in the Housing Act 1996: i) eligible for assistance; ii) homeless; iii) in priority need; and, iv) not intentionally homeless.9.

As mentioned above, the priority need criteria include households with dependent children, pregnant women, people threatened with homelessness due to an emergency, and those who are vulnerable. The category of ‘vulnerable’ is particularly significant for single homeless people (i.e. those without dependent children), as it is the primary way they can be found to be have in priority need and therefore entitled to the main homelessness duty. Many single homeless people requesting homelessness-related assistance from local authorities will not meet the priority need criteria and therefore will not qualify for emergency or permanent accommodation. This report explores how homelessness support services provide an alternative source of support for single homeless people.

Single homelessness

This term covers individuals or couples without dependent children who are homeless but are unlikely to meet the priority need criteria of homelessness legislation (see above) and therefore do not qualify for temporary or permanent accommodation from their local authority. Many people experiencing single homelessness will stay in short-term accommodation (e.g., hostels, shelters and temporary supported accommodation) provided by the voluntary homelessness sector, while others may end up sleeping rough or remain hidden.10

Hidden homelessness

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8 The Homelessness (Priority Need for Accommodation) (England) Order 2002, extended the definition of ‘vulnerable’ to include: mental health problems; physical or learning disabilities; old age; leaving prison or the Armed Forces; care leavers; being at risk of violence (or threats of violence); other special reasons.


Many single homeless people are out of sight in squats, sleeping on someone’s floor, sofa-surfing with friends, sleeping on night buses/underground trains/airports or sleeping rough in concealed locations.\textsuperscript{11} These individuals will often be hidden from available services and as a result will not receive the advice and support that they need. Whilst people experiencing hidden homelessness are generally not captured in official statistics\textsuperscript{12}, research suggests that a significant number of single homeless people will have experiences of hidden homelessness.\textsuperscript{13}

**Rough sleeping**

This term covers the experience of people who sleep outside or in buildings or places that are unfit for human habitation (e.g., car parks, cars, stations, doorways).\textsuperscript{14} This is the most visible form of homelessness and is a dangerous and isolating experience that can have a severely detrimental impact on an individual’s physical and mental health and wellbeing. Within the context of an upward trend in the number of people sleeping rough between 2010 and 2017, the Government has committed to halving rough sleeping during the course of this parliament and ending it altogether. The cross-government Rough Sleeping Strategy 2018 sets out an ambitious £100m package to help people who sleep rough now and put in place the structures that will end rough sleeping once and for all. The strategy is built around three core pillars\textsuperscript{15}:

- Preventing rough sleeping by providing timely support to those at risk;
- Intervening to help people already on the streets get swift, targeted support;
- Helping people recover, find a new home quickly, and rebuild their lives.

**Homelessness trends**

Different definitions of homelessness, the lack of a single approach to measuring single homelessness, and the hidden and mobile nature of many people’s experiences, make quantifying single homelessness particularly challenging.

Until recently local authorities have not been required to record the scale or needs of single homeless people, with the result that official statistics (based on a P1E returned from each local authority) are likely to have underestimated the issue. The Homelessness Reduction Act 2017, (implemented 3 April 2018) changed the way local authorities collect data on statutory homelessness. In April 2018, the new Homelessness Case Level Information Collection (H-CLIC) replaced the P1E aggregated data return. H-CLIC includes more details on people’s support needs, reasons for becoming homeless, length of time in temporary accommodation and outcomes of each prevention case. The broader definition of homelessness beyond those only defined as in priority need, means that more information will be available on other households, including single homeless people.

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\textsuperscript{12} Some data sources, i.e. the English Housing Survey do attempt to collect information about some elements of hidden homelessness i.e. sofa surfing, however due to the nature of hidden homelessness this will not be able to identify everyone.


\textsuperscript{14} Since 2010, national rough sleeping statistics have used the following definition: ‘People sleeping, about to bed down (sitting on/in or standing next to their bedding) or actually bedded down in the open air (such as on the streets, in tents, doorways, parks, bus shelters or encampments). People in buildings or other places not designed for habitation (such as stairwells, barns, sheds, car parks, cars, derelict boats, stations, or “bashes”).’

**Statutory homelessness**

Government statutory homelessness statistics can be used to understand short and long-term trends in homeless households who approach their local authority and are assessed or granted assistance. People considered to be ‘not in priority need’ by their Local Authority will most likely to be single homeless people (see above).

Quarter 2, April to June 2018 Homelessness Statistics, is the first statutory data set released by the MHCLG using H-CLIC data\(^{16}\). The figures are not directly comparable with previously published statutory data, so the following data is based on quarter 2 2018 only.

- Between April – June 2018, 64,960 homelessness assessments were made under the new prevention and relief duties. A total of 58,660 people were assessed as being owed a statutory duty. 33,330 (57%) were owed a prevention duty, 25,330 (43%) were owed a relief duty.

- In April 2018 – June 2018 local authorities made 11,630 main homelessness duty decisions. 6,670 were accepted as being owed the main duty. 1,200 people were found not to be in priority need.

- Of the 58,660 households owed a homelessness duty, 27,580 were identified as having support needs. The most common support need was mental health, which was reported by 12,700 households.

- The most common accommodation type at the time the household approached the local authority, was private renting (17,570), followed by living with family (13,700 households).

- Of those who were assessed as being owed a duty 1,540 people were deemed to be rough sleeping at the time of making a homeless application, and a total of 3,230 people had a history of rough sleeping.

- The most common reason for becoming homeless was the end of an assured shorthold tenancy (14,150 households), followed by friends or family being no longer able or willing to accommodate (10,490 households).

**Rough sleeping**

Local authorities in England carry out an annual snapshot count or estimate of the number of people sleeping rough on a single ‘typical’ night in Autumn (October to November). These statistics provide a snapshot figure of those sleeping rough across local authorities in England.

Local authorities decide which approach to use to determine the number of people sleeping rough in their local area on a single night. This could be either a street count of visible rough sleeping, an evidence-based estimate, or an estimate informed by a spotlight street count, where a street count is undertaken in particular locations on the chosen night. All of the available methods record only those

\(^{16}\) MHCLG caution that there may be some misreporting as Local Authorities adjust to the new system of collecting and reporting data. Further information can be found on the contents page of the live tables available at:

people seen, or thought to be, sleeping rough on a single ‘typical’ night. They do not include everyone in an area with a history of sleeping rough, or everyone sleeping rough in areas across the October-November period.

In Autumn 2018, the ongoing upward trend in levels of rough sleeping was reversed, with 4,677 people counted or estimated by local authorities to be sleeping rough. This represents a 2% decrease from 2017 (Table 3) and was the first time in ten years that the number of people sleeping rough on a single night decreased. The figures do however still show an increase of 165% since the current methodology for measuring rough sleeping was introduced in 2010.

### Table 2: Rough sleeping in England 2010 – 2018

<table>
<thead>
<tr>
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<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of rough sleepers</td>
<td>1,768</td>
<td>2,181</td>
<td>2,309</td>
<td>2,414</td>
<td>2,744</td>
<td>3,569</td>
<td>4,134</td>
<td>4,751</td>
<td>4,677</td>
</tr>
</tbody>
</table>

### Table 3: Rough sleeping in England 2010 - 2018

<table>
<thead>
<tr>
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<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Percentage change</td>
<td>+165%</td>
<td>+114%</td>
<td>+103%</td>
<td>+94%</td>
<td>+70%</td>
<td>+31%</td>
<td>+13%</td>
<td>-2%</td>
</tr>
<tr>
<td>Numerical change</td>
<td>+2909</td>
<td>+2496</td>
<td>+2368</td>
<td>+2263</td>
<td>+1933</td>
<td>+1108</td>
<td>+543</td>
<td>-74</td>
</tr>
</tbody>
</table>

### Regional trends in rough sleeping

There are regional variations in the numbers of people seen sleeping rough. London and the West Midlands saw the greatest increase in the number of people seen rough sleeping in 2018 when compared to 2017 (Graph 2). The South East and East of England saw the largest decreases in rough sleeping in 2018, when compared to the previous year (Graph 2).

### Graph 2: Number of rough sleepers in England, by region, 2017 - 2018

In terms of overall distribution of rough sleeping across England, London and the South East reported the highest number of rough sleepers, with the North East reporting the lowest numbers (Table 4)
### Table 4: Rough sleeper regional distribution

<table>
<thead>
<tr>
<th>Region</th>
<th>% of total</th>
</tr>
</thead>
<tbody>
<tr>
<td>North East</td>
<td>1</td>
</tr>
<tr>
<td>North West</td>
<td>9</td>
</tr>
<tr>
<td>Yorkshire &amp; the Humber</td>
<td>5</td>
</tr>
<tr>
<td>East Midlands</td>
<td>8</td>
</tr>
<tr>
<td>West Midlands</td>
<td>9</td>
</tr>
<tr>
<td>East England</td>
<td>10</td>
</tr>
<tr>
<td>London</td>
<td>27</td>
</tr>
<tr>
<td>South East</td>
<td>20</td>
</tr>
<tr>
<td>South West</td>
<td>10</td>
</tr>
</tbody>
</table>

**Figure 1: Heat map of rough sleeper regional distribution**
Chapter 3: Availability of homelessness services

This Chapter explores the availability of accommodation services and day centres in England. Drawing on findings from analysis of the Homeless England database and the survey with services from across England, it discusses key characteristics of existing provision and changes in this provision over the past year. The final section discusses the sector’s resources and capacity.

Key headlines

- There are currently 1,085 accommodation projects for single homeless people in England.
- A total of 186 day centres currently operate throughout England.
- Over the past year, there has been a reduction in the number of day centres (-5%).
- The number of bed spaces in England (34,900) has increased by 1% from last year.
- The number of accommodation services (1,085) has decreased by 3% from last year.
- 53% of accommodation providers reported no change in funding since last year, 30% reported a decrease, and 17% reported an increase.
- The main funding source for accommodation projects comes from housing benefit (48%). The main source of funding for day centres comes from charitable grants (37%).

Definitions

Homelessness provision is described in various ways, and accommodation projects and day centres differ in size, as well as in the level and nature of support offered. The following definitions cover the key features of both forms of provision:

**Accommodation projects**

These services provide both short and long-term accommodation and generally aim to support people to prepare for independent living. Examples of accommodation projects include foyers, supported housing schemes and hostels. The level of support, access criteria, and target groups vary between projects. Some services offer lower level support; this is usually for those who are homeless or in housing need but otherwise fully capable of independent living. Other services offer high-level support for those who have support needs besides their accommodation needs and often face a number of barriers to independent living. Not included in this report are night shelters, No Second Night Out Assessment Hubs, emergency accommodation such as winter shelters, and specialised services that specifically target people with needs relating to substance use, mental health, and offending.17

**Day centres**

Day centres offer non-accommodation-based support for those sleeping rough and/or those who are either experiencing or at risk of other forms of homelessness. Day centres are usually provided and run by voluntary, faith or community organisations18 and have often emerged in response to a local need. The way individual projects are set up will be informed by varying histories, working ethos, and key principles, and will operate in different ways. The following case study is an example of co-production and partnership-working in day centres (see Case Study 1).

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17 These measures are excluded due to the fact that they are unable to answer most of the survey questions.
18 Findings from a survey of 124 day centres, showed that the majority were run by voluntary sector homelessness organisations (43%) or religious organisations (27%). [Link to survey findings]
Case Study 1: The Connection at St. Martins, Seymour Place (WLM) and The Passage - Day Centre Collaboration Project

The Day Centre Collaboration Project began in July 2018 as an initiative to explore improved collaborative working between three of the largest day centre services for homeless people in Westminster: The Connection at St. Martins, Seymour Place (WLM), and The Passage. The following factors have prompted these day centres to work towards a more collaborative approach:

1. The number of homeless people in Westminster has increased in recent years, with day centres needing to better support each other to manage this increase and effectively help people recover and move on from homelessness.

2. Day centres have always had their clients at the heart of their projects, but there is increased emphasis on co-production. For example, in the Westminster day centre clients are involved in staff recruitment, while also participating in meetings to voice their concerns and help shape the centres. The Westminster day centres seek to develop and improve upon this good practice by working in closer cooperation.

3. The centres aim to work more consistently towards a better understanding of each other and forging good relationships with each other and with all services relevant to their clients.

4. Sharing delivery of some services can help avoid unnecessary costs whilst retaining a consistently good service for their shared client group.

So far the three centres have met regularly to gather and compare information about each service. The day centres are broadly looking at two things: how clients experience the services, and how monitoring and casework systems compare. The next stage will involve carrying out a research project based on the newly revised Psychologically Informed Environment (PIE) framework. The project will examine how services currently implement the principles of PIE and ultimately how they can improve upon this work. Interested clients will have the opportunity to train in research methods and take on roles as peer researchers to support the project.

The project hopes to apply the knowledge gained to pursue more collaborative working, such as joint groups and activities, sharing resources (e.g. venues, equipment and staff expertise), and an appropriately designed casework system to include some shared elements across each service.

At the end of the project, the aim is to share the learning of the collaboration project with other homeless services across London and eventually with services across the country.
Data from the Homelessness England database identifies 1,085 accommodation projects for single people who are homeless in England, representing a 3% decrease from the previous year’s figure of 1,121. The number of homelessness day centres has also decreased by 5% to a total of 186.

Bed spaces in accommodation projects have increased by 1% to a total of 34,900. The increase in bed spaces could be due to several factors, such as organisations merging, leading to a decrease in the number of projects but a higher number of bed spaces. In addition, the Government’s Rough Sleeping initiative is delivering over 1,500 new bed spaces across the country in areas where rough sleeping is most prevalent. It is important to highlight that, although the number of bed spaces has risen slightly since last year, this year’s figure of 34,900 represents an overall decrease of 20% since 2010 (when the total number was 43,655).

The map below shows that the scale of provision for single homeless people is characterised by significant geographical diversity. London, North East, West Midlands and East Midlands have had an increase in the number of bed spaces. On the other hand, London is the only region to have an increase in the number of accommodation projects. Whilst last year Yorkshire and Humberside had an increase in bed spaces, this year they have experienced a decrease of 6%. The number of day centres has stayed the same in most areas, with the exception of Yorkshire and the Humber (-6%) and London (-18%).

Figure 2: Heat map of bed spaces in England, by region

<table>
<thead>
<tr>
<th>Region</th>
<th>Bed spaces</th>
<th>Projects</th>
<th>Day centres</th>
</tr>
</thead>
<tbody>
<tr>
<td>North East England</td>
<td>1,497 (+1%)</td>
<td>55 (-4%)</td>
<td>6 (0%)</td>
</tr>
<tr>
<td>North West England</td>
<td>3,567 (-1%)</td>
<td>142 (-3%)</td>
<td>25 (0%)</td>
</tr>
<tr>
<td>Yorkshire and the Humber</td>
<td>3,576 (+7%)</td>
<td>99 (-2%)</td>
<td>12 (0%)</td>
</tr>
<tr>
<td>West Midlands</td>
<td>8,784 (+6%)</td>
<td>183 (+6%)</td>
<td>41 (-18%)</td>
</tr>
<tr>
<td>East Midlands</td>
<td>3,636 (0%)</td>
<td>147 (-5%)</td>
<td>20 (0%)</td>
</tr>
<tr>
<td>South East England</td>
<td>4,734 (-3%)</td>
<td>156 (-4%)</td>
<td>37 (-0%)</td>
</tr>
<tr>
<td>London</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Availability of accommodation projects by gender

Total in England: Number ± % change on previous year:
- Bed spaces: 34,900 (+1%)
- Accommodation projects: 1,085 (-3%)
- Day centres: 186 (-5%)

Source: Homeless UK database, December 2018
A total of 77% of homelessness accommodation projects in England provide mixed accommodation, with others offering men (12%) or women-only accommodation (11%). Compared to last year, there has been a reduction of 8% in the number of mixed projects, and an increase of 4% each for men and women-only projects.

**Graph 3: Accommodation projects, by gender**

![Pie chart showing the distribution of accommodation projects by gender.]

- Mixed: 77%
- Men only: 12%
- Women only: 11%

**Source: Homeless England**

**Availability of youth-specific projects**

Since the causes, experiences and consequences of youth homelessness often differ from those of adults, the policy and practice responses should also be different. In England, there are 432 services specifically for young people aged 16-25 (40% of total). Although slightly lower than last year, this number still reflects a high proportion of youth-specific projects providing support that is tailored to the needs of young people who are homeless or at risk of homelessness.

**Bed night voids**

To create a picture of the level of demand, the accommodation survey asked respondents whether they had any voids (empty beds) the previous night. Some providers are contracted to provide a certain number of beds to meet particular groups such as rough sleepers.

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Graph 4: Bed night voids

N: 356

- 356 respondents reported in aggregate a total of 784 voids.
- 43% of reported voids were due to maintenance or refurbishment.
- A total of 67 projects (19% of respondents) reported 1 void, which was the most common number of voids.
- 152 projects (43% of respondents) were operating at full capacity (i.e., reported 0 voids)

Given the low rate of voids overall and a high percentage due to maintenance or refurbishment work, the findings suggest there is limited spare bed capacity within the homelessness sector in England.

Funding

The survey explored how accommodation providers and day centres in England are funded and how this has changed over the past year. The majority of accommodation providers reported receiving some funding from Housing Benefit (89%), rent and service charges (75%) and housing-related support (formerly supporting people) (71%). The most common source of funding for accommodation providers is Housing Benefit (89%) (Graph 5).
Most accommodation projects reported that since 2017 their funding has remained the same (53%). A smaller proportion reported a decrease (30%) or an increase (17%) in funding (Graph 6).

The survey explored the effects of funding changes on the services provided by accommodation projects (Graph 7). It is encouraging to note that accommodation providers were more likely to report an increase in bed spaces (18%) rather than a decrease (8%). Over a fifth (22%) reported an increase in volunteers and 30% reported an increase in the skills level of staff. However, accommodation providers also reported a range of negative impacts, such as a reduction in overall staffing capacity (36%), in the provision of support (23%).
(i.e. a reduction in key working support, or wellbeing activities provided by the service), and in their ability to support clients with complex needs (21%). In the open text responses many accommodation services expressed frustration about the lack of funding and the resultant effects on the support provided:

‘We need to be supported, we need to be paid a decent wage, we need co-operation with partner agencies, resources, we need more staff, everyone needs more resources at the moment, and that’s internal and external’. (In-text response)

‘I think staff are doing a good job considering lack of funding. We need more staff time per client and more flexible services to refer into. Staff could improve their use of measurement tools to be able to better demonstrate their work.’ (In-text response)

**Graph 7: The effects on services after funding change**

<table>
<thead>
<tr>
<th>Skill level of staff</th>
<th>Use of volunteers</th>
<th>Provision of support (e.g. key working, activities)</th>
<th>Overall staffing capacity</th>
<th>Ability to support clients with complex needs</th>
<th>Total Number of bed spaces</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Number of bed spaces</td>
<td>Ability to support clients with complex needs</td>
<td>Overall staffing capacity</td>
<td>Provision of support (e.g. key working, activities)</td>
<td>Use of volunteers</td>
<td>Skill level of staff</td>
</tr>
<tr>
<td>No change</td>
<td>73%</td>
<td>60%</td>
<td>41%</td>
<td>56%</td>
<td>68%</td>
</tr>
<tr>
<td>Decreased</td>
<td>8%</td>
<td>21%</td>
<td>36%</td>
<td>23%</td>
<td>9%</td>
</tr>
<tr>
<td>Increased</td>
<td>18%</td>
<td>18%</td>
<td>24%</td>
<td>21%</td>
<td>22%</td>
</tr>
</tbody>
</table>

**N: 169**

**Day centre funding**

Compared to accommodation providers, day centres are much less likely to receive funding from statutory sources (Graph 8). The majority of day centres receive some funding through fundraising and donations (91%) or charitable grants (81%) (Graph 9). A higher proportion of day centres also report receiving contributions from corporate/businesses (57%).
Graph 8: Funding proportion for day centres

- Charitable grants: 76%
- Local Authority: 20%

N: 49

Graph 9: Funding sources for day centres

- Charitable grants
- Local Authority
- Corporate/Businesses
- Housing-related support
- Health
- Criminal Justice
- Social Investment
- Registered social provider
- Adult social Care
- Children’s services
- Local Authority homeless prevention grant
- Fundraising and donations
- Other (Please specify)

Main funding (n: 52)  Some funding (n: 54)

Since the last financial year, 39% of day centres have not experienced any change in funding, whilst 37% experienced an increase and 24% a decrease.
The survey explores the effect of funding changes on day centres services. Just over half of day centres (n: 34) reported an increase in the use of volunteers (56%) and just under half the respondents reported an increase in the total number of clients (44%). However, a number of day centres (29%) also reported a decrease in overall staffing capacity (i.e. number of staff employed by an organisation).

<table>
<thead>
<tr>
<th></th>
<th>Use of volunteers</th>
<th>Total number of clients</th>
<th>Skill level of staff</th>
<th>Overall staffing capacity</th>
<th>Provision of support (e.g. opening hours, key working, activities)</th>
<th>Ability to support clients with complex needs</th>
<th>Other</th>
</tr>
</thead>
<tbody>
<tr>
<td>No change</td>
<td>41%</td>
<td>44%</td>
<td>56%</td>
<td>32%</td>
<td>53%</td>
<td>59%</td>
<td>44%</td>
</tr>
<tr>
<td>Decreased</td>
<td>0%</td>
<td>9%</td>
<td>0%</td>
<td>29%</td>
<td>12%</td>
<td>9%</td>
<td>0%</td>
</tr>
<tr>
<td>Increased</td>
<td>56%</td>
<td>44%</td>
<td>41%</td>
<td>35%</td>
<td>32%</td>
<td>29%</td>
<td>21%</td>
</tr>
</tbody>
</table>

N: 34
Chapter 4: Use and delivery of services

This Chapter explores the characteristics and support needs of single homeless people. Drawing on findings from the day centre and accommodation survey, this Chapter looks at the main services provided by homelessness organisations, and the barriers homeless people face in accessing support.

Key headlines

- The majority of single homeless people accessing accommodation (66%) and day centres (78%) are male.
- The proportion of women accessing accommodation (24%) and day centres (17%) remains relatively low.
- 30% of people accessing accommodation services and 14% of those accessing day centres are young people aged 18-25.
- Mental health is the most common support need of those accessing day centres and accommodation services.
- Homelessness accommodation providers and day centres provide a wide array of services - from life skills to basic needs provision.

Single homeless people: characteristics

The survey asked accommodation providers to provide socio-demographic information about those accessing their services ‘last night.’ The findings indicate that the majority of homeless people accessing accommodation projects (66%) as well as day centres (78%) are men (Graph 12 & 13). Research has however shown that both women\(^1\) and young people\(^2\) (aged 16-24) will tend to stay in ‘hidden homeless’ situations (e.g. sofa surfing) rather than access services. Many single homeless women and young people may therefore not be captured in statistics.


\(^2\) Homeless Link (2018) Young and Homeless 2018, Available at: https://www.homeless.org.uk/sites/default/files/site-attachments/Young%20and%20Homeless%202018.pdf
The findings from this year’s study indicate the following socio-demographic trends: accommodation providers support more young people (30%) than older people (16%). Day centres support a greater proportion of older people (29%) than young people (14%). When compared to accommodation services (24%), women are less likely to access day centres (17%).

People sleeping rough access day centres (43%) at a much higher rate than accommodation projects, which serves to illustrate the role of day centres in providing services to people who are visibly homeless. The proportion of people who identify as lesbian, gay, bisexual and transgender plus (LGBT+) should be treated with caution as previous research suggests that LGBT+ people are over-represented in the UK homelessness population, and accurate recording of sexual identity may not be common practice within services.23
Single homeless needs: Support needs

Service providers were asked for information on the support needs of people accessing their services ‘last night.’ Only 4% of the accommodation providers reported that all their residents had no support needs other than housing needs. In contrast, 54% of accommodation providers responded that all their residents had support needs beyond their accommodation needs. This finding indicates that many single homeless people have additional support needs besides their need for housing.

Graph 14: Accommodation clients with no needs beyond their accommodation need

<table>
<thead>
<tr>
<th>% of respondents</th>
<th>None</th>
<th>A few</th>
<th>Some</th>
<th>Most</th>
<th>All</th>
</tr>
</thead>
<tbody>
<tr>
<td>N: 355</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Mental health issues are the most commonly reported support need experienced by people accessing accommodation providers (43%) as well as day centres (49%), reflecting earlier studies showing that mental health problems are particularly prevalent among people experiencing homelessness (Graph 15 & 16). 24

Complex needs are also common among people accessing day centres (45%) as well as accommodation providers (30%). Complex needs are defined in this study as experiencing two or more of the following support needs: mental health, alcohol or drug abuse, learning difficulties, or offending behaviour.

Substance misuse can be a cause or a consequence of people becoming homeless, and accommodation providers reported that 31% of people accessing their services faced drug issues, and 24% faced alcohol issues. Day centres reported that 39% of their clients experienced alcohol problems, and 36% had drug problems.

The number of people presenting with a dual diagnosis of both mental health and substance abuse issues was high among both accommodation providers (23%) and day centres (37%). Other research has shown that people experiencing homelessness who have a dual diagnosis face significant difficulties in accessing counselling and other mental health services. 25

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Graph 15: Support needs of accommodation project residents

- People affected by modern slavery: 1%
- Women affected by sexual or domestic violence: 6%
- People with learning difficulties: 8%
- People with a physical health issue or disability: 13%
- People with dual diagnosis: 23%
- People with alcohol issues: 24%
- People with complex or multiple needs: 30%
- People with drug issues: 31%
- People with mental health issues: 43%

N: 317

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Previous research has shown that many single homeless people have faced significant disadvantages, such as experiences of trauma, complex trauma, and adverse childhood experiences. The following case study provides an example of how providers can adapt their practice to effectively support people with experiences of trauma.

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Case study 2: St Ignatius – Trauma Informed Care

St. Ignatius Housing Association has been providing accommodation-based support in Haringey for vulnerable single homeless people for over 25 years. St Ignatius have reviewed the environment and the impact of trauma and made changes to their service as identified by clients. This approach has led to an increase in levels of engagement and a decrease in failed tenancies.

St Ignatius is part of Haringey’s Single Homeless Pathway, offering 57 units across 13 sites in the borough. They provide support, training, education, mentoring and life skills coaching for single homeless people who have a local connection to Haringey. St Ignatius supports clients through a move on programme to help them access independent accommodation in the private sector. Over several years they have built up good relationships with private landlords who understand the challenges homeless people face in finding affordable accommodation.

St Ignatius has recently adopted a Psychological Informed Environment (PIE) approach to working with their clients. As part of this process clients are invited to attend meetings with the commissioning team and staff from external organisations to look at how best to address trauma and its impact on their lives. Clients also attend Haringey Council’s ‘Experts by experience Panel’ to describe experiences of street homelessness, and St Ignatius have YPA clients working with the Commissioning team in Haringey to design a trauma informed Young People Supported Housing Pathway.

Clients are at the heart of decision making in regard to their safety and what it means for them to be safe. Following the adoption of PIE, house rules have been replaced with ‘safety agreements,’ and ‘my safety plan’ has been introduced. The service has replaced warnings with ‘Back on track’ and ‘Stay on track’ agreements. Their focus has shifted from Neighbour Disputes, Noise Nuisance and Anti-Social Behaviour (ASB) to Trauma Informed care (TIC).

Whilst initially more time consuming, this approach has brought various benefits, such as less sanctions and less breaches of the clients’ licence agreements. Feedback from clients on the use of this approach has been positive.
Service Provision
Accommodation providers and day centres provide a range of services to help single homeless people address their support, care, and practical needs. Most services report not being equipped to meet all clients’ needs directly and will often work in partnership with other voluntary or statutory organisations to provide a wide range of support services. These services can be provided in-house at the services’ premises, externally at another service, or both.

Among accommodation providers, services that address basic needs (75%), life skills services (67%), and move on and resettlement support (73%), are usually provided in-house. Physical health (75%), mental health (73%), alcohol (71%), and drug (70%) services are mostly provided externally. Welfare advice (45%) and employment training (39%) were provided both externally and internally (Graph 17).

This year providers were asked about the availability of support for women who had been affected by sexual or physical abuse, and 15% of the respondents reported that this service was not available.\(^\text{27}\)

Graph 17: Service provision at accommodation projects

<table>
<thead>
<tr>
<th>Service Provision</th>
<th>Not available</th>
<th>In house and external referral</th>
<th>External referral</th>
<th>Provided in house (directly or by partner)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Address basic needs, e.g. food</td>
<td>2%</td>
<td>18%</td>
<td></td>
<td>75%</td>
</tr>
<tr>
<td>Support for women affected by sexual or domestic</td>
<td>4%</td>
<td>15%</td>
<td>28%</td>
<td>48%</td>
</tr>
<tr>
<td>support</td>
<td>0%</td>
<td>10%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Support with resettlement and move on</td>
<td>4%</td>
<td>24%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Life skills, e.g budgeting</td>
<td>2%</td>
<td>27%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Individual employment &amp; training support</td>
<td>4%</td>
<td>32%</td>
<td></td>
<td>39%</td>
</tr>
<tr>
<td>Welfare &amp; debt advice</td>
<td>4%</td>
<td>27%</td>
<td></td>
<td>37%</td>
</tr>
<tr>
<td>Meaningful activity, e.g sports</td>
<td>4%</td>
<td>26%</td>
<td></td>
<td>36%</td>
</tr>
<tr>
<td>Education Services</td>
<td>4%</td>
<td>14%</td>
<td></td>
<td>26%</td>
</tr>
<tr>
<td>Physical Health Services</td>
<td>0%</td>
<td>14%</td>
<td></td>
<td>26%</td>
</tr>
<tr>
<td>Mental Health Services</td>
<td>2%</td>
<td>12%</td>
<td></td>
<td>26%</td>
</tr>
<tr>
<td>Alcohol Services</td>
<td>4%</td>
<td>19%</td>
<td></td>
<td>19%</td>
</tr>
<tr>
<td>Drug Services</td>
<td>4%</td>
<td>19%</td>
<td></td>
<td>19%</td>
</tr>
</tbody>
</table>

N: 362

Among day centres, basic need provision is the most commonly provided service (93%), highlighting the role these services play in meeting people’s immediate needs. A significant proportion also reported that they directly provide meaningful activities (69%), move on support (60%), and welfare and debt advice (56%) (Graph 18). These findings demonstrate the important role of day centres in offering not only basic provisions, but also a wide range of services that help tackle the complex underlying issues associated with homelessness and rough sleeping.

\(^{27}\) For further information see forthcoming - Research to explore approaches to supporting homeless women facing multiple disadvantage, Young and Horvath (2019)
The survey findings show that individual employment and training support is part of the service provision at both day centres (37% in house) and accommodation services (27% in house). The following case study demonstrates good practice in this area and provides an example of how social enterprise can support single homeless people to move closer to the labour market.
Case Study 3: Julian House (Bath)

Julian House provide a range of accommodation and support services for people who are socially excluded, such as people sleeping rough, people involved in the criminal justice system, families or individuals escaping domestic abuse, people with mental and/or physical health issues, and people who are long-term unemployed.

Julian House has been supporting vulnerable people for more than 30 years in Bath and are committed to sharing their learning and expertise. One of their primary aims is to upskill communities, the wider voluntary sector, and their own staff and volunteer teams, thereby ensuring consistency in the support offered. To achieve this, their training opportunities are offered to others who are working and volunteering in the sector and wider community. The service reports that it takes some coordination to ensure that rough sleepers and vulnerable people are supported by individuals trained in areas such as Trauma Informed Care, effectively dealing with difficult and dangerous behaviour, and Safeguarding. Almost 100 staff and volunteers from other organisations and the community are trained per year and the service expects this to increase year by year.

The Bike Workshop Project at Julian House is a project that highlights how social enterprise can encourage reintegration and make a difference for homeless people. The workshop provides training and work experience opportunities for people with histories of homelessness, allowing them to gain job skills and specialist training on bike maintenance, and in turn help them gain confidence and work towards moving into employment.

The Bike Workshop is a growing chain of bike shops offering affordable bike sales and servicing. In 2017-2018, after a successful crowdfunding initiative, a fifth store was opened and more bikes were fixed, donated and sold, which helped to improve the employment prospects of vulnerable homeless people. The Bike Workshop Project generated £414k in sustainable trading income and £554k in social value training in 2017-2018 (as calculated by the Housing Association Charitable toolkit). Unlike most employment, voluntary or training programmes, this project does not ask people to address all their complex needs before they can access the flexible programme. In 2017-18, 22 clients secured paid employment with support from Julian House Bike Workshop.
Barriers to accessing services

The survey explored the barriers that single homeless people face in accessing services. Accommodation providers most commonly reported refusing access to their services as a result of too high risk (83%) or too high need (77%) assessments (Graph 19). These findings support other research indicating that people with multiple and complex needs can face significant barriers in accessing support.28

Lack of bed spaces was identified as the most common main reason for refusing access to the service (40% of respondents), in turn indicating that demand for accommodation and support from the homelessness sector surpasses available capacity. Accommodation providers are unlikely to refuse access to a service because client needs are too low or on the basis of drugs/alcohol intoxication (Graph 19).

Graph 19: Reasons for refusing access or referrals to the service

Too high-risk assessments are also a key factor for refusing access to day centres, with 75% of services identifying this as a reason for refusing access (Graph 20). Day centres are unlikely to refuse people access because their needs are too high, and only 23% reported having turned people away for this reason. 77% did report that they may refuse access to people who are intoxicated on drugs or alcohol. Day centres almost never turn people away on the basis of limited capacity, low support needs, or having no recourse to public funds.

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Homelessness services will work with a variety of external partners, including but not limited to: adult social care, learning disability services, employment, education and training support services, the criminal justice system and women’s services. This in turn allows a wide range of needs to be met. Day centres reported that people using their services were most likely to face problems in accessing mental health (65%) and drug and alcohol services (35%) (Graph 21).

Graph 20: Most common reasons for day centres refusing access or referrals

Graph 21: Problems accessing services for day centre clients

N: 54

Homeless Link’s previous Annual Review reports (2015 – 2018) have consistently shown that people with high and complex needs face significant barriers in accessing services. This year’s survey asked providers to provide reasons for refusing access to this client group, with both accommodation providers (88%) and day centres (90%) reporting that the risk posed to staff, clients, and their visitors is the main reason that they may refuse access. Lack of staff resources and lack of staff training to deal with people presenting with high or complex needs were also identified as key reasons (Graph 22).

Graph 22: Reasons why clients with complex/high needs are refused access or referral

In an open text question, accommodation providers were asked to comment on the barriers that people experiencing homelessness face in accessing services. Many respondents said that clients face significant barriers in accessing mental health services, which were reported to be over-stretched and operating with high thresholds and long waiting lists. Clients in rural areas were reported to face particular barriers due to transport barriers. Having a dual diagnosis of both mental health and drug/alcohol addiction, was identified as another key barrier in accessing these services:

‘The only barrier is that the mental health services are very overstretched and getting them to engage with our clients is difficult.’ (In-text response)

‘The distance they have to travel, and a lack of finances. Being in a rural community means there are not as many services as a major town.’ (In-text response)

‘The key one is the mental health one. The issue they need to be working with the mental health people, but they decline the person due to misuse.’ (In-text response)

‘A high threshold for mental health services. The reason it is a high threshold is that there is a lack of resources and a very small amount of services, which are incredibly stretched. One of the issues is that if they don’t engage with the external services, then there cut off point.’ (In-text response)


Homeless Link Support for single homeless people in England: Annual Review 2018 34
Chapter 5: Outcomes, move on, and service developments

The main aim of homelessness services is to support people to develop the skills and abilities to move out of homelessness and into independent living. This Chapter draws on the accommodation survey findings to explore key trends in relation to move on and the process of recording outcomes. This final section will examine key approaches and models adopted by the sector.

Key headlines

- The majority of accommodation services record outcomes achieved by individuals accessing their services (95%).
- In April 2017 – March 2018, 49% of people accessing accommodation providers moved on positively from services. 19% exited in an unplanned move.
- 75% of accommodation providers in England continue to support individuals after they move on from services.
- 77% of accommodation providers in England report that lack of affordable housing is preventing people from moving on from their services.

Outcomes

Outcomes are the changes that take place as a result of interventions and services. The findings suggest that the majority of homelessness organisations use outcomes to measure changes in the individuals accessing their services (Graph 23).

Graph 23: Do you currently record information about client outcomes?

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
<th>Don’t Know</th>
</tr>
</thead>
<tbody>
<tr>
<td>N: 362</td>
<td>95%</td>
<td>4%</td>
<td>1%</td>
</tr>
</tbody>
</table>

Collecting and analysing outcomes provides essential evidence of the impact of the services for individuals, and whether services are meeting their targets. 90% of accommodation providers (308 services) reported using outcomes to demonstrate the effectiveness of their services.

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Other research has shown considerable diversity in the range of outcomes collected and measurement tools that are used by homelessness services. This study indicates that homelessness services also draw upon a range of processes and collaborations to develop outcomes measures, with over half of the respondents (60%) using the original Supporting People Outcomes Framework (including the quality assessment framework) and the Outcomes Star (58%) (Graph 24). A significant proportion of services also reported drawing on consultation with clients (51%) and staff (48%), which indicates that the development of outcome measures is often a collaborative process.

**Graph 24: How did you develop these outcomes measures? Tick all that apply.**

- Other: 16%
- In-Form/Salesforce: 24%
- Local authority: 34%
- Developed in collaboration with commissioner/funder: 37%
- Based on targets required by funder: 39%
- Through partnership working with external agencies: 40%
- Through consultation with our staff: 48%
- Set by commissioner/funder: 50%
- Through consultation with our clients: 51%
- Outcomes Star: 58%
- Based on supporting people outcomes: 60%

N: 346

Accommodation providers were asked to report on the outcomes achieved by their residents over the past 12 months (Graph 25). The findings suggest that preventing clients from becoming homeless is the most commonly achieved outcome. This can cover tertiary homelessness prevention, which targets people who are already affected by homelessness and focuses on minimising repeat homelessness.

A number of respondents also reported that over the past 12 months, all or most of their clients had improved physical health (55%) and mental health (41%). 46% said all or most had reduced offending, and 35% said that all or most of their clients better managed their drug or alcohol intake. These findings illustrate the wide range of benefits for those accessing homelessness services.

The responses however suggest that accessing employment can be difficult for those experiencing homelessness. Employment support can be less well embedded in-service delivery than other support services, rent levels in hostels can pose a significant barrier to accessing employment and when people lack a stable and settled home it can be very difficult to find and maintain employment. Homelessness can also create or exacerbate a range of other issues that make it difficult to access or maintain employment.

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32 Homeless Link (2017) *Measuring Outcomes in Homelessness Services: A Scoping Exercise*

33 *All Supporting People funded services were requested to provide information under five high level outcomes, including: economic wellbeing, enjoy and achieve, be healthy, stay safe, and make a positive contribution.*

34 Homeless Link (2017) *Preventing homelessness before it begins: case studies from the homelessness sector,* [https://www.homeless.org.uk/sites/default/files/site-attachments/Prevention%20research%202018.pdf](https://www.homeless.org.uk/sites/default/files/site-attachments/Prevention%20research%202018.pdf)

35 Homeless Link (2014) *Evidence Review on Homeless Hostels*
such as mental or physical ill health, stigma and discrimination, substance misuse, and having a criminal record.

Graph 25: Outcomes for accommodation residents over the past 12 months

N: 350

Move on

In an open text question, respondents were asked about the main difference that their service makes in the lives of their clients, with several respondents reporting that they help people to address their support needs and develop skills to move out of homelessness and access and sustain accommodation:

‘It enables them to be integrated back into the community. We are the only holistic service in the area, we offer a whole package, not just a roof over their head.’ (In-text response, accommodation provider)

‘Supporting clients to achieve an independent life and to get them a proper tenancy in independent accommodation.’ (In-text response, accommodation provider)

‘We alleviate their homelessness… We have prevented 37 drug-related deaths. We offer people who can't access mental health support through the NHS. We provide therapeutic counselling to people who would otherwise be not able to access mental support. We also offer an extensive sustainable tenancy sustainment program which is funded through grants, which we can apply for as a charity. We can support people fleeing domestic abuse who cannot access refuges because of their substance misuse.’ (In-text response, accommodation provider)
Responding accommodation providers (n: 283) reported that between April 2017 and March 2018, a total of 12,413 people moved on from their services in a planned move (e.g., to other accommodation, or housed with friends or family), which represents 49% of the total number of clients supported during this time. Respondents (n: 294) also reported that 19% of clients left following an unplanned move (e.g., eviction or abandonment).

Accommodation providers were asked to rank the move on destinations for people leaving their service in the past year (Graph 26). Respondents identified social housing as the most common move on destination and return to prison and rough sleeping as the least common. These findings suggest that people supported by accommodation services in England, are more likely to leave services through a planned tenancy move on process (which includes a move to social housing, private rented accommodation or supported accommodation), rather than through an unplanned move (e.g. returning to rough sleeping). Other research by Homeless Link has shown that homelessness services in England deliver a range of interventions to support people to move on from homelessness.36

Graph 26: Most common move on destinations. 1 is most common, 7 is least common

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36 Homeless Link (2018) Moving on from homelessness: How services support people to move on. 
https://www.homeless.org.uk/sites/default/files/site-attachments/Moving%20on%20from%20homelessness%202018.pdf

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The findings do however also indicate that many people face barriers in moving on from homelessness services. Accommodation providers reported that 2,462 people (18% of clients) were ready to move on but were unable to. Of this total, 40% had been waiting six months or longer (Graph 27).

Graph 27: Accommodation clients ready and waiting to move on

<table>
<thead>
<tr>
<th>Time Period</th>
<th>% of respondents</th>
</tr>
</thead>
<tbody>
<tr>
<td>6 months or longer</td>
<td>40%</td>
</tr>
<tr>
<td>3 months or longer, but less than 6 months</td>
<td>27%</td>
</tr>
<tr>
<td>less than 3 months</td>
<td>34%</td>
</tr>
</tbody>
</table>

N: 297

Respondents identified the lack of affordable housing as both a contributory barrier (77%) and the main barrier (30%) preventing people from moving on from homelessness services (Graph 28). Many respondents also identified the lack of accommodation at the Local Housing Allowance rate (71%) and the reluctance of landlords to take on people who are on benefits (65%) and/or who have complex needs (59%) as key barriers to move on.

Graph 28: Barriers to move on

<table>
<thead>
<tr>
<th>Barriers</th>
<th>Main Barrier</th>
<th>Barriers</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lack of accommodation available at the local housing allowance rate</td>
<td>71%</td>
<td>71%</td>
</tr>
<tr>
<td>Landlords won't take clients on Housing Benefits</td>
<td>65%</td>
<td></td>
</tr>
<tr>
<td>Can't afford rent or deposit in advance and/or no deposit</td>
<td>59%</td>
<td>59%</td>
</tr>
<tr>
<td>Landlords won't take homeless clients, or those with complex needs</td>
<td>59%</td>
<td>59%</td>
</tr>
<tr>
<td>Lack of accommodation available at the shared accommodation rate</td>
<td>45%</td>
<td></td>
</tr>
<tr>
<td>No money available for furnishing flats</td>
<td>24%</td>
<td>24%</td>
</tr>
<tr>
<td>No affordable accommodation available</td>
<td>23%</td>
<td>23%</td>
</tr>
<tr>
<td>Other</td>
<td>9%</td>
<td>9%</td>
</tr>
</tbody>
</table>

Barriers (N: 360)  Main Barriers (N: 362)
75% of homeless accommodation providers said they continued to support clients after their move on, with the majority reporting this support to be informal, such as contacting people on an ad hoc basis or when they needed help (Graph 29). A significant proportion also provided continued access to services based at the organisation (e.g., drop in sessions, employment sessions, advice).

**Graph 29: Move on support available for people moving out of accommodation projects**

<table>
<thead>
<tr>
<th>% of responding providers</th>
<th>Informal support</th>
<th>Continued access to services</th>
<th>Floating support provided on a regular basis</th>
<th>Social Care</th>
<th>Other</th>
</tr>
</thead>
<tbody>
<tr>
<td>Percentage</td>
<td>82%</td>
<td>67%</td>
<td>60%</td>
<td>23%</td>
<td>14%</td>
</tr>
</tbody>
</table>

**N: 273**

53% of the respondents provided move on support for up to six months, and 34% stated there to be no set time limit. Case Study 4 provides an example of a non-time-limited move on support service, which provides people with complex needs the support needed to sustain a tenancy, thereby reducing the risk of repeat homelessness.

**Graph 30: Length of time support is offered by accommodation providers following move on**

<table>
<thead>
<tr>
<th>% of total respondents</th>
<th>34%</th>
<th>18%</th>
<th>16%</th>
<th>9%</th>
<th>7%</th>
<th>6%</th>
<th>4%</th>
<th>3%</th>
<th>1%</th>
<th>1%</th>
</tr>
</thead>
<tbody>
<tr>
<td>No set time limit</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3 months</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6 months</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6 weeks</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>12 months</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4 weeks</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>12 months +</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 weeks</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 months</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>As long as clients are under 25</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Case Study 4: Cambridge Cyrenians (Cambridge)

Cambridge Cyrenians Older Homeless Service provides supported accommodation for people who are (mostly) aged over 50 who have experiences of homelessness. Due to mental and physical health needs – often related to long term substance misuse and rough sleeping – older people in Cyrenians’ accommodation projects were often unable to move on without continued support. As existing floating support workers lacked the capacity to provide the needed personalised and flexible support, in 2003 Cambridge Cyrenians created a specialised support worker post.

This specialised worker provided flexible, non-time-limited one-to-one support for individuals with high needs who experience significant difficulties accessing and sustaining accommodation. Although this service was successful in increasing the rate of move on, the funding initially ended. This brought renewed challenges in moving people on, particularly as sheltered housing providers were often reluctant to take Cambridge Cyrenians’ residents without the offer of continued support.

Recognising the value of this service in enabling older residents to move on, in 2014 the service secured Trust and Council funding to reintroduce the service. Some changes were implemented, including the addition of a new client group: those at risk of losing a tenancy. This has allowed the service to apply the same approach to preventing homelessness.

At any one time 16-20 people are supported through this move on service, and the service is reviewed at three-month intervals. There is no time limit, and people move away from the service if and when they are ready, are in stable accommodation, and have access to a support network. Once a service user has been signed off, they are able to return to the service at any point if the need arises.

Due to the ongoing high support needs of Cambridge Cyrenians’ clients, sheltered housing is often the best move on option. However, sheltered housing providers are often wary of taking on this group because of perceived risk. Supporting people to move on will therefore often involve close cooperation with accommodation providers to provide reassurance that a resident is able to maintain a tenancy and that the project will provide continued support. Continued support is having an impact, and an increasing number of people are successfully moving on to sheltered housing. The team feel that the providers’ perceptions of older homeless people are also starting to change.

“*We are now able to move people on, it’s much easier – there is more willingness to consider the possibility of taking our clients from the sheltered housing [providers].*” (Senior staff)
Accessing accommodation

The homelessness sector uses various specific approaches including prevention services (71%) which provide people with the ways and means to address their housing and other needs and thereby hopefully avoid homelessness (Graph 31). Other services provided by the sector include rent/bond deposit schemes (51%) to help those who cannot afford a deposit rent from a private landlord, floating support services (71%), and shared accommodation schemes (52%).

Some other approaches used in the sector include the use of social investment methods, which offer repayable finance to achieve a social but also financial return. Peer Landlord schemes, a model of affordable shared housing for people with one tenant assuming peer landlord responsibilities are also sometimes used within the sector (16% of accommodation providers use this approach). Private sector leasing schemes which involve private landlords leasing their houses to a third-party provider (local authority) who can in turn let to people who are homeless are used by 30% of accommodation providers in England.

The findings show a growing momentum of Housing First services in England, with over 50% of accommodation providers in England using or exploring this approach. Housing First in an internationally evidenced-based approach that provides people with multiple and complex needs access to independent housing along with intensive support.³⁷ Evidence suggests that the approach effectively ends homelessness and helps some of the most excluded people in society improve their lives.³⁸

Graph 31: Specific approaches used by accommodation services

![Graph showing the percentage of accommodation providers using, exploring, or neither of various approaches such as Homelessness prevention services, Housing First approach, Peer landlord schemes, Private sector leasing schemes, Social investment methods, Independent lodgings for move on, Shared accommodation schemes, Floating support, Rent deposit/bond schemes.]

N: 362

³⁸ https://www.homeless.org.uk/our-work/national-projects/housing-first-england
Conclusion

The past year has seen increased Government commitment, spending and targeted interventions to tackle homelessness and rough sleeping. 2018 has been the first year since 2010 where there has been no increase in official rough sleeping estimates; in turn demonstrating the benefits of targeted and bespoke ventures with increased investment and intervention. However, with an estimated 4,677 people sleeping rough on any one night and 64,960 people approaching their local authority for homelessness-related assistance within a three-month period (April–June 2018), levels of homelessness remain unacceptably high.

Whilst the 2017 Homelessness Reduction Act has significantly extended the available advice and support for single people and couples without dependent children experiencing homelessness, the likelihood that this group will be eligible for accommodation from their local authority remains low. This is because people without dependent children are not defined in law as being in ‘priority need’ unless they are considered to be vulnerable. Homelessness charities therefore play a particularly important role in providing this group of people with advice, accommodation, and other forms of support. This study provides a review of the support provided by this sector.

This report presents the findings from a representative survey among more than 400 service providers from across the country and shows that many of those who access homelessness services have an array of needs besides their main need for housing, such as mental or physical health needs. Whilst there is significant diversity in the various accommodation and support options covered by the term ‘homelessness services’, the findings of this study indicate that despite operating in a challenging funding climate, many accommodation providers and day centres in England provide a range of services to meet people’s needs. The findings also indicate that these services help a significant proportion of the people who access their services to achieve a range of positive outcomes including improved health, reduced offending and reduced alcohol and/or drug consumption.

The findings demonstrate that despite facing an array of structural challenges – including a distinct lack of affordable accommodation and lack of investment in critical support services – many accommodation providers are reporting that people are moving on positively from their services. The findings show that the sector continues to evolve in terms of the initiatives offered to help people access and sustain accommodation, including shared accommodation schemes, social investment methods, and Housing First.

The sector does however continue to face significant challenges, with 18% of people that are currently being accommodated ready to move on from services but unable to do so, and 40% having had to wait six months or longer. Without a dedicated and significant effort to tackle the structural causes of homelessness – poverty, housing supply, and welfare reforms – the extent to which the sector can help people move out of homelessness will be limited.

The findings highlight certain areas that warrant further exploration, such as the ongoing barriers for those needing to access mental health services, and the reasons, consequences, and possible solutions for the high rates of service refusals of those with multiple and complex needs.

The findings of the survey and case studies illustrates the diversity, vibrancy, and valuable contribution of the voluntary sector in tackling homelessness and rough sleeping and underlines the importance of adequate

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39 A report by the National Audit Office published in 2017 found that spending on overall housing services has fallen by 21% in real terms since 2010, including a 59% real terms decrease in Supporting People funding (housing-related support). Ref: National Audit Office, Homelessness: report by the Comptroller and Auditor General, September 2017
recognition and funding to ensure that these services can continue to effectively support some of society’s most vulnerable people. In addition to this, Homeless link is working to identify, support and promote practice responses that will effectively end homelessness and reduce the numbers of people sleeping rough, for example by providing opportunities for people working in the homelessness and supported housing sectors to continually develop their knowledge, networks and skills.40

Appendix 1: methodology

The findings featured in this report are drawn from the following five key data sources:

1. **Telephone and online survey from 54 day centres (28% response rate)**
   A combination of telephone and online surveys were conducted between October 2018 and mid-November 2018. The survey was conducted externally by ‘Word of Mouth Research’.

2. **Telephone and online survey from 362 accommodation projects (29.9% response rate)**
   A combination of telephone and online surveys were conducted between October 2018 and mid-November 2018. Of a total of 1,212 services, 366 (30.2%) accommodation projects responded. Four projects did however not meet the inclusion criteria\(^{41}\) which meant that **362 projects** were used in the final analysis. The survey was conducted externally by Word of Mouth Research.

For both accommodation providers and day centres we achieved 95% confidence intervals of ±5% and stratified each project type by region and local authority. This in turn allowed us to generalise the findings to the wider sector. This year we revised and shortened the survey, which resulted in significantly higher baseline responses to each question than was the case in previous years.

3. **Existing data on homelessness trends**
   The report includes analysis of existing data sources on statutory homelessness and rough sleeping figures as published by the Ministry of Housing, Communities and Local Government. The figures were analysed by means of Excel.

4. **Homeless England database**
   This database is managed by Homeless Link and covers information on approximately 1,271 services. Although the data is not live, it is updated regularly and is the only database on the number of homelessness services in England. Data on the availability of services and bed spaces were extracted from the Homeless England database, allowing a comparative analysis with previous publications of the Annual Review.\(^{42}\)

5. **Case studies**
   Four case studies were compiled to further evidence the key topics addressed in the research and to provide in-depth examples of various types of provisions in England. The case studies were selected from among our members and are based on local information on good practice.

**Sampling approach**

The sample structure was a vital part of this survey. Homeless Link ensured that the profile of the projects interviewed closely represented the profile of the sector’s projects (accommodation or day centre) as a whole.

For this survey, we achieved 95% confidence intervals of ±5% for the survey results from accommodation providers as a discrete group, and from the aggregated grouping of accommodation providers and day centres.

For accommodation providers only, the available sample numbers 1,212 projects. This required 292 interviews to be completed to achieve the confidence interval of ±5%. We achieved significantly above this with **362** respondents.

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\(^{41}\) Accommodation providers and day centres as defined on pg.13

\(^{42}\) All Homeless Link Annual Review reports are available at: [https://www.homeless.org.uk/facts/our-research/annual-review-of-single-homelessness-support-in-england](https://www.homeless.org.uk/facts/our-research/annual-review-of-single-homelessness-support-in-england)
For accommodation providers and day centres combined, the available sample size of 1,407 projects required 302 interviews to be completed to achieve the confidence interval of ±5%. This was achieved alongside the above target by completing 20 additional interviews with day centres. However, that analysis of the combined dataset was better served by interviewing a number of day centres in proportion to their representation within the combined initial sample, i.e., 195/1,407 translating to 47 day centre interviews alongside the 292 interviews with accommodation providers, i.e., 339 interviews in total. The interviewed sample of 339 across both types of projects then properly reflects representation across all projects eligible to take part in the survey. We achieved considerably higher with 54 day centres and 362 accommodation providers resulting in a 416 overall sample.

Within each of the two project types, we stratified and selected other key attributes in order to achieve a representative sample overall. This ensured no unexpected skews in the data of the type that may at times occur within a purely random but un-stratified selection. Within the cases for each project type centre, we therefore stratified by:

a) Region,

b) Local authority (although if each local authority maps uniquely onto only one region, we recommend stratifying by local authority alone as the best approach).

For every record in the initial sample we defined a quota code based on the relevant variables and calculated the quota targets which were set to ensure that the achieved samples from each project type reflected the actual distribution across all the supplied cases.

<table>
<thead>
<tr>
<th>Accommodation Providers</th>
<th>ALL</th>
<th>Telephone</th>
<th>Online</th>
</tr>
</thead>
<tbody>
<tr>
<td>Day Centres</td>
<td>366</td>
<td>148</td>
<td>218</td>
</tr>
</tbody>
</table>

In the case of day centres, the regional quotas were closely followed, and quotas were near met. In the case of the accommodation projects, quotas were adhered to the best of our ability for the phone interviews, but it was found that for the much wider distribution of online survey links, these could not be controlled, nor were we able to stipulate who decided to take part online. This in turn impacted our ability to ensure that the regional quotas for each region in England were met. In the following regions the targets were near (but not completely met), which limits our ability to generalise the findings all services in these regions: London, South West, West Midland, and Yorkshire and the Humber.

<table>
<thead>
<tr>
<th>Day Centres</th>
<th>Accommodation Providers</th>
</tr>
</thead>
<tbody>
<tr>
<td>Regional Quota</td>
<td>Regional Quota</td>
</tr>
<tr>
<td>REGION</td>
<td>Target %</td>
</tr>
<tr>
<td>East</td>
<td>8.0%</td>
</tr>
<tr>
<td>East Midlands</td>
<td>8.0%</td>
</tr>
<tr>
<td>London</td>
<td>21.8%</td>
</tr>
<tr>
<td>North East</td>
<td>3.2%</td>
</tr>
<tr>
<td>North West</td>
<td>13.8%</td>
</tr>
<tr>
<td>South East</td>
<td>19.7%</td>
</tr>
<tr>
<td>South West</td>
<td>11.2%</td>
</tr>
<tr>
<td>West Midlands</td>
<td>6.4%</td>
</tr>
<tr>
<td>Yorkshire &amp; the Humber</td>
<td>8.0%</td>
</tr>
<tr>
<td>Total</td>
<td>100%</td>
</tr>
</tbody>
</table>

The initial response is 366 - four projects did not meet the criteria so the total is 362, which still allows us to generalise our findings by exceeding the national sample target of 339 and day centre target of 47.
What we do
Homeless Link is the national membership charity for services working directly with people experiencing homelessness, or living with housing with health, care and support needs. Representing over 700 organisations across England, we work to improve services through research, training and guidance, and to promote policy change that will ensure everyone has a place to call home and the support they need to keep it.

Let’s end homelessness together
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