The Future Hostel

The role of hostels in helping to end homelessness
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Produced by
The Homeless Link Research Team, March 2018

Acknowledgements
We are grateful to all the homelessness services who took part in this study, and the staff, residents and partners of the projects who welcomed us into their service and took time out of their busy schedules to share their experiences.

The research is funded by the Ministry of Housing, Communities and Local Government (MHCLG).
Executive Summary

In England, each year approximately 200,000 single people experience homelessness. Many of them have other support needs besides their need for housing, and as such require some type of tailored assistance. Lacking a home of their own, many will stay in supported homelessness accommodation projects, which in this report are referred to as hostels.

The findings of this study show that over 90 per cent of all homelessness accommodation projects in England consist of hostels, thereby demonstrating this to be one of the main forms of accommodation provision for single homeless people. However, although hostels function as one of the main forms of service provision for those experiencing homelessness, there is little evidence on their actual role in addressing homelessness, nor on the various factors contributing to their effectiveness.

This report draws on findings from ten in-depth case studies of hostels across England and analyses hostel data from Homeless Link’s online database of homelessness services. It explores the range of approaches and interventions that are covered by the term “hostels,” and focuses on key principles, learning points, and good practice.

Key Findings

Types of accommodation projects

The majority of homelessness accommodation projects are stage two projects (73%), offering a low, medium or high level of support.

Medium support hostels which offer support prior to people moving on to independent housing are the most common form of homelessness accommodation provision.

Specialist schemes that are commissioned to work with a particular client group, are the least common form of accommodation project in England (7%).

Who are hostels supporting?

Most hostels offer mixed-gender accommodation, and only 131 hostels are specifically set up for women.

There is a relatively high proportion of youth-specific projects (323 projects).

Only a very limited number of services will accept couples and dogs. This often operates as a barrier to accessing services.

People staying in hostels will often present with a range of support needs in addition to their housing need.

Many people staying in hostel will have had experiences of trauma.

The roles and functions of hostels

Participating hostels generally aimed to support people progress to independence, conceptualised as not only accessing accommodation, but also developing the skills, abilities and resources need for re-integration and personal development.
Hostels also aim to provide safety, security and opportunities for people to access support to address their needs and problems.

Key working support, informal support and the provision of meaningful activities formed a core part of participating hostel's activities.

Most hostels actively focused on reducing rates of eviction and abandonment.

**Effectiveness of hostels**

There was no unified approach to measuring outcomes, and hostels generally used a range of tools for measurement. Findings suggest that existing metrics do not always capture the range of outcomes which hostels achieve.

Participating hostels were successful in helping people to move out of homelessness, address their immediate needs and develop their capacity to live independently.

Some hostels were particularly successful in engaging entrenched rough sleepers, achieved by focusing on removing system barriers.

**Factors which contribute to hostel's effectiveness**

The personal attributes of hostel staff and a supportive working culture contributed to positive interactions between staff and residents.

Positive and trusting client/staff relationships are key to achieving positive outcomes, for example, by building trust and encouraging resident engagement in available services.

A flexible and adaptable approach is key to encouraging engagement and meeting people’s needs.

Move on accommodation offered by participating organisations was a positive experience for people needing ongoing support and who were able and willing to engage.

Strong partnerships with a wide array of external agencies and the integration of external services into hostel provisions is key to meeting a wide range of needs.

**Opportunities for improvement**

Findings suggest that the range and frequency of hostels’ activities could be improved.

Improvements could be made in helping people to access specialist mental health services as well as emotional support, counselling and advisory services.

Staff, residents and partners reported a lack of ongoing or floating support once a person moved on from a hostel.

Residents particularly disliked hostel rules and regulations and there is some indication that hostels could make improvements in this area by offering alternative arrangements.

Residents felt that the range and quality of food could be improved.
Challenges

Homelessness services in England continue to face the challenge of meeting increasing levels of demand with diminishing resources. In some cases, this negatively impacted the range of services hostels were able to deliver.

As a result of funding constraints, some services face ongoing issues with staff recruitment and are currently understaffed.

New Psychoactive Substances and their unpredictable effect on users presents a key challenge for some hostels in England.

People experiencing substance dependency and mental health problems continue to face significant barriers to accessing mental health support services.

Hostels face significant challenges in moving people on from the hostel, with lack of affordable housing operating as the main barrier.
Introduction

Background

Supported housing provided by the voluntary sector has been the main service response for people experiencing homelessness in England. The term ‘hostel’ covers a spectrum of accommodation options, ranging from emergency short-term hostels, longer-term generic provisions and specialised services offering tailored support to specific client groups. Services vary in the size and quality of accommodation and level and nature of support offered. The following definition of hostels has been adapted by Busch-Geertsema and Sahlin (2007)\(^1\), suggesting that hostels can be identified on the basis of the characteristics listed in the table below. However, there is currently no generally agreed definition of a hostel, and in this report the term is used as a short-hand to cover a range of supported accommodation provisions.

<table>
<thead>
<tr>
<th>Physical space</th>
<th>Communal in form (mostly but not always larger than normal dwelling)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Shared space (living, eating, food preparation and/or bath/toilet)</td>
</tr>
<tr>
<td>Social space</td>
<td>Some kind of supervision</td>
</tr>
<tr>
<td></td>
<td>Limited (or no) private space (i.e., from which others can be excluded)</td>
</tr>
<tr>
<td>Legal space</td>
<td>Institutional control of access</td>
</tr>
<tr>
<td></td>
<td>Temporary occupancy intended</td>
</tr>
<tr>
<td></td>
<td>No regular tenancy agreement</td>
</tr>
<tr>
<td></td>
<td>Exclusion (eviction) without Court action</td>
</tr>
</tbody>
</table>

In recent years, hostels have received a significant amount of Government funding. The Hostels Capital Improvement Programme (HCIP) provided £90m (2005/6 - 2007/08), and was based on the recognition of the important role of hostels in reducing the number of rough sleepers and that they were working with far more complex and challenging residents. It aimed to rebuild and re-model hostels to achieve significant change in the delivery of their services, and to improve employment, health, personal development and housing outcomes for residents. The Homelessness Change and Platform for Life Funds from 2015 to 2017 set aside up to £25 million capital funding for specialist housing providers to develop tailored hostel accommodation for rough sleepers and shared accommodation for young people who are homeless, with a focus on enabling them to take on or continue education, training or employment.

The above funding programmes reflect a growing consensus of the need for hostels to support people in moving away from homelessness services, with for instance HCIP resulting in a 30% increase in people moving on from funded providers in a positive way. These initiatives form part of a wider shift from large shelters with basic provisions to smaller and/or more specialised services that offer individualised and targeted support. All these funding programmes have significantly improved the quality of hostels and their staffing, and have focused provision on successfully supporting people into independence.

Despite developments and improvements in the physical standards and operations of hostels, this particular type of provision has been the subject of criticism from policy, practice, and academic circles\(^2\). Hostels usually adopt a staircase system or “continuum of care” approach, which entails an individual progressing between different accommodation models and/or service providers before eventually moving on to full independence. Housing First approaches are increasingly being promoted as alternatives to traditional or linear models in the support of homeless people. Housing First models offer independent tenancies that provide ‘wrap-around support’ for people with complex need. There is however evidence that hostels can bring positive outcomes for residents and can support people to progress towards independent living\(^3\). For example, Quilar and colleagues

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\(^2\) Homeless Link (2014) Evidence Review on Homeless Hostels

\(^3\) Homeless Link (2014) Evidence Review on Homeless Hostels
2008 review of youth homelessness indicates that hostels with individualised and tailored support, as well as adequate move-on options, can be suitable for young people⁴.

While the experience of Homeless Link members suggests hostels have a key role to play in supporting people to move on from homelessness and achieve positive outcomes, there is limited evidence currently available on the effectiveness of hostels and supporting housing models.

As Government, the homelessness sector and wider partners look for solutions which can help end rough sleeping, and prevent homelessness in the first place, it is a timely opportunity to re-look at the role hostels can play in providing accommodation and support for those at risk of and experiencing homelessness⁵.

**Research project**

This research project aims to contribute to the evidence base on the effectiveness of hostels, and to increase understanding of their role in addressing homelessness. This study is underpinned by the following four key research objectives:

- To describe the various types of hostel provision
- To explore the range of approaches and interventions covered by the term “hostels”
- To highlight key principles, learning points, and best practice
- To make recommendations for improving hostel provision

To address these objectives this project has adopted the following methods:

- Rapid evidence review of existing literature (published separately)
- Analysis of hostel data from the Homeless England database
- In-depth case studies of 10 hostels

**Homeless England data analysis**

The hostel data was extracted from the Homeless England database on 1 June 2016⁶. To allow an exploration of the hostels’ place within the current landscape of accommodation provision for single homeless people, the initial mapping exercise covered all types of accommodation projects such as winter shelters, Nightstop schemes, and specialist provision (e.g., drugs/alcohol, mental health). As a result, a greater number of projects and bed spaces were included in this mapping exercise than reported in our 2016 Annual Review⁷ (which excluded these type of projects). Chapter 2 features a further analysis of hostel provision (excluding data from winter night shelters and Nightstop projects).

**Case studies**

To capture variations within existing hostel provision, case study participants were purposefully sampled across the following key dimensions: geographical location, target client group, size of hostel, level of support provided, maximum length of stay, and underpinning psychological approaches. A total of 10 hostels took part in the study, with a description of each service being included in the case studies appended to this report. This

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⁵ Since the time of fieldwork, a number of announcements have brought the role of supported accommodation into sharper focus. This includes the Homelessness Reduction Act, which formally became an Act of Parliament in April 2017, the initiation of the Government’s Rough Sleeping Taskforce, and proposals about the future funding model for supported housing. See [www.homeless.org.uk](http://www.homeless.org.uk) for more information on these topics.

⁶ This database is managed by Homeless Link and holds information on approximately 1,400 accommodation projects and day centres. Although the data is not live, it is updated regularly and is the most accurate source of data about homelessness services in England. [http://www.homeless.org.uk/search-homelessness-services](http://www.homeless.org.uk/search-homelessness-services).

phase of the study included observations at each service, semi-structured interviews, and an analysis of outcomes and other hostel data.

Interview participants included current and former residents, front-line staff, senior management, key partners and stakeholders, funders, and commissioners. Most interviews were conducted on a one-to-one basis, with some focus groups carried out with staff and residents. The interview schedules were based on the key findings of the rapid evidence review of hostel provision carried out in 2016\(^8\), which outlined current gaps in evidence in regard to the nature, purpose, and operation of hostels. The questions addressed a range of topics such as (but not limited to): aims/objectives of the hostel, hostel operations and working practices, current and future challenges, and needs and characteristics of residents. A total of 120 audio-recorded interviews took place across the 10 hostels.

**Ethics**

Informed consent was obtained from all interview participants, with residents and ex-residents providing written consent and all other participants’ verbal consent. Participants were informed of the nature and purpose of the project and their right of withdrawal, and were assured confidentiality and anonymity. Steps were taken to ensure the safety of both participants and the researcher.

Any names of residents featured in this report are pseudonyms.

**Analysis**

The data of each participating organisation was compiled into individual case studies, which were reviewed by the participating organisations prior to inclusion in the final report. The interviews were transcribed, and analysed using thematic analysis and coded with Nvivo. While all participating individuals and organisations are anonymised in the full report, on occasion reference is made to the case studies appended to this report, but this only in relation to data that participating organisations have reviewed within their individual case studies.

**Structure of report**

Chapter 2 describes the current types of hostel provision in England and locates case study participants within this framework. Chapter 3 outlines the needs and characteristics of those staying in hostels. Chapter 4 focuses on findings from the case studies to explore the hostels’ aims, purpose, management, and services. Chapter 5 builds on this analysis in order to focus on factors that contribute to a hostel’s effectiveness. Finally, Chapter 6 highlights the hostels’ current challenges, and provides examples of innovative approaches.

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\(^8\) Homeless Link (2014) ‘Evidence Review on Homeless Hostels’
1. Hostel provision in England: the current picture

This chapter explores the position of hostels within the current landscape of accommodation provision for those experiencing homelessness in England. Drawing on an analysis of Homeless England data, it describes the various types of hostel provision that currently exists and indicates where case study participants fit within this framework.

Types of accommodation projects

Various types of services provide accommodation for single homeless people in England such as: winter shelters, Nightstop schemes, hostels, and specialist projects (e.g., for people experiencing alcohol/drugs and/or mental health problems). Homeless England data provides an indication of the scale of current provision:

- In June 2016, 1,324 accommodation projects operated in England, offering a total of 39,684 bed spaces.

Existing projects can be roughly divided into three accommodation types: emergency, stage two, and specialist services. These projects can be differentiated on the basis of target groups, access criteria, and the level and nature of support offered. Although this categorisation can help clarify variations within current provision, these categories are not mutually exclusive. As explored below, case study findings show that the role and operation of certain projects may at times place them within multiple categories.

- Of the total number of homelessness accommodation projects, 20% offers emergency provision, 73% are stage two projects, and the remaining 7% are specialist services (Figure 1).

Figure 1: Types of accommodation provision

<table>
<thead>
<tr>
<th>Type</th>
<th>Count</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Emergency</td>
<td>264</td>
<td>20%</td>
</tr>
<tr>
<td>Stage 2</td>
<td>970</td>
<td>73%</td>
</tr>
<tr>
<td>Specialist</td>
<td>90</td>
<td>7%</td>
</tr>
</tbody>
</table>

N=1,324

Emergency accommodation

Emergency or ‘first stage’ accommodation comprises winter shelters, Nightstop schemes, and direct access hostels (Table 1), which are often accessed upon referrals from day centres or outreach teams. Some people remain in emergency accommodation until resettlement in more permanent accommodation, while others may be referred to second stage accommodation or specialist schemes.

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10 This figure covers all types of accommodation projects such as winter shelters and Nightstop schemes and therefore includes a greater number of projects and bed spaces exercise than reported in our 2016 Annual Review
Table 1: Emergency accommodation provision

<table>
<thead>
<tr>
<th>Type</th>
<th>Description</th>
<th>Access criteria</th>
</tr>
</thead>
<tbody>
<tr>
<td>Winter shelters</td>
<td>Emergency shelters available during cold weather/winter months</td>
<td>People rough sleeping</td>
</tr>
<tr>
<td>Nightstop</td>
<td>Bed for the night in volunteers’ homes</td>
<td>Young people in crisis, forced to leave home</td>
</tr>
<tr>
<td>Direct access</td>
<td>Immediate accommodation for those who need it</td>
<td>People in urgent need of accommodation such as rough sleepers</td>
</tr>
</tbody>
</table>

Two of the organisations that participated in the case studies could be defined as direct access hostels, which provided immediate accommodation for those who prior to accessing the hostel, would usually have been sleeping rough. These services have defined referral routes and people access the service via a dedicated outreach team or centralised gateway.

Case study findings suggest that hostels not defined as quick access still play a key role in supporting people facing immediate housing crises. Four participating hostels provide emergency beds (usually two or three) that are reserved for those sleeping rough in the local area and can be accessed via various referral agencies (e.g., local outreach or No Second Night Out team, police, other local services). Staff participants reported that partnership work with local outreach teams and the lack of extensive referral processes and waiting lists helps to minimise access barriers. Hostels thereby help address rough sleeping and the barriers which can prevent vulnerable people from accessing the services:

‘That’s targeting those people, the ones you see on the street, the ones when you go home, you get on the train, the ones you see outside the station, that’s for those, we need to target those people and the idea is that they [the outreach team] can bring them in without having to go through a lengthy referral process.’ (Staff member, high-support hostel)

For those who do not meet the participating hostel’s accommodation criteria, staff provide ongoing support to prevent their return to the streets (e.g., onwards referral and support in accessing alternative accommodation).

‘We’ll always try to keep customers as safe as we can, even when they leave the hostel, you know, sometimes customers will come back and say to you, you know, even just ring the bell and say, 'We’re in a crisis’, and we’ll pull together even within, you know, if it’s resettlement team … we’ll give them a call and just say, 'We’ve got them here do you want us, if we’ve got room, we’ll keep them here for tonight and meet with them.’’ (Manager, specialised hostel)

Second stage accommodation

Stage two accommodation projects consist of foyers, housing schemes, and hostels that provide a low, medium, or high level of support (Table 2). The majority of accommodation projects in the Homeless England database (73%) fall within this category. A referral from a homelessness team in the Council’s housing needs department, or from a professional service (e.g. social services or probation) is usually necessary to access these services. People will also usually need to have a local connection to the area where the hostel is based.

Table 2: Second stage accommodation

<table>
<thead>
<tr>
<th>Type</th>
<th>Description</th>
<th>Access criteria</th>
</tr>
</thead>
<tbody>
<tr>
<td>Low support</td>
<td>Accommodation offering low support. Most hostels provide some help with finding move-on accommodation, but this is not usually their primary focus</td>
<td>People who are homeless or in housing need but fully capable of independent living</td>
</tr>
<tr>
<td>Support Level</td>
<td>Description</td>
<td>Target Group</td>
</tr>
<tr>
<td>--------------</td>
<td>-------------</td>
<td>--------------</td>
</tr>
<tr>
<td><strong>Medium support</strong></td>
<td>Accommodation offering additional support prior to people moving on to independent housing</td>
<td>People with some support needs (e.g., alcohol, drugs or mental health) may be accepted at some projects</td>
</tr>
<tr>
<td><strong>High support</strong></td>
<td>Accommodation with high support and usually 24/7 staff cover. Support may include counselling, life skills training and group work. Projects are usually small hostels or shared houses</td>
<td>People who have additional support needs and face barriers to living independently</td>
</tr>
<tr>
<td><strong>Foyer</strong></td>
<td>Schemes providing accommodation and training and/or employment support that is usually based on the same site</td>
<td>Usually for young people who are homeless or in housing need with low or no support needs. Involvement in the employment and training programme is often a condition of residence</td>
</tr>
<tr>
<td><strong>Housing scheme</strong></td>
<td>Geographically dispersed accommodation with little or no support, with some projects providing specialist support staff or facilitating access to external support if required. Staff visit residents and the projects have a relatively low staff to resident ratio</td>
<td>People must be able to live independently but may have some additional support needs for which they need assistance to maintain tenancies</td>
</tr>
</tbody>
</table>

Low support hostels generally offer minimum levels of lower level support and are accessed by those with few or no support needs (other than housing). Medium support hostels provide a higher level of support (e.g., for drug/alcohol addiction) but are usually not equipped to deal with multiple or complex problems. High support hostels typically have staff on-site 24/7 and tend to work with those who have a number of support needs, e.g., drug/alcohol addiction and mental health problems.

The majority of case study participants could be considered to be a second stage accommodation project, offering either a high or medium level of support. The main factors differentiating high support hostels from medium support hostels within this sample, is the provision of on-site 24-hour support and the acceptance and support of people with multiple and complex needs. Staff and residents at the high support hostels highlighted the importance of help being available throughout the night (when needs are often most urgent).

**Specialist schemes**

Specialist schemes provide support for those with particular needs such as mental health, alcohol or drug use, ex-offenders, or other specific groups of people such as women, or long-term entrenched rough sleepers. Whilst these people may still be supported by other accommodation projects, specialist schemes are specifically commissioned to work with a particular client group. Only 7% of the existing accommodation projects listed in the Homeless England database are specialist schemes, making them the least common form of accommodation service for homeless people. Dual diagnosis projects for those with substance abuse and mental health problems are particularly rare, and only two projects are currently registered on the Homeless England database. As explored in Chapter 6, several case study participants highlighted a lack of dual diagnosis services as a key challenge for their hostel.

The case study included four services that could be defined as specialist services: a women-only service, two services for those who are alcohol-dependent; and a service for entrenched rough sleepers. The nature and operations of these services are explored in Chapter 3.

**Scale of provision**

Excluding Nightstop schemes and Winter Night shelters, Homeless England data shows that hostels represent 96% of all accommodation projects and 96% of all bed spaces on the Homeless England database.
findings suggest that hostel accommodation remains the main form of accommodation provision for single homeless people in England.

Emergency, stage two, and specialist schemes can comprise various forms of accommodation services (Graph 1). The findings suggest that medium support hostels are the most common form of homelessness accommodation provision in England (629 of all projects). The projects generally provide accommodation and support for those transitioning to independent accommodation, such as assistance in accessing move-on housing and developing life-skills. These services generally do not accept people considered to be high risk or presenting with multiple and/or complex needs.

- Of the 629 medium support hostels in England a total of 323 projects specifically target young people (usually of the ages 16/17 or 18–25).

The findings suggest that quick access hostels are the second most common type of hostel in England, with this form of provision generally providing emergency accommodation for rough sleepers. Many of these hostels only accept and/or prioritise referrals from specific agencies and people often cannot self-refer to the services (as can be done for many winter shelters). Quick access hostels are often suitable for those who present with a range of support needs besides housing problems.

- Of the 215 quick access hostels in England, a total of 32 target young people.

High support hostels are the least common form of second stage hostel accommodation, with only 35 projects recorded on the Homeless England database.

Graph 1: Provision of homeless accommodation in England

<table>
<thead>
<tr>
<th>Type</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Winter Shelters</td>
<td>21</td>
</tr>
<tr>
<td>Nightstop</td>
<td>28</td>
</tr>
<tr>
<td>Quick access</td>
<td>215</td>
</tr>
<tr>
<td>Low support</td>
<td>118</td>
</tr>
<tr>
<td>Medium support</td>
<td>629</td>
</tr>
<tr>
<td>High support</td>
<td>35</td>
</tr>
<tr>
<td>Foyers</td>
<td>118</td>
</tr>
<tr>
<td>Housing schemes</td>
<td>70</td>
</tr>
<tr>
<td>Ex-offenders</td>
<td>22</td>
</tr>
<tr>
<td>Mental health</td>
<td>32</td>
</tr>
<tr>
<td>Alcohol and drugs</td>
<td>26</td>
</tr>
<tr>
<td>Dual diagnosis</td>
<td>2</td>
</tr>
</tbody>
</table>

**Accessing hostels**

People who are homeless or at risk of homelessness can access hostel accommodation in various ways. Some hostels have clearly defined referral routes/criteria that people must meet to access the hostel, with nearly four in ten accepting referrals from named agencies only, four in ten requiring a local connection\(^{11}\) (Figure 2).

\(^{11}\) People making a homelessness application at their local authority will usually need a local connection to the area in which the application is made.
Findings from the case study show that hostels often apply additional criteria in determining access, with the most common exclusion criteria among participating organisations being arson offences. Criteria can however vary according to the hostel’s particular approach, and several participants stressed that each referral is assessed on an individual basis.

**Hostel capacity by region**

Size-wise, London projects tend to be larger than those in other regions. A comparison of the distribution of project and bed spaces across England shows that, although 1/5th of the projects are located in London, more than 1/4th of the bed spaces can be found in London (Figure 3). Project size may impact outcomes, with smaller projects seen as offering a more personalised approach.

**Figure 3: Distribution of projects and bed spaces by region**

<table>
<thead>
<tr>
<th>Heat map of projects by region</th>
<th>Heat map of bed spaces by region</th>
</tr>
</thead>
<tbody>
<tr>
<td>East</td>
<td>East</td>
</tr>
<tr>
<td>East Midlands</td>
<td>East Midlands</td>
</tr>
<tr>
<td>London</td>
<td>London</td>
</tr>
<tr>
<td>North East</td>
<td>North East</td>
</tr>
<tr>
<td>North West</td>
<td>North West</td>
</tr>
<tr>
<td>South East</td>
<td>South East</td>
</tr>
<tr>
<td>South West</td>
<td>South West</td>
</tr>
<tr>
<td>West Midlands</td>
<td>West Midlands</td>
</tr>
<tr>
<td>Y&amp;H</td>
<td>Y&amp;H</td>
</tr>
<tr>
<td>183</td>
<td>4,099</td>
</tr>
<tr>
<td>83</td>
<td>2,597</td>
</tr>
<tr>
<td>230</td>
<td>9,402</td>
</tr>
<tr>
<td>60</td>
<td>1,838</td>
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<tr>
<td>162</td>
<td>3,904</td>
</tr>
<tr>
<td>164</td>
<td>4,399</td>
</tr>
<tr>
<td>166</td>
<td>4,502</td>
</tr>
<tr>
<td>127</td>
<td>3,883</td>
</tr>
<tr>
<td>100</td>
<td>3,541</td>
</tr>
</tbody>
</table>

- Any agency (768, 60%)
- Named agencies only (500, 39%)
- Not needed (417, 33%)
- Priority (346, 27%)
- Must have (510, 40%)
- Referrals direct from prison (64, 5%)
Nationally, about a quarter of projects have 10 bed spaces or fewer (24%), (Table 3). This compares with 16% in London. London is also more likely to have projects with more than 100 bed spaces (8% of projects in London).

Table 3: Bed space capacity of hostels in England by region

<table>
<thead>
<tr>
<th>Region</th>
<th>0-10</th>
<th>11-20</th>
<th>21-30</th>
<th>31-40</th>
<th>41-50</th>
<th>51-60</th>
<th>61-70</th>
<th>71-100</th>
<th>100+</th>
</tr>
</thead>
<tbody>
<tr>
<td>East</td>
<td>30%</td>
<td>31%</td>
<td>18%</td>
<td>12%</td>
<td>2%</td>
<td>2%</td>
<td>2%</td>
<td>1%</td>
<td>2%</td>
</tr>
<tr>
<td>East Midlands</td>
<td>22%</td>
<td>30%</td>
<td>14%</td>
<td>7%</td>
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N=1,275
2. Who is supported by hostels?

Drawing on information from the Homeless England database and the case studies, this chapter first describes the specific groups of people that are supported by hostels. The chapter then uses case study data to discuss the main needs and experiences of hostel residents.

The graph below shows a breakdown of hostels listed on the England services database in June 2016.

Graph 2: Groups targeted or accepted by hostels in England

Although most hostels offer mixed-gender accommodation, records indicate that only 131 hostels in England are specifically set up for women. Many of the women who access homelessness services have been victims of violence and abuse, have complex needs and many would prefer women-only spaces and/or all female.
staff. Generic homelessness services can also be ill equipped for the specific needs and experiences of women (such as trauma, abuse, and children being taken into care).

Although certain accommodation projects cater to all ages, data demonstrates a high proportion of youth-specific projects: a total of 323. These findings reflect an increasing awareness that when compared to generic hostels, age-specific hostels tend to provide a better standard of accommodation, more personalised support, and safer environments.

The Homeless England database shows that only a limited number of services will accept couples, as is also the case for dogs. Several case study participants (staff and residents) stated that this can be a barrier to accessing services. Two of the participating specialist services that target long-term entrenched rough sleepers adjusted their admission policies for couples as well as for dogs, which resulted in increased accessibility.

Earlier research has shown that hostels are more likely to accept people with mental health problems now than they were in the 1990s, and that the hostels’ role in providing accommodation for those with low level needs has decreased. The findings of this research nevertheless show that only a small percentage of services purposefully targets or supports those with mental health needs (126 projects). Case study staff respondents reported feeling ill equipped to support those with significant mental health issues, and residents often face significant barriers in trying to access specialised mental health services (see Chapter 6).

Resident circumstances and experiences
In the course of the case study interviews, staff were asked to reflect on the needs and circumstances of people accessing their services. The following section highlights the key themes emerging from the interviews.

Experiences of trauma
Interviewees reported experiences of trauma to be common among residents and to be particularly severe among those who demonstrated the most complex needs. Reflecting the literature on severe and multiple disadvantage, the findings of this study suggests that these particular experiences may account for destructive behaviours, a mistrust of services, and tendencies to disengage with support:

‘Personally, I think drugs and alcohol are secondary issues. They’re a response rather than a primary issue. Once they’re there, they’re there, but the origin of drug taking is often trauma, I believe, and I call it a principled rule, I would make that assumption with someone rather than just say they’re a junkie who prefers to take drugs.’ (Front-line staff, high-support hostel)

Systematic exclusion
Residents often face acute and systematic exclusion from other services. Barriers include existing rent arrears, problematic behaviour or addictions, restrictive access criteria, and institutional stereotyping and discrimination. The participating hostels that were geared towards high-level and/or specialised support proactively targeted those individuals who other services generally considered too difficult to engage with:

‘Quite a lot of these people will have – we quite dismissively call them frequent flyers, but they’ll have been through numerous services time and time again, cycling through services, but never actually getting a good

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12 Homeless Link (2014) Supporting woman who are homeless: Briefing for homelessness services
16 This included services that only cater to people with low support needs, and restrictions on couples and/or dogs, and abstinence-based approaches.
outcome from services. So from a commissioning point of view, what I wanted to see were better outcomes from these people and a long-term move away from that street lifestyle.’ (commissioner, high support service)

**Increasing need**

Staff at hostels were generally required to be capable of supporting people from a wide range of backgrounds and have various needs, including: homelessness, people fleeing domestic violence, young people leaving the care system, people experiencing drugs and/or alcohol addiction, offending, low self-esteem, confidence and/or motivation, low literacy and/or numeracy skills, poor self-care, mental and/or physical health needs, isolation from family and/or other support networks and learning disabilities.

Several staff interviewees commented that people are presenting at their services with increasingly complex needs. Other research also indicates that those accessing homelessness services now present with a greater diversity of needs or an increased severity of needs. Case study respondents reported that especially people’s mental health needs seem to have increased, which was generally attributed to difficulties in accessing mental health services and the barriers of a dual diagnosis (a mental health problem plus substance dependency) (see Chapter 6).

‘A big frustration of my job is mental health provision. It’s not easy to get mental health referrals. When you do it can take up to six weeks and then sometimes I think they are misdiagnosed … and I think we end up with the frontline of all their mental health issues.’ (Frontline staff, complex needs service)

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17 Watts, B. (2015) Youth Homelessness in the UK: A Review for The OVO Foundation
3. The role and functions of hostels

Gaining an understanding of the effectiveness of hostel provision involves exploring the extent to which they fulfil the roles and functions they aim serve. This chapter provides an outline of the aims and purposes of the hostels participating in our case study research, and explores their approaches and interventions. Please note while these findings are based on ten individual services in different parts of England, they should not be seen to be representative of all hostel provision.

**Aims, ethos and purpose**

All participating hostels clearly defined the purposes of their services and the particular goals they aimed to achieve. Reflecting national service responses to single homelessness, all services aimed to not only provide accommodation, but also resettlement and change-focused support. Although most hostels adhered to certain service model-specific objectives and ethos, all ten hostels shared the following aims:

**Supporting independence**

The participating hostels most commonly aimed to help people progress towards independent living, with service provisions explicitly or implicitly underpinned by an ethos of change. Depending on an individual’s personal circumstances and needs, successful move-on generally entailed a move into lower support transitional accommodation, or fully independent living. Achieving independence was also conceptualised as reintegrating into society and developing personally by, for example, gaining life skills or addressing addiction, which was seen as key in not only accessing, but also sustaining accommodation.

‘I think to me the main purpose is to get the young kids ready to move on so that we know once they have moved on they’ve got all the skills, cook for themselves, clean for themselves, they can look after themselves, they can budget. So that they have that sense of security knowing they can do it all as well.’ (Staff member, young person hostel).

‘It’s not just about having a roof over your head, it’s about all of those life skills that go hand in hand to actually help people succeed when they move on as opposed to just plonking someone into a property and expecting them to flourish.’ (Staff member, medium support hostel)

Some of the high support hostels reported that, even though their ultimate aim was to achieve independence for their residents, this was not always a realistic objective because of the level and/or complexity of the residents' needs. Hostels would focus on preparatory work with individuals that were considered to face the most significant barriers to living independently, by helping them develop “softer skills”, e.g., self-confidence, self-care and improved emotional and mental wellbeing:

‘I think with this client group you’ve got to be realistic as well. Sometimes I find new staff will come and go. I think they want big, dramatic changes and they want to see huge success stories. Yes, that success story is there, but it’s a lot further down the line than we’ll be involved with, but you can lay the foundations.’ (Staff member, high support hostel)

**Offering safety and security**

The second most common aim of the participating hostels was to provide people with safety and security. Hostels have long existed as a safety net to meet people’s emergency housing needs, and resident and ex-resident participants highlighted that “feeling safe” was one the best aspects of their hostel stay. Staff portrayed safety as a right, irrespective of people’s willingness or ability to move towards independence:

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'Some people won't be ready to make a change and we need to try to keep people as safe as we can.' (Staff member, high support hostel)

'I think the transforming lives side of it, I think that's the ethos of what we're trying to do. We're trying to transform people's lives. We're trying to save people's lives, initially, and then we're trying to change them – and for the better.' (Staff member, high support hostel)

Providing opportunities
The hostels additionally aimed to deliver services and support that addressed the needs and problems that could contribute to homelessness and/or prevent people from living in their own accommodation. This occurred primarily by providing services at the hostel premises and by facilitating people's access to external services (e.g., addiction services, health services, family mediation services, social services and benefits service). All the hostels work in close partnership with various statutory and voluntary services, which in turn allows a wide range of needs to be addressed (e.g., physical or mental health problems, addiction, family conflicts, or unemployment).

'They have a network of teams working with them, we are not the only ones supporting them but we are that umbrella, we are that connection, that link that links them, you know, like a tree umbrella with branches.' (Frontline staff, high support hostel)

Service provision
The provision of holistic and individualised support services forms an integral part of the homelessness accommodation sector's move away from a mere 'warehousing' of people. Key working services, informal support, and meaningful activities have been adopted as key interventions in order to meet specific aims (as outlined in the previous section).

Key working support
With the exception of Warwick Road (case study 4), all participating hostels supported residents by means of regular and structured one-on-one support sessions, in which key workers work with residents to assess their needs. During these sessions staff compile personalised support or action plans that are geared towards self-determined goals, with a focus on supporting residents to consider the future and the options they have available to them. Through liaison with an array of family, health and social care professionals, key workers support residents’ to address an array of immediate and long-term needs such as claiming benefits, accessing health services, and moving on from homelessness:

'They gave me practical support, benefits and doctors and dentists, and then they gave me emotional support like referring me to psychologists etc. that I wouldn't have known off my own back.' (Ex-resident, high support hostel).

In general, each keyworker would be responsible for five to ten residents (although this number could increase during times of staffing pressure). Services with highly positive staff/resident interactions often emphasised the importance of establishing a close relationship with the residents.

Although each resident would usually have one allocated keyworker, some services were particularly adept at teamwork, where all staff would keep abreast of individual cases. Residents in turn valued being able to approach other staff members when needed rather than just their keyworker:

'Although I worked with a keyworker, most of the staff were aware of where I was at with that keyworker. So if I had really needed someone outside the keyworker being here, there would have been another member of staff that at that point could have filled in at least until the keyworker was working.' (Ex-resident, medium support hostel)

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Informal support

The hostels’ role in providing emotional support was a recurring theme throughout the interviews with staff and residents. Residents and ex-residents emphasised the importance of being able to share their problems with a trustworthy and non-judgemental person:

Interviewer: ‘What do you think helped the most in helping you to move on to that flat and then move on out of the hostel?’

Respondent: ‘Just being able to come down here and talk to staff. Support is a very brandished word around places like this, but to be able to think, “Oh, well, if I’m feeling like this or I’m feeling like that I can come down here and I can sit there and I can actually be honest and talk.” Because I don’t mind [staff member] telling you I was a mess when I came back here, but it was through trusting them and their support that I was able to find confidence in myself to move on.’ (ex-resident, specialist hostel)

The findings suggest that informal interactions may encourage engagement; staff report that it is often within these exchanges that residents will disclose personal problems and past traumatic experiences. These interactions were of great importance in the development of personalised interventions, and helped residents gain the trust, self-confidence and motivation to access offered support. With those who were unwilling or unable to engage in structured support sessions, staff would adopt a flexible approach and prioritise relationship building:

‘I think it’s the time, the relationship building, and then we can focus on, ‘Where do you want to be?’ Instead of ‘Right we’re going to do an outcomes star. I know we have to do this, but we need to get to know you … yes we have to do the outcomes stars, yes we have to do the case notes, but we also need to have that informal contact, to build and establish that relationship with someone.’ (manager, high support hostel)

Services and meaningful activities

Most participating organisations provided an array of services and meaningful activities such as employment support, healthy living or life-skills sessions, cooking, and film nights. Cooking sessions were the most popular activity among the residents and ex-residents. Hostels with a high level of resident engagement in activities tended to regularly offer various activities on-site, engaged residents in decisions on the activities, and used incentive schemes to encourage participation (e.g., a points system for key purchases such as a passport)

Three participating hostels offered structured in-house education, training and employment support programmes. As a recent development to hostel support programmes, employment support is less well-embedded in delivery than other support services20. Clarkson House provides an example of an innovative approach in pre-employment support by offering extensive volunteer and training opportunities on the service’s premises for both residents and members of the community.

The findings of this study support other research suggesting that activities (e.g. weekend trips, cooking classes, life skills sessions – see case study 9) can help people develop self-confidence, while decreasing feelings of social isolation.21 Staff and residents in this study also reported that activities can help minimise drug and/or alcohol consumption:

‘And there was always someone there. You are not on your own. That is good because that was what made people drink, being alone. And there are always things to do.’ (Resident, high support hostel)

‘Then in places like this I think the temptation is always there to go out and use more substances, so even if it’s keeping them in for a couple of hours.’ (Staff member, specialist hostel)

20 Homeless Link (2014) Evidence Review on Homeless Hostels
21 Homeless Link (2014) Evidence Review on Homeless Hostels
Hostel management

All participating hostels were commissioned by local authorities, and were primarily funded by housing-related support budgets (previously known as Supporting People). The participating hostels were also resourced by housing benefit and service charges paid for by residents to cover for housing management costs not covered by housing benefits.

Hostels’ rules, regulations, and approaches towards eviction and abandonment have been a subject of debate within the literature\(^2\). This section discusses the various approaches as adopted by the participating hostels, and highlights best practice in these areas.

Rules and regulations

Most participating hostels provide written agreements in regard to hostel rules, which residents have to agree with as a condition of residence. Some applied curfews (usually 10-11pm), and prohibited onsite drugs consumption. There were also rules in some projects around visitors. All the participating hostels required the residents to pay service charges, and staff generally felt this to be important in order to help people develop budgeting skills and prepare for independent living:

‘Wherever you live, whether you have a mortgage, whether you pay rent, everybody has to probably contribute something. So it is a life skill that you need to be learning really. So I do… It's a constant conversation. You can't force people, we can't take money off people but if you keep it on the agenda.’ (Staff member, young person project)

Although having a number of rules in place was common practice, the hostels enforce them to varying degrees. Two of the hostels adopted a strict approach – this particularly in relation to non-payment of service charges - which would often lead to written warnings and eventual eviction. These hostels also had a zero-tolerance approach towards drug use; at one service police were contacted if cannabis was only smelt. Both these hostels reported higher eviction rates than other participating hostels.

The other hostels have adopted a flexible approach towards rule enforcement and many opted for a harm reduction approach in regard to drugs consumption; e.g., sharp bins had been placed on site for intravenous drugs users. These services prioritised the safeguarding of residents (often leading to a relaxation of curfews, this particularly for vulnerable women) and focused on people’s assets and personal achievements:

‘Some young people have come in and their whole lifestyle is in chaos, so, no, they’re not going to stick to every single rule in the book and they are going to maybe use unchosen words that you wouldn't want them to with the staff and not pay their rent and not get up for college and not clean their bedroom. That's what happens, but it's about what battles do you fight with people, and actually what progress that you acknowledge.’ (Frontline staff, young person service)

At some services, positive staff/resident relationships were key in minimising the risk of eviction and penalty. At one service with very low eviction rates, residents would usually willingly report to staff if they could not pay service charges, which then allowed for payment plans to be arranged. Management stated that as long as they could see that someone was engaging, they would not give a warning or start eviction procedures.

Eviction

Previous research has shown that the levels of eviction and abandonment can be rather high in hostels.\(^2\) At the time of the case studies most hostels actively focused on reducing eviction rates, and emphasised that they only evicted residents as a last resort. Although warning systems were in place (which usually included

\(^3\) Homeless Link (2014) Evidence Review on Homeless Hostels
verbal as well as written warnings), these hostels prioritised communication and working with residents to resolve problems and issues. In turn they report low rates of eviction:

'We do try to prevent evictions as much as we can. Things like service charges if the customer has fallen behind, we won't just give them a sanction straightaway, we'll call them in, meet with them and see what's going on with them. Are they getting the [benefit] payments? Is there any issues going on why you've got no money? … I would say work with your customers, try and get them to sort out issues, as opposed to sanction, sanction, sanction, or eviction or whatever.' (Manager, specialist hostel).

In order to safeguard staff and residents, all hostels would evict residents for physical violence or threatening behaviour. The findings suggest that in these instances best practice would be to (whenever possible) continue working with the resident in order to avoid repeat homelessness:

'If we do get to the point of eviction we do try and manage a situation and look at solutions rather than just – because obviously, like I said, we don't want to be taking our customers off the street and then ultimately putting them back out. It just doesn't make sense.' (Frontline staff, high support hostel)

Except under very extreme circumstances, none of the hostels would permanently exclude residents and would usually welcome them back after a certain period of time (usually three to six months).

Abandonment
Participating hostels reported varying rates of abandonment. These generally occurred most often in the high support hostels, which can to some extent be attributed to the chaotic lives of some of the residents. People would usually be considered to have abandoned after a period of absence of approximately seven days.

Participating staff reported that effective prevention tactics include recognising the signs of possible abandonment (e.g., the resident is away from the hostel for more than a couple of nights per week), and engaging the individual in additional support whenever possible:

'So we take every step, so if we think somebody has abandoned or getting into abandonment, there’s usually a sign, more than two or three nights out a week … we say what is it, do you need us, what’s working.' (Staff member, high support hostel)

When a person has abandoned or disengaged, the findings suggest that it is important to maintain communication. This can take place in a number of ways, such as by trying to call/contact the person directly, and by communicating with the police or local outreach team. Outreach work was considered to be particularly effective in engaging/supporting entrenched rough sleepers:

'Someone might be here for a few days and go back to the street, it might not feel right for them, and the outreach work, I think the beauty of that is that they can go out, engage with them on the street and they've not burnt their bridges by abandoning.’ (Manager, specialist service)

Respondents from the two young person services felt that individual cases were often mistakenly classified as abandonment. Young people would often fail to inform the service that they had returned to their family (this possibly as a result of successful mediation work).

Specialised approaches
With generic services in the majority, there are fewer hostels in England which exclusively support those experiencing special needs and circumstances (see Chapter 2), which could be attributed to their lower staff/resident ratio and associated higher costs of delivery. However, given the difficulties that generic providers report in supporting people with mental health problems, substance abuse issues, and chaotic behaviour, specialised services may at times be more effective.
Alcohol intervention services
Two participating hostels operated as specialised alcohol intervention services, offering accommodation and support for those who are simultaneously homeless and alcohol-dependent (see case study 3 and 10). Residents generally comprised highly vulnerable individuals with experiences of long-term rough sleeping and disengagement with services.

These services operate as “wet houses” where residents are allowed to consume alcohol on site under closely monitored and regulated conditions. These services adopt an ethos of harm reduction with people being supported in minimising intake within a safe environment that provides access to support and other services. The findings suggest that (where properly applied) this model can be beneficial by for instance reducing harm to residents, engaging entrenched rough sleepers, minimising disruption to the wider community, and prohibiting displacement of people.

Complex needs provision for entrenched rough sleepers
One of the participating hostels operates as a specialised service for entrenched rough sleepers (see case study 5). After consultations with their target group, Brydon Court designed their service to ‘work with them in their way rather than our way’ (Staff member). Traditional models of delivering hostel-based support (which usually cover scheduled key working sessions and support plans) are not applied, with staff addressing the residents’ needs as and when they arise. The hostel has carefully geared their rules and procedures to the needs of this client group, implementing minimal rules and having a flexible approach towards abandonment, and residents being able to repeatedly access the hostel:

‘Yes, they abandon, and a lot of hostels don’t let them re-refer for a period of time, or they might have left with some arrears and that becomes a barrier. We try to not have those barriers here because we understand that that is part of the process, with this particular client group in particular.’ (Staff member)

Brydon Court provides an example of a service that is highly responsive to the needs, circumstances, and preferences of entrenched rough sleepers, with particularly good outcomes in relation to primary care uptake.

Women-only services
One participating hostel operated as a specialist service for women with multiple and complex needs. The experiences and needs of its residents (which often included experiences with domestic violence, trauma, and mental health issues) make the provision of a safe space where these women can access other services particularly important:

‘I think it’s about creating a safe, women-only space, about helping people engage and stabilise and ultimately it’s about helping people to move on.’ (Staff member)

By working closely with local services targeting sexual exploitation and domestic violence, Francis House seeks to understand and respond to the specific needs of women. Via these networks residents can access one-on-one dialectal behaviour therapy that acts as ‘precursor to doing more formal therapeutic intervention [and] helps women to prepare for doing some more in-depth emotional resilience work’ (staff member). The service performs particularly well in regard to move-on targets (see case study 1).
4. Effectiveness of hostels

This Chapter explores the role of hostels in tackling homelessness. Drawing on findings from interviews with staff, residents and partners, it presents the main outcomes and achievements of hostels, and then discusses the key factors contributing to their effectiveness. The final section presents opportunities for further developing hostel provision.

Monitoring outcomes

What outcomes are measured?
The previous Chapter explored how hostels not only aim to provide accommodation, but also to support people in making the needed changes for reintegration and independent living. Measuring outcomes allows the changes and benefits for individuals resulting from the support to be captured.

Reflecting the hostels' primary aim, the most commonly measured outcome among case study participants consisted of the percentage of residents that had achieved planned move-on. The number of planned and unplanned moves provides a key performance indicator that is used by local councils, funders and commissioners to monitor the success of different housing pathways and supported accommodation providers. Services will usually record moves quarterly on an online workbook or spreadsheet. Councils and funding contracts generally provide guidance and definitions to ensure that moves are correctly identified.

A planned move usually comprises a move to a more independent living arrangement as agreed with the resident within their support plan. This step does not necessarily consist of residents moving into their own tenancies, and can be a move within a housing pathway to another accommodation provider. An unplanned move is usually defined as eviction, abandonment, or another unplanned move (e.g., a return to rough sleeping). As explored in Chapter 4, hostels increasingly focus on reducing the number of unplanned moves.

However, hostels have a wider focus than just people’s progression through housing pathways. All participating hostels sought to capture how their services affected people’s lives across a range of dimensions, and the measured outcomes would to some extent correlate with the specific interventions that the hostels were delivering. For example, three participating hostels that provide structured education, employment and training programmes, measured participation rates and resultant benefits for individuals (e.g., qualifications and/or experience gained).

Most participating hostels used the Homelessness Outcomes Star (explored below) to explore an individual’s progress across the following key indicators: motivation and taking responsibility, self-care and living skills, managing money and personal administration, social networks and relationships, drug and alcohol misuse, physical health, emotional and mental health, meaningful use of time, managing tenancy and accommodation, and offending.

All participating hostels also consistently collected basic demographic information on those accessing their services. This was generally compiled at the point of referral or during early needs assessments, and then used to demonstrate the level and nature of client need for their services and to identify areas for future service development. For example, one participating youth hostel noted that, while most residents (87%) left in a planned positive way, 13% of predominantly white males would not. This service then planned to work more with this particular cohort of young people in order to prevent them becoming entrenched rough sleepers.

How are outcomes measured?
A recent scoping exercise by Homeless Link showed that there is currently no standard monitoring framework to measure outcomes for hostels and other homelessness services. These findings can be seen reflected in this study, with the different hostels showing no unified approach in measuring outcomes but rather using

various tools to systematically collect outcome information over a period of time. These tools included the Homelessness Outcome Stars, a New Direction Team assessment (NDT) (Chaos Index), bespoke quality assessment frameworks, the old Supporting People monitoring framework, the In-Form Case management system, ATLAS, and localised spreadsheets. This lack of a unified approach in measuring outcomes tends to complicate the aggregation and systematic assessment of data across different hostels.

Eight participating hostels used the Homelessness Outcome Star (HOS) with residents to track their progress. The HOS is widely used in the homelessness sector, and allows an individual’s progress to be measured in ten areas (see above). Hostel providers were generally positive about the HOS and overall felt that it supports the key working process, with the Star for example being used to initiate conversations on an individual’s particular problems and needs. Participating organisations also valued the HOS for its client focus, with its theoretical foundation positioning the individual as the driver for change.

‘The outcomes star actually helps in that process because the client can take some ownership of what’s going on, whereas the support plan, the danger with just the standard support plan is that the member of staff can always tell the client what they need to do.’ (Staff member, medium support hostel)

Some frontline staff did however criticise the funding requirements of certain hostels that stipulate that the HOS should be completed in the first week of a resident’s stay. Staff reported this to be particularly difficult for the most vulnerable residents and/or those unwilling to engage, and said that building trust and relationships with residents should initially take precedence. A few of the support staff also commented that in the past some hostels had not provided them with the instruction manuals that go with the HOS, which then resulted in a lack of understanding about its effective use.

**Key issues in measuring outcomes**

Interview data suggests that simple metrics - such as rates of planned and unplanned move-on - do not adequately capture the nature and range of outcomes as achieved by hostels. Participants emphasised that progress can take time, and that people may have made much progress towards their goals even when ultimate outcomes have not been achieved.

‘Though it may sound obvious, making our recording systems and questioning fit an individual’s circumstances is of paramount importance. For example, for someone who is multiply excluded, who never stays somewhere for more than a couple of weeks, being able to maintain their accommodation for two months may be evidence of great support in ‘maintaining their tenancy’, even though they ultimately abandon. On the next stay, that individual can be supported to identify what worked to make them stay longer, and what ultimately led them to leave, and whether anything could be done to increase their stay even longer?’ (Manager, specialist hostel)

There was some indication that hostel providers prefer outcome metrics that show an individual’s progress regardless of the end outcome. Cases where a preferred end goal was not reached were used by some hostels as a learning opportunity so as to improve and/or better tailor their support.

Several providers also emphasised that outcomes which may seem trivial may in fact signify significant progress for individuals. Because of the complex and multiple needs of hostel residents, particularly high support hostels would encourage and value small changes that people make:

‘I think we have to be pragmatic about it. I think sometimes it’s just something really small, but it’s a seed and it’s the thing that you keep building on.’ (Staff member, specialist hostel)

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25 The NDT assessment allows clients’ needs and risk factors to be assessed across ten areas: Engagement with frontline services, intentional self-harm, unintentional self-harm, risk to others, risk from others, stress and anxiety, social effectiveness, alcohol/drug abuse, impulse control and housing.

'Presumably, what do you mean by an outcome? For some people, just getting them from here to there on time could be a huge leap forward, couldn't it.' (Staff member, high support hostel)

Staff at these hostels considered it to be a far reach for some residents to gain employment and/or an independent tenancy. For individuals with complex needs who face severe and multiple disadvantages, small changes – such as keeping appointments or eating regularly – are already a significant achievement, which hostels recognise and celebrate. The findings suggest that in the course of their daily work with the residents, hostels often assess and monitor people’s process in terms that are not required by funders or commissioners. Support plans of the high support hostels often focus on working with residents in setting realistic expectations and achievable goals, thereby setting the stage for more significant progress.

Key achievements and successes
During the interviews, hostel providers, residents and partners were asked to report on their hostel’s key achievements. This section combines their feedback with available outcomes data to provide an overview of hostels’ main successes.

Moving people on from homelessness
Findings suggest that hostels play a key role in helping people move out of homelessness. The case studies appended to this report provide individual service data, and records show positive planned move-on rates between 52% to 90%. Hostels providers stressed that the rates of planned move-on are affected by wider structural factors that are often specific for different geographical regions (see case studies). As outlined in Chapter 6, the majority of hostels faced significant challenges in moving residents on; this often because of a lack of good quality and affordable housing. Despite these barriers most participating hostels supported a significant percentage of their residents to move-on from homelessness:

‘This place gave me a lifeline, not only when I lived here. But I was a bit of a bad case when I came here, I was drinking, I was nasty, but they supported me and to move onto my own accommodation, they still support me. I can come here anytime’ (Ex-hostel resident).

Several former residents also reported that the hostels had been instrumental in helping them transition to independent living, and they particularly valued that they were able to access support that was tailored to their personal needs. For example, one resident reported that the hostel helped her deal with trauma from a past violent relationship (this partly by helping her access counselling), and that the hostel helped her to gain the needed confidence and self-esteem to move on. Her narrative reflects the approach that many of the hostels have adopted in positioning the individual as the key driver for change:

‘So, basically, I’ve had issues when I was living here, but I’ve done it and moved out of here, I’ve done it myself with their help and I’m proud of what I’ve done … I think kind of being here has given me a little bit of self-worth back.’

‘Int: what were the best aspects of this hostel?’
‘Res: getting your independence back.’ (Ex-hostel resident)

Addressing immediate need
Some commissioning and other key partners felt that hostels were particularly adept at meeting people’s immediate need for accommodation and other basic resources:

‘I mean, hostels really work in the sense that for some people they put a roof over their heads, and a lot of them started in that way, really, as a kind of emergency provision and a response to an immediate need.’
(Commissioner)

Although interviewees recognised that the role of hostels in the UK now far surpasses mere accommodation provision, helping those in an immediate housing crisis to access key resources was nonetheless seen as an
important part of their role. Several partners emphasised that hostels form an integral part of local housing pathways and offer an important “through route” to longer-term accommodation arrangements:

‘I think that hostel provision is absolute must for getting people to the right accommodation because you can’t pick someone off the streets or off somebody’s sofa and put them into accommodation without knowing how that person functions and what they really want and need.’ (Council partner)

Resident interviewees also particularly valued being provided with a warm, safe and secure environment which offered holistic support. When asked what difference the hostel had made for them, several residents and ex-residents commented that the hostel had saved their life:

‘I’ve got a fantastic support worker. I’ve got a good alcohol misuse worker. I see complex needs. You know, I’ve got it all and if it wasn’t for this place I’d probably be dead in a gutter now. I would be.’ (Resident, high-support hostel)

Tackling exclusion and system barriers
Some hostels were particularly successful in engaging long-term rough sleepers and people with complex and unaddressed needs and problems. For example, staff at Brydon Court (case study 5) reported there to be only two entrenched rough sleepers in Manchester that the hostel could not work with, which provides a clear example of the hostel’s success in supporting those considered to be “high risk.” Their inclusive approach has brought about a range of positive outcomes for individuals accessing their services, such as a dramatic increase in engagement with primary care services (see case study 5). Within this hostel’s focus on eliminating the type of system barriers that could exclude vulnerable individuals, they can be seen to reject the popular notion that some people are “too hard to reach” (see resident case study 1).

Hostel partners also reported that specialised and complex needs hostels were particularly successful in supporting and engaging those that other services would not work with. In some cases this required a wider system change and city-wide effort to improve pathways into services, with services working in close partnership to identify access barriers:

‘So just gradually I think what we’re working towards is a much more cohesive system, a better thought out pathway, that whole thing … we don’t want those people not to have a service so it’s about opening doors for those people and making sure that they’ve got an access to the services.’ (Commissioner, specialised service)

Developing people’s capacity to live independently
The findings show that hostels play a key role in helping vulnerable individuals gain independence and reintegrate into the community. Resident and ex-residents reported that the hostels’ services (such as life-skills courses, volunteering opportunities, and informal emotional support) had helped them gain skills, motivation, and confidence:

‘You feel safe, this is the word yes, you feel safe here. You feel like it’s your second home … you can tell when you see the guys, when they come here they’re a bit shy and closed with themselves but after a while they feel really at home here. It kind of pushes you like, you have an attitude like you renew yourself again, you feel different, you feel like you can start fighting again. Yes, you feel like the storm has gone and you feel like you open yourself to the bright future.’ (Resident, medium support hostel)

The findings suggest that hostels perform particularly well with the often more immediate “softer outcomes” such as changes in attitudes, self-perception, and skills development. Although softer outcomes are more difficult to capture than “harder outcomes” (like getting a job or moving into permanent accommodation), they are nonetheless widely seen to be particularly important in helping service users make progress and bring about personal changes.27

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27 Welsh European Funding Office (2003) A Practical Guide to Measuring Soft Outcomes and Distance Travelled,
Feedback from the residents and partners suggest that the high support hostels can be effective in helping people with drug and/or alcohol addictions to reduce use. Feedback from the interviews reflect a wider body of research suggesting services informed by a harm-reduction approach can be more effective in engaging homeless people with a substance misuse problem than projects focusing solely on promoting abstinence:

'It’s probably I’ve been clean for a year now, on my feet again, and I don’t think I could do it just out there, okay I do have my blips, but I’m having a lot less blips than I would do.’ (Resident, high-support hostel)

‘Even the small step are positive things, for example, drug or alcohol intake reduction … so from 10 cans to five cans a week. Then of course when they are more sober and they are able to give more attention about their personal appearance and how they keep their rooms and so forth, and becoming more independent, then hopefully they can then move down to other satellite properties.’ (Strategic commissioner, high support hostel)

Resident Case Study 1: George’s Story

George slept rough for six years, and despite numerous service offers never stayed in a hostel as no place allowed him to keep his dog. During this time George never saw a doctor or claimed welfare benefits. Mayfield House (case study 8) changed their no pets policy and started accepting dogs in order to offer George a room. The hostel also supported George to claim benefits and to access a local vet, as well as a GP. Three months later George had moved into his own property, which was provided by a local housing association.

Reflecting on his hostel stay, George said: ‘I would not have come here if I couldn’t have had the dog … it gave me a space where I felt comfortable and I could get myself back on track, if it weren’t for these guys I wouldn’t have done it’.

Key learning points
The appropriateness and effectivity of linear approaches (particularly for those with complex needs) has received significant criticism in recent years. The hostels in this study do, however, provide examples of projects that offer more flexibility than straightforward linear models, with residents being allowed to move back and forth within housing pathways when necessary. This section explores staff, partners and resident’s views on the key factors which contribute to hostel’s effectiveness.

Staff team and working culture
When asked to share key learning points, interviewees emphasised the importance of the hostel’s staff itself, with personal attributes such as tolerance, compassion, and an ability to relate to residents being highlighted as particularly important. Senior management often prioritised these personal attributes above formal qualifications:

‘Always treat them [the residents] and talk to them how you would want to be treated and spoken to. You can teach anybody to use the computer and to do In-Form and paperwork, but you can’t teach people how to be with people.’ (Frontline staff, high support hostel)

Residents and ex-residents felt that the positive, supportive and non-judgemental approach of hostel staff was one of the best parts of staying at a hostel. Individuals struggling with addiction emphasised that the tolerant and understanding approach of staff helped them to look positively towards the future:

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‘And really, particularly here, the fact that I drink didn't make any difference to being here. I was allowed to have the dog here. And I was made to feel, “Okay, you screwed up, but that doesn’t matter. Now is the time to put things back in place and get things right again”.’ (Ex-resident, specialist hostel)

Findings suggest that a supportive working culture contributes to both high levels of staff morale and positive attitudes towards residents. Problematic or disturbing behaviours as exhibited by people with past traumatic experiences can prove to be particularly distressing for frontline staff31. Given the challenges associated with frontline support work, managers stressed the importance of ensuring ongoing staff support, training, and opportunities for career development.

The hostels operating on the basis of a Psychologically Informed Environment approach32, appeared to be particularly adept in fostering a supportive environment, giving staff opportunities to air their grievances and frustrations and in turn increasing staff morale, as well as retention. The findings suggest that low rates of staff turnover provide residents with a sense of security and stability, and facilitate the development of professional staff/resident relationships.

**Staff/resident interactions**
The importance of positive and trusting client/staff relationships in the provision of support for vulnerable people is well established within the literature.33 The findings indicate that relationships are a key factor in achieving positive outcomes; this for instance by encouraging resident’ engagement in available services and activities:

**Int:** Can you tell me, what helps in preparing people to move on?
**Res:** I think it’s having the right kind of bond with the residents. From my experience anyway, from working here, if you don’t have that sort of bond with them, if they don’t trust you, they just don’t like you, then they’re not going to sit there and listen in a session. They’re not going to want to come into a cooking session with you.’ (Ex-resident and current volunteer)

The findings show the following factors to be central in fostering effective interactions within a hostel setting:

- **Temporal factors**
  Staff/resident meetings at the onset of an individual’s support process, may impact the quality of subsequent interactions. The services that successfully engaged those with complex needs, prioritised getting to know residents above initial risk assessments. These settings would communicate with referral agencies and partners as an alternative way of establishing risk and need.

  Flexibility in the scheduling of key working sessions as well as night time support (when needs are often at their greatest) were also key in encouraging engagement. For example, a staff member commented that scheduling a 9:00am appointment with someone who struggles to wake up was nonsensical (according to a resident this was the usual practice in a previous hostel where sanctions for non-engagement were common).

  Several residents and ex-residents commented that staff taking time to talk and listen was what they liked best about the hostel, and that this was key in addressing their problems:

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'They will sit there and listen to you ramble on for hours. If they know it's troubling you... I know I've sat in here and cried my eyes out to a couple of the staff when I used to live here. I'd just feel really shit. I don't know what to do, and they will just sit there as long as you need them.' (Ex-resident, high support hostel)

- **Physical environment**

Residents reported that a comfortable and welcoming hostel environment helps stimulate engagement. One participating organisation did not have a private room reserved for support sessions which severely interfered with people's privacy; this was particularly problematic when individuals were in crisis. Having a private space reserved for key working sessions was particularly important for many of the resident interviewees. For residents who were reluctant to engage staff would adopt a flexible approach; e.g., by meeting in an outside area.

'I think firstly there should be good and friendly staff. Also, the accommodation you are in is a safe area and clean obviously, because I want to be in a clean environment.' (Resident, high support hostel)

- **Flexibility and adaptability**

Hostel providers and partners considered a flexible and adaptable approach to be key in encouraging engagement and meeting people's needs. For example, while most hostels limited the length of time that people could stay at the hostel (ranging from six months to two years), this was assessed on an individual basis, with exceptions being made on the basis of needs and the availability of appropriate move-on accommodation.

Residents especially liked the flexible approach of the participating hostels; this particularly in relation to warnings, evictions, and curfews.

'Well, there are other hostels, like there's the [name of local hostel] and it's really strict. They'll throw you out, just for nothing, don't they? Whereas here, they're really laid back ... if someone relapses and comes in, they give them a chance.' (Resident, medium support hostel)

This study found some evidence that a flexible approach can help promote positive social networks and relationships. A resident commented that he was able to stay with his dad and care for his son three nights a week since the hostel allowed him to stay off-site during this time. Staff also considered a flexible approach to be essential in the case of rules and regulations, as well as for the content, location, and scheduling of key working sessions (see above):

'I would say that you definitely have to have boundaries, rules and be prepared. Yes, you do have to be prepared to shift from them from time to time.' (Staff member, high support hostel)

Hostel partners and commissioners also commented on the importance of a flexible and adaptable approach in the funding and commissioning of services so as to avoid homeless people being accommodated or supported in a succession of short-term service arrangements:

'It's being able to bend the rules a little bit and be flexible, so you might pull a service because they've come here but it may be really useful to have both services for a small period of time. That would be an issue about double funding, for instance, and for me the learning curve with that is invest to save because you might put two services in to do a handover for a little bit of time and pull one out gradually and that will still solve somebody doing the revolving door.' (Commissioner)
Move-on accommodation
All participating hostels were part of larger organisations that offered additional accommodation options for residents who demonstrated an increased readiness for independent living. This accommodation was usually located within or near the hostel’s main building, enabling residents to be more independent whilst provided with continued access to the hostel’s support services. Although this accommodation does not represent full independent living (e.g., a tenancy in the private rental sector), it does represent a positive move-on within existing housing pathways to a more independent living arrangement. The rules and regulations of these accommodation options usually differ from those at the main hostel building (for example, residents can receive visitors). Engagement with support and/or treatment services, active engagement in Employment, Education and Training, and timely payment of service charges, were key criteria in determining eligibility.

Feedback from the residents supports other research which suggests that move-on accommodation may increase motivation and support the development of life skills. Findings from this study also suggests that a move to this type of accommodation can be a positive experience for those who still need further assistance (e.g., 16/17-year olds) and are able and willing to engage with the available support:

'It put me on the straight and narrow, helped me to move on, to focus from being here to wanting to move to, which is one more step up the ladder from that to the next.' (Former hostel resident)

'I was in two rooms. That one just there and then one upstairs for about six weeks, I think. And then I moved into the flat upstairs. So I was able to live on my own, knowing that that support was there and got myself back into the routine of looking after a flat, which for me was good, because I had had problems … I felt that because in a lot of ways they’d had some faith in me moving into a flat, I felt I had to repay that in some way by making it - to keep it right.' (Former hostel resident)

What residents and ex-residents liked most about living in hostels:

- Access to activities and external services
- Being given the time and space to progress at their own time and pace
- Feeling safe and secure
- A hostel’s flexible approach on rules and regulations
- Having a private room
- Open door policy; being able to approach staff without an appointment
- Receiving help to move to independent living
- Staff being non-judgmental, caring and understanding
- Staff dedicating time to getting to know them and receiving assistance that was holistic and tailored to their personal needs

Partnership working
One of the main factors contributing to the effectiveness of the participating organisations, was the integration of external agencies into the hostel’s services. This integration often started with relationship building, where hostel providers would attend regular meetings with external agencies to explore better ways of working together. Some of the hostels reported working with a wide range of agencies where besides the police, probation services, and drugs and alcohol providers, relationships had been formed with community groups, universities, and faith-based organisations. Partnership working was essential in ensuring that individuals could be supported in a wide range of needs, and were an aspect of hostel provision that residents and ex-residents particularly valued:

‘Well since I’ve been here, they’ve been very helpful to me in mostly everything, whatever I’ve needed they’ve been there, support with a key worker, support in anything I needed … even if they don’t do it here, they refer you to a place and they can help you.’ (Resident)

Hostel partners and commissioners also reflected on the positive links that the participating hostels had with local organisations. In some areas hostels could be seen at the forefront of best practice in supporting those with complex needs:

‘Roundabout has been really involved in quite a lot of the strategic work around young people in the city and I think it’s helping to inform Sheffield as a city of the kind of provision that we want to see.’ (Commissioner, young person hostel)

Opportunities for improvement
This section summaries feedback from hostel providers, partners, and residents on how hostel provisions could be improved.

Activities
The findings suggest that the range and frequency of the hostels’ activities could be enhanced. Residents felt that boredom was one of the most negative aspects of living in a hostel, and that this could be alleviated by offering more activities on-site. Some residents commented that they would like to have more of a say about the type of activities that were provided35. The study found that in particular excursions off-site would rarely occur – this in spite of the fact that both staff and residents felt these to be helpful in reducing social isolation, encouraging engagement, and achieving softer outcomes:

‘A lot of people don’t want that [on-site activities], they want to get out and explore things. A lot of people come in hostels and they just lock themselves in, they only go out when it’s necessary and all they can do is lay in a room.’ (Hostel resident)

Access to specialised health and well-being services
Hostels generally performed well in helping residents access general health services (such as a GP registration). Feedback from the residents does suggest however that improvements could be made in helping residents’ access specialist mental health services as well as emotional support, counselling, and advisory services. Staff, management, and partners reported poor cooperation between hostels and local mental health services, and services generally faced significant difficulties in helping residents access these services. These barriers were compounded by challenges of a dual diagnosis, lack of understanding/stigma from local services, long waiting lists, and outdated/slow referral processes (e.g., via postal referrals rather than online or by phone).

Move-on opportunities and floating support
Staff, residents, and partners highlighted a lack of ongoing or floating support once a person moved on from a hostel. Although in the majority of areas a local voluntary or statutory agency would provide resettlement support, this would often only commence a few weeks after the person had moved into an independent tenancy, and was generally time-limited. Respondents also reported a lack of continuity in regard to the staff members providing this support, and in some cases the strong professional relationships existing between staff and residents (see above) would end abruptly when a person moved on.36 The findings of this study suggest that improved resettlement support could help prevent repeat homelessness:

35 Some hostels changed the nature and range of activities following resident consultation.
36 Several hostels allowed ex-residents to continue to access hostel services on an informal basis.
‘Difficult when you move out as well, because you haven’t got the support straight away have you? It gets kicked out from underneath your feet and if you’ve been a drug user or you’ve been a drinker, a lot of people turn back to that don’t they.’ (Ex-resident, high support hostel)

‘I think we need to get more imaginative about move-on and I think that’s an issue across our housing-related support services. I’d like to get a better understanding of what happens after somebody leaves here … what we don’t want to see is that person coming back through so I would like to see more resettlement.’ (Commissioner, medium support hostel)

Rules and regulations
Earlier research suggests that residents often feel that hostel rules and regulations are unnecessarily restrictive. This sentiment can be seen reflected in this study, with many residents commenting that the ban on visitors was what they liked least about living in a hostel. One interviewee said that this ban, along with the absence of an alternative communal space for visitors, stopped him from keeping up a relationship with his children:

‘Because in my [previous] rented house, Saturdays and Sundays they would come … last four days I’m depressed without kids, first time without birthdays.’ (Resident)

The findings suggest that hostels could make improvements in this area (as certain participating services had already done) by means of alternative arrangements, such as by allocating a section of the premises to visitors, or by allowing day time visitors.

‘It wouldn’t be a bad idea actually to have a few hours a week where there’s an open time slot where outside visitors could actually come and see the residents here.’ (Resident)

Residents disliked curfews, as well as rules prohibiting residents to enter each other’s rooms, and felt that these rules were at times applied in an inconsistent manner. Some hostels allowed women to enter the hostel past the curfew hours (considering them to be particularly vulnerable), and this was fervently disputed by male residents who also felt at risk when sleeping rough. Some residents mentioned the strict approach of other hostels where they had stayed, where breaches of the rules were often followed by sanctions and evictions and where exceptional circumstances were given little consideration. These stricter settings were generally experienced as institutional, and reminded some respondents of earlier prison experiences. Several residents also disliked the regular room checks carried out by most hostels, and felt that this practice contributed to a lack of privacy and autonomy.

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Difficulties of communal living
Residents felt that conflicts and disagreements between residents were one of the most disagreeable aspects of living in hostels, where individual problems and the tensions of communal living would at times escalate. In some short-staffed hostels (see Chapter 6) this was found to be a particular issue at night time when support was limited. Some hostels had security or non-support staff present at night, and at most (but not all) hostels, residents generally considered them to be supportive and approachable. Some partners felt that people were sometimes wrongfully placed in hostel settings because of a lack of diversity in provisions:

‘Sometimes you just get placed the wrong person and because we don’t have an array of provision in the city, or as much as we would like, you’re working with what you’ve got. You might get somebody who needs more independent living but you can’t do that because you can’t put that person, because of their behaviour, in the community … that’s an issue for the city.’ (Hostel partner)

Catering
At the hostels offering catering most residents felt that the range and quality of food could use improvement. Residents also liked to be able to access snacks outside regular mealtimes (some hostels had facilities where residents could make toast in the evenings). The importance of food in these type of settings should not be underestimated, and findings suggest that this aspect of hostel provision can positively contribute to the residents' wellbeing.

How do hostels make a difference?
Hostels affect people’s lives across various dimensions, and the findings support earlier research in regard to their role and impact far surpassing the mere provision of accommodation. By providing access to a wide array of support services on the basis of effective partnership-working, hostels can enable people to live independently and ultimately move on from homelessness. Even when those with very complex needs may not be able to immediately progress to full independent living, hostels nonetheless support people in making positive changes across a wide range of outcomes such as improved self-confidence and self-esteem, life-skills, motivation, and improved financial skills. Interviews with residents and ex-residents indicate that these benefits can in turn lead to harder outcomes, such as accessing and sustaining independent tenancies. The quality of the staff team, strong staff/resident professional relationships, a flexible and personalised approach, the availability of move-on accommodation, and effective partnership-working, are key factors in ensuring a hostel's effectiveness.
Challenges and Opportunities

This chapter explores the factors that impact a hostel's effectiveness, as well as innovative practices that are being applied amidst resource constraints.

Challenges

Funding

Homelessness services in England currently face the challenge of having to meet increasing levels of demand with diminishing resources. In a recent review of the sector, 47% of the responding accommodation providers reported decreased funding over the past 12 months.

Several hostel providers and partners raised concerns in relation to the sustainability of current funding arrangements. Following cuts to local authority budgets and recent reductions in funding for housing-related support, participants reported being expected to 'do more for less':

‘I think funding and funding and funding! It’s the constant cut to budgets and constantly having to do more for less that is a real challenge and that is with commissioned services in general’ (Partner, medium support hostel)

In the course of the case studies, various services highlighted interesting practices which were affected by funding cuts. The onsite counselling services that were provided by two of the participating hostels had to be discontinued; this despite ongoing challenges in meeting the residents’ mental health needs. Another service faces the prospect of having to suspend their therapeutic services such as massage, self-help classes, and homeopathic remedies.

Partners and commissioners highlighted a lack of provision to meet lower-end mental health needs, and emphasised that these problems could escalate if people were not given the needed support:

‘A lot them need things like talking therapies, and the only sort of offer really most of the time seems to be to get someone to a GP and into secondary care, and then that tends to be the route to the psychiatrist, so you don't get the talking therapies, you might get the drugs, but often they don't meet the threshold, so they're not considered for a service’ (Hostel partner)

For several of the participating hostels the lack of floating support for residents after having moved into tenancies presents a further challenge, with the previous tenancy support in some cases having been removed or scaled back.

The findings of this study are supported by Homeless Link’s 2016 Annual Review of support for single homeless people in England, which reports an ongoing decline in the number of projects and bed spaces in recent years. The Annual Review also shows the impact of funding cuts across a range of areas, including staffing decreases and a reduced ability of services to support people with complex needs.

Staff recruitment

As discussed in Chapter 5, the skills, experience, and enthusiasm of staff are key to a hostel’s success. Some respondents reported that following financial challenges discussed above, salaries for support staff have been reduced. Current wage levels can make it difficult to attract staff with the needed personal attributes to work in an (often challenging) hostel environment. Some services reported ongoing issues with staff recruitment, and were understaffed at the time of data collection.

One of the hostel managers commented that because of the lower wages, support work has become less vocational, and that applications for vacancies at their service are usually received from university graduates. A support worker explained the impact of this change:

‘The advantage of that is that you get people who have a basic level of academic ability, often very enthusiastic and motivated and want to help vulnerable people. What you don’t get is life experience … a lot of them have never seen the things they will see here, so you have lost that a little bit.’  (Staff member, high support hostel)

As discussed in Chapter 5, residents often find hostel rules and regulations unnecessary and restrictive, and commented that the ban on visitors was what they liked least about living in a hostel. However, staffing constraints sometimes lead to staff having to work alone, or generally low staff to resident ratios, with restrictions on visitors having to be in place in order to safeguard staff and residents.

Staff/resident interactions
Interviewees reported that staffing constraints can limit support and increase pressure for individual staff members. At two of the participating hostels staff frequently worked alone in the weekends and evenings, which then impacted the assistance they were able to provide, e.g., their ability to support women to attend appointments, or to sit and talk with a resident who may be emotionally distressed:

‘That can be a little bit frustrating, because you are dealing with so many things at once, sometimes you haven’t always got the time to sit with someone who just needs to talk and then make them feel like that might be a turning point for them.’ (Front-line staff, specialist hostel)

Several frontline staff felt that these pressures impacted their ability to build relationships, communicate with residents, and provide emotional support; all crucial elements of a hostel’s effectiveness:

‘I think when we were doing all the support with people because we’ve cut staff down because obviously, cutbacks. We had time to spend with people, we had time to talk to them, we had time to, you know, the door was always open. If they wanted to come in and chat, you know, whereas I think the hustle and bustle of everything now has completely changed that scenario.’  (Staff member, high support hostel)

New Psychoactive Substances (NPS)
The availability and impact of inexpensive (and until recently) unregulated NPS presented a key challenge for many of the participating hostels. Synthetic cannabis substitutes known as “Mamba” and “Spice” are reported to have further pressurised local support systems and public services (e.g., the local NHS). Users can have unexpected seizures, behave in erratic and violent ways, and bring significant disruption to a hostel. One manager commented that although someone may not become homeless because of these substances, they can lead to people becoming quickly entrenched.

Among the interviewees, opinions were divided about the impact of the Psychoactive Substance Act 2016 that prohibits the production and supply of NPS. In one case staff noted a marked reduction in the use of these substances following the Act, but another service reported increased uncertainty about the ingredients of NPS and its intermediate/long term effects.

Dual diagnosis
Staff reported that homeless people who struggled with drugs and/or alcohol addictions, often face barriers in accessing counselling and other mental health support services:

‘So, it’s a catch-22. They drink because of their issues, but they can’t deal with their issues until they’re sober.’  (Staff member, high support hostel)

‘With the mental health, if they’ve got an alcohol problem and mental health, they’ve got to address their alcohol problem before they can address the mental health, but there’s reasons why they drink, to block out whatever could have happened to them in the past, as a child or whatever time.’  (Staff member, high support hostel)
Reflecting earlier research, respondents highlighted an ongoing scarcity of community mental health services and a general reluctance of services to work with those with a dual diagnosis\(^{40}\). Staff also raised concerns about their own skills in supporting people with mental health problems, and expressed a desire for more training in this area.

### Barriers to move on\(^{41}\)

All hostels reported facing significant challenges in relation to moving residents on from their services, with a lack of affordable housing being identified as the main barrier. Further barriers include: i) insufficient social housing; ii) those with existing rent arrears for council accommodation cannot be accepted until they are cleared; iii) residents have not maintained or sustained tenancies when previously resettled; iv) poor health and disability can impede move-on for those who, for example, were discharged directly from the hospital to the hostel; v) the residents may resist moving on; and vi) couples may face particular barriers in renting from the private sector.\(^{42}\)

### Welfare Reform

Hostel providers reported that the recent raft of welfare reforms has posed further challenges, and has impacted their ability to support people to move on from their hostel. Several respondents highlighted the lack of accommodation available on the Local Housing Allowance or Shared Accommodation Rate, and reported that landlords are generally reluctant to accept people who are homeless or in receipt of Housing Benefit:

> ‘All Housing providers are under pressure now on smaller accommodation because of the bedroom tax, so that’s affected some of the social landlords as well, there’s less available’ (Hostel Manager, medium support hostel)

At the time of data collection, Universal Credit had not yet been introduced to the local areas where participating hostels were based. Some participants however expressed concerns of the impact of Universal Credit and highlighted the risk of people following into arrears due to delayed payments and the shift to monthly benefit payments.

> Yes, one thing we’re trying to get a lot of people prepared for, especially those that are on long-term benefits, is obviously the change to universal credit. The biggest thing is going to be getting paid monthly, rather than fortnightly, and having to wait five, six weeks for that first payment and how you manage in the meantime and also getting the rent direct to them causes a lot of anxiety for people, especially those that have got addiction issues (Partner, high support hostel).

> ‘Okay, yes, so Universal Credit has had a real impact where it’s been introduced. We’ve seen an increase – similar to lots of housing associations – in arrears. Yes, there is a fear, obviously for our client group, that they will find it difficult to manage those monthly payments a’ (Manager, medium support hostel).

### Opportunities

#### Diversified funding streams

Following concerns about the vulnerability and sustainability of existing funding arrangements, some of the participating hostels have sought to diversify their funding sources by, for example, working with private businesses, banks, and local football clubs. The Ferry Project (case study 4) is an interesting example of an award-winning social enterprise that raises funds through a variety of activities such as a furniture restoration project and an events room hire business. These services then also provide various volunteer and training opportunities for both hostel residents and members of the community.

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\(^{41}\) These factors have been explored in-depth in a separate Homeless Link study: ‘Moving on from homelessness: How services support people to move on’ (2017)
Partnership working

Working collaboratively with an array of organisations is important so as to ensure a holistic approach in addressing the needs of the residents. Warwick Road hostel (case study 4) provides an example of the benefits of inter-agency collaboration. With residents at this service often finding it challenging to access services, staff have built strong partnerships with external organisations, with several agencies having been invited to meet with the hostel’s residents. These efforts have paid off, and onsite support is now regularly available from a number of external partners such as a nurse, a social worker, drugs and alcohol workers, and a psychiatrist.

Working in partnership can also help address the barriers residents face in accessing other services. Staff at Hannah House (case study 3) works closely with partner organisations in order to increase awareness of the needs and circumstances of alcohol-dependent homeless people. Hannah House seeks to challenge stereotypes and assumptions that may hinder people in accessing services by for instance inviting other services and interested parties to visit the hostel and meet with staff and residents.

Staff at some of the participating hostels reported that the complexities of the benefit system and its increased conditionality terms have an acute impact on residents. The residents’ difficulties in attending appointments and adhering to the conditions of their benefit claims often result in sanctions. In order to meet this challenge, support workers of some of the hostels (e.g. Devonport House, case study 6) have focused on developing relationships with advisors of the local Jobcentre Plus (JCP) offices, and regular meetings with JCP advisors foster awareness of the residents’ needs and circumstances.

Volunteer and community support

Some hostels employ volunteers so that residents can receive further support. At one of the hostels personal assistants offer a wide range of complementary activities such as cooking classes, and life skills and IT-training. These assistants are particularly valuable in providing the type of help and support that is closely tailored to an individual’s needs and preferences. At another service, final year university students offer clinical psychological help under the supervision of a local GP. However, while beneficial for clients, the time limit of this service (six months for each resident) does not allow needs to be fully met. At this service a volunteer counsellor also offers support for four or five hours per week.

Psychologically Informed Environments (PIE) and a trauma-informed approach

Some of the participating hostels excelled at putting the PIE approach into practice. For example, the design and negotiation of the physical environment of these services was trauma-informed, with in one case an open office space that can be accessed without residents first having to make an appointment:

‘A lot of people in these buildings have quite serious mental health issues, they’ve got through quite a lot of trauma and a lot of the support we give them is psychological support to be honest. It’s listening to them. It’s giving them reassurance. I think it’s important that they feel that the staff is accessible when they’re on site and that they can come in and they can talk to us.’ (staff member, high support hostel)

The adoption of a PIE approach at John Austin Court (case study 9) illustrates how this approach can create an environment where employees receive support in collectively managing difficult situations, which then helps them build resilience, conserve energy, and avoid burn-out. The benefits of this approach can be seen in how (as reported by managers and front line staff) work satisfaction remains high and sickness leave and staff turnover are low – this despite a lack of pay increases for the past five years.

The PIE approach also equips staff with the needed skills to work in close contact with residents. At John Austin Court every staff/resident interaction is considered from a PIE perspective: understanding the challenges that young people face, motivating them to achieve their goals, equipping them with the skills to live independently, and helping them understand the consequences of their actions.
Conclusions and recommendations

Many single homeless people in England have a wide spectrum of needs whereby they require not only accommodation, but also help in accessing and sustaining their future tenancies. Covering over 90 per cent of all homelessness accommodation projects in England, hostels remain one of the main forms of service provision endeavouring to meet these needs.

This report demonstrates diversity in the nature and operation of the supported accommodation projects that are covered by the term “hostel.” Service delivery varies according to local contexts and challenges, underlying ethos, psychological models employed and – most importantly – the needs and circumstances of those accessing their services. People experiencing homelessness have a wide range of characteristics and diverse and complex needs, histories, and circumstances, which in turn call for a range of options within the provision of supported accommodation services. The findings of this research suggest that hostels can make a strong contribution to local housing pathways, and that they have an ongoing role to play in providing temporary accommodation for some homeless people.

Homeless Link is committed to ending homelessness, and has called on the Government to develop a long-term investment strategy for single people who become homeless. It is our hope that as lasting solutions are developed, and measures are introduced to make the housing market work for the poorest groups in society, homelessness will be prevented in the first place, and the need for hostels will diminish. However, even within an improved system, there will always be a need for some form of temporary accommodation to help those who find themselves in crisis situations. Findings from this study suggest that hostels still play a key role in meeting these types of immediate needs. Although the role of hostels should always be time limited, within the process of meeting emergency needs they can and do help people access and sustain longer-term accommodation and achieve other key outcomes.

All hostels participating in this study explicitly focused on - and in many cases, were successful in - helping people progress towards independence, which is in turn illustrative of the changing role of hostels in England. This future hostel is a model that has moved far beyond its origins of simply providing accommodation and meeting basic needs, towards a model where people are successfully supported in developing the skills, and abilities needed to live independently, and to progress in those areas of their lives that matter most. The heterogeneity among people experiencing homelessness calls for an awareness that independence means different things and will occur at different times for different people. Hostels will often help people make seemingly small and insignificant changes which in actuality represent vast progress; this particularly for those facing severe and multiple disadvantages. The findings of this study indicate that the range of outcomes that are being achieved by hostels are at present not adequately captured by existing outcome metrics.

The hosts in this study that were particularly successful in supporting people who had previously been unwilling or unable to engage with services, geared their services to meeting the actual needs and circumstances of the residents. As emphasised by one of the hostel managers, these types of approaches vastly differ from those requiring residents to adhere to rigid policies and procedures. The future hostel comprises a model that, with support from funders and commissioners, does not hesitate to try new approaches and interventions and focuses on addressing any system barriers that may prevent people from accessing and engaging with services. A flexible and adaptable approach based on genuine client engagement is crucial within the management and delivery of hostel services. Evidence suggests that this type of approach can help facilitate engagement with services, support staff/resident interactions and social networks/relationships, and provide more positive experiences for residents.

The evidence in this report clearly shows that the effectiveness of hostels in providing opportunities, meeting people’s needs, and supporting move-on, is contingent on working in collaboration with a wide range of external agencies. The future hostel embraces a model that meets the varying needs of residents by building strong partnerships with external organisations and ensuring that support is regularly provided to residents from various external partners. Hostels are also only as successful as the staff in their employ and the

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43 Homeless Link (2016) Let’s make the difference: A manifesto to end homelessness
relationships that are formed with the residents. A supportive working culture, as well as a focus on the temporal and physical dimensions of staff/resident relationships, are key in ensuring that people will benefit from their stay in a hostel.

In the face of rising expectations about their role for homeless people, hostels face further challenges that impact the outcomes they can achieve. The success of hostels cannot be considered outside wider structural changes and constraints. In recent years the provision of supported accommodation has experienced significant decreases in funding, with findings from this study revealing its negative impact on staff recruitment, staff/resident ratios, and service provision/availability. The lack of reasonable and affordable housing has in particular hindered people’s move-on from homelessness. Homeless Link recognises the current Government’s commitment in tackling homelessness but, as demonstrated by a recent study by Crisis, more needs to be done to improve access to housing for single homeless people.\(^4^4\)

**Recommendations**

Hostels should see their role as time limited, and should focus on supporting people to move towards independence

Independence should be seen as more than only accessing accommodation, but also as people having developed the needed skills, abilities, and resources to progress and make positive changes.

Focus should be given to developing quality relationships between staff and residents, and interventions should be personalised and responsive to individual needs, goals, and aspirations.

Demonstrating the effectiveness of hostels in relation to the whole range of impacts they have could be stronger. Outcome metrics showing individual progress as well as end outcomes should be utilised.

Partnership working should be viewed as an integral part of hostels’ daily operations and activities. To meet the diverse needs of residents, hostels should dedicate resources, time, and focus to building and maintaining links with various external partners.

Hostels should consider the benefits of Trauma-informed care and Psychologically Informed Environment approaches and explore how these can be adopted.

Where rules are considered necessary, these should be developed alongside residents and ensure that wherever possible alternative arrangements are provided (such as a communal space where visitors are welcome).

In light of the high expectations for hostels (as outlined above), there needs to be sufficient long term revenue funding and resources to ensure that support interventions are effective and successful.

An adequate supply of affordable accommodation options is key to hostels being able to achieve higher move-on rates. Government needs to recognise that current levels of affordable housing fall short of demand, and increase investment in low cost housing options at sub-market level rates.

Floating/transitional support needs to be included when local housing pathways are being planned and delivered. Wherever possible, there should be continuity in support when a person first moves on from a hostel.

There remain significant challenges with the viability of hostels under the current assessment and payment structure of Universal Credit. There is an urgent need to address these to ensure hostels can operate effectively under Universal Credit\textsuperscript{45}.

Government must ensure there is a sustainable funding system for short term supported housing. At the time of publication, the Government was still considering future funding proposals. It is vital this provides hostels with the stability they need to meet demand, now and in the future.

\textsuperscript{45} See [http://www.homeless.org.uk/sites/default/files/site-attachments/MEAM%20submission%20-%20Universal%20Credit_0.pdf](http://www.homeless.org.uk/sites/default/files/site-attachments/MEAM%20submission%20-%20Universal%20Credit_0.pdf) for a summary of these issues.
Case Study 1: Francis House, Newcastle

*Francis House is a women-only hostel run by Changing Lives, a national charity that offers specialist support for vulnerable people and their families*

**Service aims, ethos and principles**
Francis House is a specialised service providing accommodation and 24-hour support for single homeless women. These women usually face an array of complex and multiple support needs such as homelessness, drug and alcohol addiction, mental health problems, and experiences of domestic violence. Most residents additionally present with significant childhood and adult-based traumas. The service principally helps residents address their needs and to develop the needed skills, abilities and resources to eventually move out of homelessness.

’an we became direct access I think two years ago, so we now get the more complex cases and it’s the first step on their journey really from the streets.’ (staff member)

Francis House aims to support women in becoming independent, which this service sees as these women not only having accessed housing, but also having improved in health, wellbeing, and being reintegrated into the community. By ensuring that all residents receive their entitled benefits, Francis House also supports women in maximising their income.

**Delivery of service**
Francis House is an emergency access hostel, offering 11 single occupancy bedrooms with shared bathroom and kitchen facilities. The communal living room and dining area present with cheerful resident artwork and photos.

Referrals come from Newcastle City Council’s Gateway, covering the Housing Advice Centre, the local prisons, and Changing Lives’ rough sleeper outreach team. The hostel is funded via the local social care budget, and access criteria stipulate that the women must be 18 years or older with a local connection (except for cases of domestic violence). Women can access the service for up to two years. Francis House employs four full-time day staff (a Project Lead and three support workers), and two night shift workers. Support is provided via flexible key-working sessions.

A resettlement building is located opposite the main hostel, providing six additional bedrooms for residents who, on the basis of an individual needs-based assessment, demonstrate increased readiness for independent living. Residents in this move-on accommodation can continue to access the key-working sessions and other services of the main hostel:

‘Obviously I find it reassuring especially with my conditions to know that there are people here, because staff are great should I need them.’ (Hostel resident, resettlement building)

Francis House also works closely with drug/alcohol support services, a local housing advice centre, families in care services, and community centres. A six-week pre-tenancy course is offered by Crisis. The Newcastle City-wide Floating Support Team can provide up to two years of ad-hoc support to those residents who have moved on from the service.

The hostel weekly provides a range of meaningful activities, such as cooking and mindfulness sessions, beauty therapy, and meditation. Residents meet monthly to decide on offered activities. Staff report that these activities provide a sense of stability and a way forward into healthier lifestyles:

“The activities establish some routine and trying to get a bit of a spark of things that you’re interested in … so there’s a whole range of things but I think it’s about how you use your time.” (Staff member)
Looking back and forward: exploring changes over time

Francis House has recently introduced new rules and regulations. Because of staffing structures (discussed below) and the need to safeguard residents and staff, guests are prohibited from entering the building unless participating in the residents’ support plans. Following reports of bullying, residents are also no longer allowed to enter other residents' rooms. Staff commented that these changes have reduced drug use on the premises. When these rules need to be enforced staff do generally adopt a highly flexible approach. Interviewees reported that the hostel only evicts residents in cases of extreme violence.

Changing Lives has introduced a new asset coach role within the Northeast accommodation services, who provides additional support alongside the project staff. Francis House residents who are ready and willing to ‘progress personally’ will receive focused move-on support from the asset coaches at flexible and convenient locations. This approach has changed the hostel’s working model from a ‘deficit-based approach’:

‘It’s not about saying, “right okay let’s get you down to Lifeline (addiction service) and get you this and get you that.” It’s about saying, “where do you want to be and what do you want to do? And how do we get there?” It’s a strength-based approach.’ (Staff member)

Project staff at Francis House primarily focus on providing practical assistance and on housing-related issues (e.g., ensuring service charges are paid, support in attending appointments, basic budgeting and cooking, and help with moving on). The asset coach focuses on ‘offering inspiring coaching sessions and highly personalised interventions geared towards each person’s unique strengths, talents and abilities’ (staff member). Changing Lives emphasised that each of these roles of is of similar value to the organisation, and that project staff and asset coaches are paid the same.

Francis House is also planning to possibly move the hostel to a new location.

Contextual factors

Francis House is currently located in an area with a high concentration of homelessness support services. Staff and residents reported that this situation could cause tension between residents from different services and within the wider community. Some residents reported feeling unsafe at night and said that the area generally ‘is not a nice atmosphere’ (Current resident). These factors will be addressed if the hostel moves to a new location.

Staff reported that Newcastle lacks good quality private sector housing which poses barriers in moving residents on from the hostel.

Examples of best practice

In spite of the fact that many of the women accessing Francis House have experienced domestic violence, their additional support needs (i.e., drug/alcohol addiction and/or mental illness) often cause them to be excluded from mainstream domestic violence services. Francis House offers a sanctuary and fills a gap in provision, while seeking to challenge stereotypes that may prevent women from accessing services:

‘I don’t know if there is a little bit of a deserving and undeserving, battered wife or person who actually has quite severe addiction … just because somebody has got an addiction or has got a mental health or a combination of those, doesn’t mean that then you can’t be a victim of domestic abuse.’ (Staff member)

Francis House staff demonstrates an acute ability to identify the needs of individuals and develop personalised interventions. One member of staff discovered that certain residents had undiagnosed learning disabilities. This assessment allowed the hostel to provide targeted support to help these residents access appropriate services. Interviews with the residents indicate that the hostel performs particularly well in regard to the safeguarding of residents. Residents also reported the hostel to provide holistic support that addresses their particular needs. Interactions and communications with staff were highlighted as among the best aspects of Francis House.

Outcomes

Outcome Stars are completed with all clients and monthly data reports are compiled. The service performs particularly well in relation to move-on targets. Data reports show that between 1/1/2015 and 31/12/16 Francis
House worked with 98 women. A total of 82 residents were supported and successfully achieved a planned move-on, and 22 were supported with internal project moves tailored to their particular support needs. A total of 32 residents were supported in maximising their incomes, with a further three residents having been supported in debt write-offs. Due to the complex and chaotic lives of many of the hostel's residents Francis House encourages and values small changes that people make:

‘I think we have to be pragmatic about it. I think sometimes it’s just something really small, but it’s a seed and it’s the thing that you keep building on.’ (Staff member)
Case study 2: Clarkson House, Ferry Project, Wisbech

Clarkson House offers short and long-term accommodation and support for single homeless people in Wisbech. The service is provided by the Ferry Project, a charity and social enterprise supporting homeless people in Fenland.

Service aims, ethos and principles
The Ferry Project and Clarkson House address poverty and exclusion by offering a wide array of programmes aiming to reduce homelessness. Christian ethos and principles such as compassion, inclusion and forgiveness underpin the service. By providing personalised support the service aims to help people develop hope and confidence:

'We look at the issues that have brought the individual to homelessness, what avenues they’ve tried before, what didn’t work well, actually giving that person, through a lot of intensive work, hope and purpose.’ (Staff member)

Staff reports that Clarkson House aims to uphold ‘societal norms’ by discouraging drug use, criminality and anti-social behaviour. The service operates on the basis of a strict set of rules and regulations (see below), striving to create a safe environment where residents can address their problems, rebuild their lives, and access new opportunities.

The Ferry Project aims to provide activities that tackle poverty and disadvantage, and simultaneously contribute to the development of the local area. Project staff feels that the service plays a role in the social and economic regeneration of Wisbech and that it is an important part of the wider community, as well as a dynamo for change.

Delivery of service
Clarkson House offers 24 single-occupancy bedrooms, and is located at the front of the Ferry Project’s headquarters. The Ferry Project is a social enterprise and features – in addition to Clarkson House – a community café, a 14-bed night shelter, event rooms for hire, a furniture project, and licensing/facilities for weddings. Food can be provided for residents but meals must be ordered in advance to minimise waste. The maximum stay at Clarkson House is 18 months, and the average length of stay is 17 weeks. Exceptions can be made on the basis of need and the availability of appropriate move-on accommodation.

The project offers extensive volunteer and training opportunities for both residents and members of the community, with volunteer positions available in the community café, in the kitchen, and for maintenance, garden and administration teams. The recent acquisition of the Queen Mary Centre (a former school turned community centre) has broadened the operational interest of the Ferry Project. There are now numerous opportunities for local people (including Clarkson House residents) to develop skills and build social networks through classes, meetings and community facilities.

Residents at Clarkson House must consent to a number of rules, such as no drug consumption on the premises. Staff offer compassionate support to residents struggling with addiction, while ‘support[ing] them to get back on track as soon as possible’ (Staff member). This no drugs rule is however strictly enforced, with police being notified and temporary exclusions being applied when this rule is broken. Although visitors are not allowed in the residents' bedrooms, they are welcome in the communal areas and café. A 10pm curfew is in place and residents must agree to engage with certain activities throughout their stay, such as the attending of regular key worker meetings and being part of a cleaning rota.

The rules and boundaries are agreed up front, and staff considers them to be critical in the process of supporting individuals into recovery. There is a three warnings rule, after which residents are excluded from Clarkson House (although clients can and often do appeal exclusions). The key workers work closely with service users to try to avoid such sanctions. The service does however accept that exclusions are occasionally unavoidable.
Key-workers provide each resident with a personalised and holistic action plan. Residents are encouraged to engage with the work and volunteer opportunities and/or the offered courses (although this is not mandatory).

The Clarkson House residents can access resettlement accommodation as provided by the Ferry Project (30 beds). In order to move into these premises, residents must first complete a six-week course focusing on developing life-skills. Following their stay in the move-on property, residents can access Council/PRS accommodation, as approved by a housing panel. Those who receive approval can move to Band A, and are usually rehoused within 12 weeks.

**Looking back and forward: exploring changes over time**

The recent development and opening of the Ferry Project’s headquarters at Clarkson House (an 18th century Grade II listed building) is particularly noteworthy. After intense negotiations with both local authorities and local residents, the Ferry Project acquired the site with a Places of Change loan from central Government. The area’s relatively low property prices allowed the formally empty building to be redeveloped and put back into use. Its development into a homelessness project and community hub has enhanced services for both homeless people and the wider community. Interviews with former residents suggest that the acquisition has also reduced the stigma that tends to be associated with homeless hostels:

‘Like I said, I think it’s a genius idea not to put us up at the end of the lane, but to open it into the heart of the community. And then do something like what we’ve done here, where we bring the community in, and try to integrate the two into one another.’ (Former resident)

By providing a community café alongside numerous other facilities (see above), the building has become a key part of the local economy used by both homeless people and members of the community. While pursuing this vision the Ferry Project had to face significant local opposition and challenge stereotypes and people’s fears of the expected impact of having a homeless accommodation service in the local area. The key narrative promoted by the Ferry Project throughout this process was: ‘the homeless situation is your problem as well’ (Staff member).

**Contextual factors**

Wisbech is a small market town. After the local train line was discontinued in the 1960s the town encountered less prosperity and growth when compared to other parts of East England. It has an official population of approximately 31,600 but numbers are estimated to be higher (mainly immigrants and people looking for work).

Wisbech carries a disproportionate burden of social challenges, such as high unemployment and poverty. The town has a lack of housing, and existing accommodations is often of low standard. A small number of landlords are reported to control most privately rented accommodation. Seasonal and sessional agricultural work attracts a high number of workers from Eastern Europe. Clarkson house also has to face the challenge of supporting victims of human traffickers and exploitative gangmaster operations.

**Examples of best practice**

After several Clarkson House residents were sanctioned for failing to attend job-focused interviews, the Ferry Project built strong partnerships with the local Jobcentre Plus (JCP) office. The Ferry Project now offers employment opportunities as part of the residents’ mandatory work placements (a condition of receiving Jobseeker’s Allowance). The project appears to particularly excel in providing opportunities for homeless people to increase their skills and access employment (i.e., through work experience and volunteering programmes).

‘For me, that was that missing link, because being homeless poses a problem on finding employment. Then being out of work for a long period of time also posed another problem.’ (Former resident)

The Ferry Project has also sought to strengthen partnerships with local mental health services. The challenges being faced by individuals with a dual diagnosis – in terms of the complex relationship between addiction and
poor mental health – are increasingly being recognised. As one staff member worker noted, ‘we have shown them [mental health services] the symbiosis of housing and mental health services.’

Several external agencies provide on-site services, such as the Terrence Higgins Trust and Inclusion, and a local drugs and substance misuse project. Support workers provide ongoing support to encourage residents to access these services.

The service recognises that individuals face multiple problems, and that for those struggling with addiction and poor mental health ‘night times are often the worse times’ (staff member). This factor has led to the introduction of night staff whom residents can approach with any issues or problems.

The project underscores the benefits of providing homelessness services within broader efforts to tackle poverty, inequality and exclusion.

**Outcomes**

Each resident of Clarkson House regularly completes the Homelessness Outcome Star with his/her support worker. Progress, goals, and areas for improvement are discussed and reviewed. These sessions are held in addition to weekly one-to-one support meetings.

Interviews with former residents were positive; they reported good outcomes in terms of finding settled accommodation and, on occasion, employment. They noted the enthusiasm of staff to help, the value of the rules, and the benefits of volunteering. Although these former residents highlighted various difficulties they were still facing (e.g., other people’s stigmas about poor mental health), their experiences of staying at Clarkson House seemed positive.

The outcomes of a three-week work experience/ten week volunteering programme: Between 08/2016 and 02/2017 a total of 63 people accessed the programme, of which 17 Clarkson House residents. A total of 31 participants completed online courses and received certificates to enhance their CVs. Following this programme, 11 participants found employment and/or further training and were therefore able to move on from Clarkson House.
Case Study 3: Hannah House, Bournemouth

Hannah House is a 13-bed hostel that offers support and accommodation for substance-dependent, entrenched rough sleepers. The service is provided by Bournemouth Churches Housing Association, and focuses on creating sustainable solutions to homelessness, unemployment, and social exclusion.

Service aims, ethos and principles
Hannah House operates as an ‘alcohol intervention service’, providing accommodation and support for alcohol-dependent rough sleepers. The service is underpinned by an ethos of harm reduction and operates as a ‘wet house’, where residents are permitted to consume alcohol on-site. Staff adopt a needs-based approach when supporting people in addressing their addictions and physical and mental health needs.

Hannah House aims to provide a safe and welcoming space where people facing significant barriers in accessing and engaging with services can experience support and acceptance. Most residents are not eligible for and/or have been previously evicted from other accommodation services:

‘Most of the people that come here, before they come here, they think that they’re excluded from the world. But when you start to talk to a couple of people, they’ll say, “Well I feel understood. For the first time, I know that there are people that do care about me.”’ (Staff member)

The key principles of the service are to treat each person as an individual, fairness, respect, and an adherence to rules. In order to ensure the safety of residents the service additionally focuses on maintaining firm boundaries between staff and residents.

Delivery of service
People can stay at the hostel for a maximum of two years, although this can be reassessed and extended on a case by case basis in agreement with Council funders. This has been particularly successful with clients deemed too vulnerable to live in other supported housing and even Housing First models, because of abuse concerns such as cuckooing. All referrals come through a hub located at Bournemouth Local Authority. The staff team includes four daytime support staff and two nighttime staff. The role of the night staff is essential in providing a comprehensive 24-hour support service (although their specific role is outlined as security and welfare). The hostel has one self-contained flat for residents who have demonstrated that they are closer to independent living.

Each resident is assigned their own keyworker who is responsible for carrying out risk assessments and drawing up individual action plans. Weekly support sessions focus on helping individuals develop needed life skills (such as cooking, and maintaining good hygiene). When possible staff will support residents in moving on to alternative accommodation.

Residents are permitted to consume alcohol on the premises with staff support to help minimise and/or regulate use. Some residents will for example store their alcohol in the staff office, to be accessed at intervals throughout the day. Spirits, the use of illegal drugs, and legal highs are not permitted, with only beer, lager, cider and wine being allowed on the premises. This specific area of the service is still being developed and much work has gone into formulating support plans to assist in a gradual reduction of intake, while using the time when a client gets a drink to engage in conversation about their drinking.

Staff will challenge residents about their lifestyles and choices while offering ongoing support in making changes, such as support in helping people maximise their income by claiming benefits and managing debt. Where appropriate residents receive support in reconnecting with their families. Significant staff time and energy is also dedicated to supporting residents in accessing other services. By working closely with residents over a period of time, behaviour, moods and health can be monitored and supported accordingly.

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46 This is where premises of vulnerable people are taken over by drug dealers or traffickers, usually under coercion.
Looking back and forward: exploring changes over time
In 2012 the hostel introduced a high tolerance drug policy, extending their access criteria to include active drug users. With residents presenting with ‘two completely different schools of behaviour’ (staff member), providing accommodation and support for both drug and alcohol-dependent residents proved particularly challenging. This followed the widespread use of legal highs by alcohol-dependent clients, which caused a substantial increase in aggressive behaviour. This particular issue did however generally decline after recent legislative changes.

Contextual factors
Securing funding for Hannah House has become increasingly difficult over the past seven years. The removal of the ringfence for Supporting People has left gaps in revenue and has threatened the organisation’s ability to deliver services safely. After significant funding reductions Bournemouth Council moved towards a generic service model, where contracts for services that cater to specific clients were ended or revised in favour of services geared towards a generic client base. It is within this context that funding for Hannah House was withdrawn, with the facility now facing closure. Staff, residents and former service users expressed concern about the future of residents who are likely to struggle to find alternative and sustainable move-on accommodation.

Examples of best practice
This service offers understanding and tolerance for extremely vulnerable individuals who have been excluded from other services. Staff regularly go above and beyond their job descriptions to provide residents with support and compassion. For example, night staff (employed for night security and welfare and officially responsible for safety and administrative/cleaning-related tasks) often provide unofficial support and guidance for residents throughout the night when needs are often most urgent. Residents consider the non-judgemental and caring approach of the staff as one the best aspects of Hannah House:

‘I was made to feel, “Okay, you screwed up, but that doesn’t matter. Now is the time to put things back in place and get things right again”. (Ex-resident)

BCHA and Hannah House provide extensive and targeted ongoing floating support to all residents. Prior to move on each resident takes part in a floating support assessment process, determining people’s needs and the level of ongoing support which should be provided. There is no time limit for ex-residents to access Hannah House facilities once they have moved out. Former residents particularly valued Hannah’s House open door policy and its continued support.

Outcomes
Outcome data (except for the two most recent quarters when services were being decommissioned) shows a planned move-on figure of 52.5% for the previous 12 quarters; this despite certain contextual challenges. During this time, the recognised treatment path in Bournemouth was terminated (which was part of the original contract for the service), which had previously simplified the process of moving clients into dry accommodation. The lettings market in Bournemouth has additionally become increasingly reluctant to rent to supported housing clients. Despite these barriers the service has successfully supported a significant percentage of its residents in moving on.
Case Study 4: Warwick Road Hostel, Royal Borough of Kensington and Chelsea

Warwick Road Hostel provides self-contained temporary accommodation for homeless men and women. The hostel is situated in London’s richest borough – the Royal Borough of Kensington and Chelsea (RBKC) - and is one of five homelessness accommodation projects provided by the charitable housing association, Look Ahead

Aims, ethos and principles
Warwick Road Hostel provides accommodation and support for people with complex care and support needs. Most residents are long-term entrenched rough sleepers who have been excluded from other services. The hostel operates according to an ethos of tolerance, understanding, and client-centeredness:

‘We want to work with people that actually people have written off because we don’t write people off. While they are still living and breathing we will do everything we can to help them.’ (Staff member)

The service aims to provide a warm, safe, and psychologically informed environment (PIE), where people can access personalised support that is tailored to their needs. By offering stability and the co-ordination of care with other agencies, the hostel aims to improve people’s self-confidence, wellbeing, and engagement with other services. The hostel ultimately focuses on helping people rebuild their lives.

A key principle of this service is flexibility, as demonstrated by the relaxed approach in regard to placements and evictions. As stated by a staff member: ‘it is our role to work with people who are homeless, not to make people homeless.’ The staff is dedicated to getting to know the residents, discovering their motivations, and instilling a sense of hope. A harm-minimisation approach is in place, and sharp bins are provided for intravenous drug users.

Service delivery
The hostel provides 24 single occupancy self-contained flats for homeless men and women aged 18+. Approximately 80% of residents are male, and 20% are female. At present four flats are wheelchair accessible. The hostel is well lit and nicely decorated with a general friendly and welcoming feel. The site offers lots of communal spaces and a large garden, which is well used during the summer.

People usually access the hostel via outreach teams and the Single Homeless Team. The housing is officially meant to be temporary accommodation, but there is no limit on the length of stay. After two years the hostel will however often look at moving people on, depending on personal circumstances and needs. The hostel also provides two emergency beds, allowing those sleeping rough to be moved off the streets quickly.

A total of 21 members of staff provide support across Look Ahead’s five accommodation projects. Staff interacts with residents in a respectful manner, and residents are expected in return to engage with support and follow hostel rules, which are minimal. All residents are supposed to attend regular meetings with their personal keyworker (as outlined in the license agreement).

The hostel particularly emphasises money management and timely rent payments, with budgeting skills regarded as essential within the process of developing life skills and maintaining future tenancies. When a payment is missed, a reminder letter will be sent within a week. Support workers are trained in emphasising these procedures to help residents prepare for independent living, and staff works intensely with residents in order to prevent rent arrears.

Contextual factors
The hostel’s management team and the commissioner at RBKC share a strong relationship. Warwick Road has recently been granted a five-year contract with a two-year extension, thereby providing stability and
certainty for residents and staff alike. The commissioner acknowledges the project's success in working with clients in an effective and constructive manner.

**Examples of best practice**

Warwick Road is highly dedicated to supporting those who other services are unable or unwilling to assist. The hostel is accessible for homeless men and women aged 18+ who are eligible for Housing Benefit. Over the past six years, it has turned down only one referral. The occasional use of alternative funding resources to accommodate people with no recourse to public funds is another example of the inclusive approach that is adopted by this service.

The regular communication with residents is an example of how Warwick Road operates as a PIE environment. Monthly house meetings provide opportunities for residents to raise issues, give feedback, and to be informed about service developments.

The staff themselves are also offered a high level of support – a vital element of the PIE model - with the team regularly discussing issues or difficulties. Management considers this to be particularly relevant because of certain staff members between the ages of 21 and 25 being new to the homelessness sector and possibly experiencing some of the more extreme incidents and behaviour as traumatic.

The service provides a good example of best practice in relation to staff recruitment and staff development. Staff is offered numerous opportunities to gain experience and receive further training so as to improve their future employment prospects. The hostel has a high rate of staff retention, which is in turn key to giving residents a sense of stability and consistency. The staff met were uniformly very enthusiastic about working in the hostel:

‘They [residents] really like it when people stay for a bit longer, so they know who to go to, they understand that person is there, that’s important, which links back to staff retention and why it helps.’ (staff member)

Staff are recruited from a range of backgrounds, with the organisation prioritising those with aptitudes such as compassion, empathy, practical/organisational skills, and (critically) an open mind. Residents participate in the recruitment process and interview panels.

Resident interviewees reported feeling that their needs were consistently met, and particularly appreciated that staff members were always available to help and assist when needed. This particular factor also provides evidence of the value of an open door policy. Staff satisfaction appears to positively impact the residents’ views of the hostel:

‘The staff are very nice for me. When I come to collect my mail you always get a smile … They’re always asking how you’re doing. You always see them with a smile, you don’t see them in a bad mood. The three years I’ve been here, I’ve never seen anybody in a bad mood.’ (Resident)

Look Ahead operates an “Experts by Experience” scheme by which residents deliver training to staff on topics such as mental health and substance abuse. Staff and residents are very positive about this initiative, and besides increasing staff knowledge, the scheme also helps to build the residents’ self-confidence. A borough-wide Peer Support Volunteering scheme is funded and coordinated by RBKC, and Look Ahead, St Giles Trust, and Evolve Housing are partners in the scheme. Warwick Road residents are trained as Peer Support Volunteers, and provide advice and other forms of support for new residents.

**Outcomes**

An internal Quality Team from Look Ahead benchmarks quality aspects for each service and carries out annual inspections. Regular submissions on outcomes are made and the commissioner undertakes 'spot checks' alongside intensive audits (The Quality Assessment Framework) to monitor the quality of the service together with ensuring value for money. Interviewees stated that the auditing process was beneficial for the organisation and kept staff focused on priorities. The management team is committed to achieving a balance
between securing outcomes/improving services and not letting these factors constrain innovation and creativity.

After the most recent audit in 06/2016 the service was awarded an ‘outstanding rating’; the first time this was awarded in 2016 under the new rating system.
Case Study 5: Brydon Court, Riverside, Manchester

Brydon Court offers accommodation and support for people with long-term experiences of rough sleeping, and is delivered by the housing provider Riverside. The service employs a high tolerance and personalised approach.

Service aims, ethos and principles
Brydon Court is a specialist service providing targeted accommodation and support for entrenched rough sleepers. Those targeted by this project have complex needs and problems with mental health, addiction, physical health, as well as with the criminal justice system. Most residents have repeated and long-term experiences of homelessness and have exhausted all other accommodation options. The aim and underlying ethos of Brydon Court is to save lives by preventing people from dying on the streets.

Those supported by Brydon Court present with very high level needs, and face acute barriers in accessing and engaging with services. Even though Brydon Court is not a Housing First project, it does focus on removing these barriers by adopting the principles of Housing First:

‘It’s about basic human rights of having a roof over your head regardless of whether you’re going to engage in this very structured programme. It’s about a basic human right of having a roof over your head and then us working around that individual to do the best we can to achieve, to keep them alive, to improve their health.’ (Staff member)

Once people have moved off the streets, staff will address people’s critical health needs and living skills. The staff strives to be patient and flexible and understand that an individual’s needs and journey can be complex:

‘Most of them are really ill when they come in and it’s about focusing on the health needs at the beginning. Then it’s about getting people – I know this sounds awful, but be able to live indoors, and I know this sounds crude, it’s using a toilet, it’s using a bed, using the facilities, cooking … then once that becomes a habit it’s about supporting them with what they want; not what we want.’ (Staff member)

The staff adopt a highly flexible relationship-focused approach, with the individual positioned at the centre of service provision and support built holistically around their needs and personal journeys. By focusing on people’s successes and instilling a sense of routine and security, the hostel aims to stop the “revolving door” of services.

Delivery of service
Brydon Court provides 13 rooms and 10 flats, with some rooms adapted for disabilities and wheelchair access. The residents move from rooms to flats as they gain confidence and prepare to move on from the hostel (although there is no time limit of how long people can stay). The service also has three emergency beds, allowing rough sleepers to try out the hostel and gain an understanding of its structure and how it might work for them.

The staff team includes a manager, two support workers, two project assistants, two night assistants, and a security guard. Residents are usually – though not always – white males between the ages of 35 and 45. Although each resident has a designated support worker, all staff members respond to immediate needs:

‘It’s whoever’s on duty at that time does that here and now, the support. If they’ve got to go somewhere out of the building it tends to be that case worker that will go … but in general it’s deal with the here and now, anybody can do that, the manager does it, the project assistants, volunteers, everybody … there’s no hierarchy on who does what.’ (Staff member)

Brydon Court has few rules except for service charges and a ban on violence towards both staff and residents. Harm reduction is prioritised, and clean syringes and sharp boxes are available on-site.
Residents for the most part access the hostel via a local outreach team. This team has an in-depth understanding of street homelessness in Manchester and builds relationships with rough sleepers, sometimes over long periods of time. If individuals move from the hostel back onto the street, the outreach worker will attempt to re-initiate contact and focus on what went wrong and what can help them off the streets for a longer period of time.

Because of the residents’ complex needs and circumstances, the hostel does not explicitly look at moving people on from the hostel (especially not at the beginning of someone’s stay). However, staff reports that move-on support will often take place ‘in the background.’ Whenever possible and appropriate residents are supported in moving on to settled tenancies via the Manchester City Council allocation system or into local Housing First units. Staff reports that residents need significant support to move on and that transitions are carefully managed.

Looking back and forward, exploring changes over time
In 2016 Manchester City Council reviewed its homelessness provision. The number of rough sleepers had increased in recent years and there was political incentive for change in the city. Based on recommendations from the review and consultations with the target group, Brydon Court radically changed its support model from an abstinence-based model to a high-tolerance approach, which entailed minimising rules and omitting engagement requirements (e.g., attendance at scheduled one-to-one support sessions and risk assessments). To further remove access barriers, Brydon Court changed its admission policy to not only include single people, but also couples and their pets.

Examples of best practice
Brydon Court’s client engagement and participation processes are exemplary, with feedback from residents integrally influencing the services’ redesign and delivery, and providing an example of a service that is receptive to new approaches and styles of performance.

An example of Brydon Court’s adoption of new approaches can be seen in the way wherein assessments, referrals and interviews are kept to an absolute minimum. The hostel first supports people in accessing and settling into the service before introducing any formal processes, with details on eligibility and priority obtained from the outreach team in the first instance. Most residents have been homeless in Manchester for a long time and are already known to services. Hostel staff focus on getting to know individuals and their life stories and identifying what they need to thrive.

The hostel excels at connecting residents with primary care services. It has built a strong relationship with a local GP, and a mini-bus provides residents with regular transport to the surgery. Staff at the GP practice receive training in issues relating to rough sleeping, mental health, and substance abuse. Many of the residents commented that, although they had often experienced discrimination with primary care services elsewhere, they felt particularly welcome at this surgery. Registration with a GP is a gateway to secondary and tertiary physical and mental health services, and is as such an important step forward.

Brydon Court’s residents are supported and encouraged to identify their own goals and realise their potential. This support can cover helping them gain self-confidence, as well as help to rebuild fractured relationships with other residents, old friends, and family members. Brydon Court has a good working relationship with commissioners and partners to avoid rough sleepers falling through the service net and ensuring that they access the most appropriate services. A relatively new Riverside facility, Newbury House, provides options for individuals for whom Brydon Court is not suitable. Another option is a local abstinence-based hostel called Redbank, and strong relationships exist between Brydon Court and local day centres.

Outcomes
Staff reported it to be a far reach for some residents to gain employment and/or an independent tenancy. For individuals with complex needs who are facing severe and multiple disadvantages, small changes – such as keeping appointments or eating regularly – are already a significant achievement, which the hostel recognises and celebrates.
It is calculated that in 2016 the provision of emergency beds prevented a total of 1,400 episodes of rough sleeping. Staff reported that there are only two individuals in Manchester that the hostel cannot work with, which provides a clear example of the hostel’s success in supporting those often deemed to be “high risk.” The hostel’s management team is committed to new approaches and interventions. Progress is closely monitored and when something is not working, changes are swiftly made. Learning from mistakes is considered to be critical in the development of the service.

Brydon Court reports particularly good health outcomes as to primary care uptake. The chart below shows for a sample of 27 people (those registered with UVMC) one month of interactions with the Urban Village Medical Centre (UVMC) prior to moving in at Brydon, and their interactions with services while at Brydon.

Although a one month snapshot, the above graph does show engagements with primary care services to have dramatically increased. This outcome can be partly attributed to a nurse providing residents with on-site services at Brydon one morning each week. Additionally, once a week a mini bus is available to help residents meet appointments at the UVMP, and the community’s encouragement for individuals to go together has also dramatically increased take-up.

Commissioners in Manchester City Council consider the service model as developed at Brydon Court to be successful, and have therefore commissioned another 25-bed hostel, which will operate according to the same model.
Case Study 6: Devonport House, Salvation Army Hostel, Plymouth

Devonport House is a 60-bed hostel, providing accommodation and support for single men and women

Aims, principles and ethos
Devonport House aims to support homeless people in addressing the issues and problems that caused them to become homeless. The service also strives to help people access accommodation and re-integrate into the community. A key principle of this service consists of interventions being personalised and tailored to meet the needs and circumstances of individuals:

‘Everybody is different. There isn’t a typical person. Every story is different. There isn’t a typical person. Every story is different and people are here for various reasons.’ (Staff member)

The service uses an asset-based approach with a focus on building on people’s strengths, skills, and aspirations by providing in-house support, as well as by referrals to other services. Education, training, and pre-employment support are seen as key in helping people move out of homelessness. Since many of the residents struggle with substance abuse, the work at Devonport House is informed by Salvation Army principles of harm reduction and tolerance:

‘I practice [harm reduction] on a daily basis as we do, all of us here. It’s basically being with the people, for the people in the moment. And showing them full acceptance, keeping them safe until the right moment comes when they want to go for a change in their life or not.’ (Staff member)

Service delivery
Devonport House offers 60 single-occupancy beds with shared bathroom facilities for single homeless men and women for a maximum period of two years. The site also has a 14-bed night shelter that is used as emergency accommodation until a room in the main hostel becomes available. Night shelter residents have a 12am curfew and are not permitted on the floors of the main hostel. Meals are provided on site. A 12-unit self-catering facility at the back of Devonport House provides 12-month tenancies for those aspiring to live independently but who could benefit from an interim arrangement prior to total independence. Residents in this unit are responsible for their own bills, and continue to have weekly meetings with a support worker from the main hostel. A number of services are offered on site such as counselling by a clinical psychologist, advice from a dedicated drugs worker, and occasional dental care from visiting students. Residents are also helped to access the off-site services of two local drugs agencies. A Salvation Army Chaplain is available to offer spiritual, pastoral and practical support.

When residents arrive at the hostel, individual assessments are made with a support plan then being developed. Staff will first address a resident’s immediate needs (e.g., shelter, food, and registration with a GP) before focusing on long-term issues. Each support worker is responsible for 10 residents (although this number can increase during times of staff pressure). Support workers provide dedicated one-to-one support for residents, focusing on developing routines, augmenting life skills, and accessing move-on accommodation.

Looking back and forward: exploring changes over time
Interviewees reported that in recent years the number of people presenting at the service with mental health and complex support needs have increased.

The consumption of New Psychoactive Substances (NPS) has had serious repercussions for the hostel (although use is reported to have decreased over 2016). While the behaviour of service users who abuse substances such as heroin and alcohol is well known to staff and can be managed, the use of NPS can result in unpredictable and extreme behaviour that can put people at risk.
Staff also expressed concern that the shift to monthly Universal Credit benefit payments may detrimentally impact hostel residents, as many have chaotic lifestyles and few money management skills.

**Contextual factors**
Until March 2018 the hostel is commissioned by Plymouth City Council under their Supporting People Programme. The hostel reports strong relationships with commissioners, and Plymouth-wide challenges are addressed via a System Optimisation Group of commissioners and providers. Staff however report facing increasing pressure to ‘provide more for less.’

**Examples of best practice**
Devonport House places considerable emphasis on building relationships with residents, focusing on gaining a deeper knowledge and understanding of people’s individual circumstances and histories:

‘There is an atmosphere of acceptance here, and even if something did go wrong, and they come back, they’re always welcome back.’ (Staff member)

The early development of quality relationships may improve longer-term outcomes for residents. During the interviews residents spoke highly of the nature and level of support, considering it to be non-judgemental and understanding.

The hostel receives significant input from dedicated volunteers, allowing a wide range of activities to be provided in-house. These activities focus on helping residents gain the needed skills to move on from homelessness, such as math and literacy lessons, cooking and money management classes, and day trips.

The hostel has built strong relationships with external partners, including a local ‘access to housing’ programme which helps residents find suitable accommodation and provides rent deposit schemes.

The engagement of residents forms an important part of the hostel’s work. Residents are invited to monthly meetings to discuss problems and issues and to give suggestions. The hostel also has an exit survey that allows residents to reflect on their time in the hostel and give feedback. These exit surveys are analysed quarterly to determine any changes that can be made. Issues raised in surveys and at meetings may result in consultations with residents so as to agree on changes or explain why changes cannot be made (such as for example in regard to catering facilities (e.g. food provided, mealtimes and cost, etc.). Staff continually reflect on ways to improve the hostel’s practices:

‘There is a lot of personal and professional development opportunities here, and you know, it’s just an ongoing learning process. If something doesn’t work, it’s addressed immediately, either through a meeting, or a kind of training.’ (Staff member)

**Outcomes**
The hostel is monitored under the Supporting People Framework, which is considered to be an effective way of maintaining focus on quality. In 2016/17 the hostel had a 76% successful move-on rate. Data is collected systematically in order to identify trends. This data collection takes place by means of ATLAS, a system that allows close monitoring of an individual’s progress while simultaneously creating strategic data.

50% of residents engage with education, training and/or employment while residing at Devonport House. This statistic has significantly improved following the introduction of an Employment, Education and Training support worker offering various opportunities internally and externally.
Case Study 7: Roundabout Hostel, Sheffield

Roundabout hostel provides emergency and short-term supported accommodation for 19 single homeless young people between the ages of 16–25. Roundabout is a youth housing charity that focuses on preventing homelessness and delivering skills training and support services to ‘ensure young people go on to live meaningful lives’ (staff member)

Service aims, ethos and principles
Roundabout hostel is informed by the belief that the service can make a difference for young people whose lives have been blighted by homelessness, family breakdowns, and trauma. The primary aim of the service is to work with young people in order to help them achieve positive outcomes, which means that wherever possible the service is personalised. Staff will tell young people that their stay is just a ‘chapter in life,’ which reflects the hostel’s primary aim:

‘To support young people back into society towards independent living, and to find them the right support for any issues that they have.’ (Staff member)

Key principles of the service include a holistic assessment of a wide variety of young people’s needs, thereby focusing on how to keep them safe. Contract aims cover utilisation, occupancy rates, and positive move-on. Individual aims focus on ensuring that each young person has a keyworker and support plan and that they go on to lead meaningful lives. This support plan focuses on helping young people to develop the skills, confidence and motivation to engage in an array of meaningful activities which will help them to move towards independence.

Staff considers the provision of a safe and welcoming space that prevents rough sleeping to be the first step in helping young people make progress. Staff are clearly motivated by the understanding that young people can be supported in making significant and lasting changes in their lives:

‘I think what’s wonderful about this age group is whether they’ve had repeat experiences of homelessness or it’s their first time, they’re young enough for us to be able to do some investment with them.’ (staff member)

Delivery of service
The hostel has 19 single occupancy bedrooms with en-suite facilities. Breakfast is included in the services and three well-equipped kitchens provide self-catering facilities. There are staff on-site 24/7, and the staff team includes six full-time equivalent project workers, a trainee project worker, four night-staff, and a housing officer. Young people access the project through the single-access gateway managed by Roundabout on behalf of Sheffield Council.

An adjacent building offers eight self-contained flats which provide transitional housing with ongoing key working support for a further eight young people. Young people will be eligible for this accommodation once they have demonstrated to have the necessarily life-skills and are engaged in education, employment or training. The maximum stay at the hostel is 12 months, but is generally determined by an individual’s needs and circumstances.

The day-to-day management of the hostel and the individual support plans are informed by a highly personalised approach. Staff aims to understand, assess, and respond to individual needs and behaviours.

‘We treat people on an individual basis. So, it’s not all set up, “You must do this and you must do that,” it’s down to the individual and the individual care package for each young person put in place.’ (Staff member)

Interviewees reported that the hostel has only just started to implement a Psychologically Informed Environment (PIE) approach, although the key principles of the PIE model clearly underpin current working practices. So are challenging behaviour, eviction procedures, and the enforcement of rules are similarly informed by a flexible and individualised approach:
‘So even though we’d never compromise the safety of a staff member or young person, again each – it’s not a one-size-fits-all, and we take into account mitigating circumstances.’ (Staff member)

Approximately four different activities are offered every day on-site such as healthy eating and cooking, “renting ready” sessions, life skills, arts and crafts, safe social media awareness, and philosophy debates. A reward system that lets residents accumulate points for key purchases (such as shopping vouchers or a passport) is used to encourage participation.

Additional in-house services include a visiting community nurse, a visiting drugs and alcohol worker, and dedicated support to encourage young people to re-enter and/or engage with education (including liaising with the local community college). Roundabout provides floating support services for residents once they have moved on from the hostel.

Looking back and forward: exploring changes over time
Three years ago the maximum stay at the hostel was extended from six weeks to 12 months (including residence in the self-contained flats). Staff reported that this change has given residents a sense of stability and has given staff more time to build relationships with the young people. Some interviewees felt that long-term residency in the hostel could cause young people to become dependent on the service and possibly ‘regress back down’ (staff interview). This potential risk has motivated staff to focus more on supporting young people to move on from the hostel by for instance speaking with them about their future in the early stages of their tenancy. Individual plans and goals to aid this process are designed together during the individual key working sessions.

Contextual factors
Sheffield has one of the highest concentrations of social housing in England, and therefore a large amount of move-on accommodation for Roundabout residents. Young people are required to complete support programmes, at which point – depending on the individual’s readiness – they are given priority access to this accommodation.

Sheffield does not have a young person’s supported lodging scheme, and 16-17 year olds are placed with residents of up to 25 years of age. Some interviewees expressed concern about the younger tenants being influenced by the chaotic lifestyles and behaviours of other residents. Young people of 16 or 17 years of age who cannot return home also have limited move-on options, with the minimum age for a tenancy currently being set at 18.

Examples of best practice
Following a recent refurbishment, the hostel now offers a high standard of accommodation with modern furniture and amenities, a clean and organised environment, and open and welcoming communal spaces. The physical environment is informed by a PIE approach; there are for example no negative warning signs in the communal spaces.

Staff and residents reported that relationships and interactions between staff and young people are one of the hostel’s most positive aspects. Staff appears particularly adept at understanding, assessing, and responding to individual needs:

‘We’ve all got different needs, we respond to emotions differently, and it’s the same with young people, so what [name] and the staff are very good at is not – not giving preferential treatment, but how you respond to that person would be different to how you respond to that person.’ (Staff member)

The staff team’s extensive knowledge and experience allows them to quickly and safely diffuse and deal with problems and crisis situations. One former resident reported that the positive relationships also encourage young people to attend the activities and resultantly move on from the hostel in a positive manner.

Overall the hostel is prepared to take on challenges, has a ‘high tolerance of risk,’ and is prepared to work with young people that some other supported housing providers may not want to work with.
Outcomes
Interviewees reported that seemingly small steps can represent the most significant outcomes, such as for example by encouraging young people to reduce their cannabis intake and/or take greater responsibility for their health and behaviour.

The Homelessness Outcomes Star is regularly used in support sessions, with staff reporting this tool to be valuable in helping the young people evaluate their progress.

Case studies compiled by Roundabout indicate that the hostel successfully supports young people in accessing higher education; this despite their oft disruptive and traumatic childhood experiences. These case studies clearly illustrate how the hostel helps young people develop the needed life skills and self-confidence to move on to independence:

‘Meeting such a huge variety of people really helped me build up my confidence. I was quite a quiet person, but really tried to get involved with group activities, thanks to my keyworker persuading me.’ (Young person, ex-resident)
Case Study 8: Mayfield House, Action Homeless, Leicester

Mayfield House provides accommodation for single homeless people with a high level of need and is run by Action Homeless, a local charity and social enterprise that aims to improve homeless people’s lives across the city and county.

Aims, principles and ethos of the service
Mayfield House provides accommodation and support for highly vulnerable individuals. While staff recognises that the needs of residents are diverse and that everyone is unique, the common support needs being encountered include entrenched rough sleeping, substance dependency, complex mental health needs, poor physical health, disability, and contact with the criminal justice system. Most residents are male between the ages of 35–45 and have significant experiences of trauma and severe and multiple disadvantage.

The underpinning ethos of Mayfield House is to promote recovery and support individuals to make positive changes in their lives:

‘We’ve always believed that sort of like there will be windows that people will have and it’s about being able to provide something when that window’s there for people they can access it.’ (Staff member)

The hostel aims to provide opportunities to prepare residents for independent living by using a caring and compassionate approach. As stated by a member of staff, a key principle of the hostel is to ‘treat clients as you want to be treated yourself.’

‘I think we genuinely care about people. I think the whole team. We do fight for the little person – I don’t think you could do the job if you didn’t. Everyone wants the best outcome for the clients and everyone will go that extra mile.’ (Staff member)

The service focuses on creating boundaries and respectful relationships with the residents. A key element of preparing residents for independent living is helping them develop a sense of routine (such as paying rent on time).

Delivery of service
Mayfield House offers 30 single-occupancy rooms with shared bathroom facilities. The hostel has a 24-hour staff presence, which is considered critical as night times are often challenging for residents. Residents pay £37 a week service charge, which includes four meals a day. Three “sit up” beds provide emergency accommodation for rough sleepers, and one additional bed is allocated to the local No Second Night Out scheme. Residents access the service through Leicester City Council’s single point of access scheme.

Staff work with residents to identify their needs and achieve changes such as skills development, work experience, building self-confidence, and securing independent accommodation. The service puts significant onus on remaining as flexible as possible while still providing a safe environment. Rules – such as a ban on aggressive behaviour in communal areas – are in place to safeguard all residents. A harm-minimisation approach is in place, such as for example sharps bins in the toilets. Upon suspicion of drugs dealing the police will be contacted immediately.

Upon people’s arrival at the hostel staff will focus on preparing them to move on, with the likelihood and nature of this differing from person to person. Residents usually stay for up to four months, although staff reports this amount of time to be increasing with cases becoming more complex and move-on options diminishing.

Following a Leicester City Council commissioning review in 2013/14, management decided to separate the principal functions of the hostel into two separate roles: support officers, and accommodation sustainment officers.

The support officers provide weekly one-on-one key working sessions for residents, taking place on an appointment basis in a building named ‘Engage’ that is located next to the main hostel. A total of five members...
of staff build close relationships with individual residents and focus on understanding their needs and aspirations, and on connecting them with other services. Engage is a welcoming space where homeless people from across different Action Homeless projects can access facilities (e.g., IT and drop-in sessions) and connect to other services. This building is well designed and comfortable, provides office space and private rooms for confidential discussions, and a large open space for informal interactions. It is ‘an environment where people can come together’ (staff member).

Six accommodation sustainment officers provide 24-hour cover of the main hostel building, focusing on general building management, rent collection, and maintaining health and safety. Regular communications between the two separate teams is key in ensuring that consistent and holistic care and support is provided for all residents.

The hostel employs a robust warning scheme that includes three stages: verbal, written, and final. Support workers spoke at length about working closely with residents in order to avoid them moving to the next level. There is a thorough appeal process whereby decisions can be overturned if procedures have not been followed or support workers have not exhausted all options.

Action Homeless provides several smaller lower-level support accommodation units. These services provide valuable transitionary accommodation for those moving towards independent living.

**Looking back and forward: exploring changes over time**

Following recent commissioning changes the number of hostels in Leicester has been reduced from seven to two services (Mayfield House and the Dawn Centre). This change has brought advantages and challenges. The remaining hostels are on the one hand able to work closely with the local council to successfully reduce the number of ‘revolving-door’ clients (individuals who would spend up to two years transitioning between different hostels following evictions for rent arrears). The change has however also meant that those with more complex needs are now concentrated in fewer facilities, which brings challenges in terms of managing behaviour and maintaining a safe environment for all staff and residents (this particularly at night).

**Contextual factors**

There is political will at the highest levels of Leicester City Council to tackle rough sleeping. This can be seen illustrated by the sheer amount of assistance given to rough sleepers which goes beyond the council’s statutory duties. The council offers temporary housing for those at risk of rough sleeping, and Action Homeless’ staff provides support to help these individuals secure longer-term housing.

**Examples of best practice**

The service performs particularly well in regard to client participation, with numerous examples of Action Homeless incorporating resident feedback into their services. The hostel has an annual Client Conference, providing an opportunity for residents to make suggestions on service improvements. Key innovations that have resulted from dialogue with residents include:

1. **Accommodation Plus:** a particularly noteworthy scheme that helps residents to move on from the hostel. Seven years ago residents expressed the wish that the hostel would manage properties for them to move into after staying at Mayfield House. As a result of this feedback Action Homeless now manages a total of 36 properties. As part of this scheme Action Homeless renovates properties in a suitable way and supports residents in establishing independence. This particular step has been critical within the context of reduced social housing.

2. **Action Trust:** this is a separate enterprise that supplies valuable work experience and volunteering opportunities for residents. Action Trust was initially contracted to provide a cleaning/decorating service in the hostel and other properties, and this initiative has now expanded.
3. Meetings with management and trustees: following resident feedback on a lack of contact with senior management, regular meetings were set up with trustees and managers to let residents express their views and concerns.

Leicester Money Wise is an excellent resource which plays a vital role in helping residents manage their income, avoid debt, and apply for housing. Action Homeless works closely with this initiative so as to address the current gap in move-on support (floating support only starts three or four weeks after a resident moves out of Mayfield House). Money Wise workers support residents in their preparations for moving on from the hostel by for example helping them budget their finances and set up utility payments.

Recruitment for the support worker role can be challenging given the nature of the role and the skills and aptitudes required. Volunteers with a range of backgrounds and motivations are trained, nurtured, and encouraged to apply for permanent paid roles as they come up. Experienced volunteers often understand the complexities of the role in a way that candidates found through advertisements may not. This approach to ‘growing their own talent’ results in the selection and recruitment of committed and able staff who continue to work with the service.

Staff receive training in mandatory areas, and whenever possible are supported in securing NVQ3 qualifications in Health and Social Care, focusing on topics such as mental health and addiction. Hostel management has built relationships with other relevant agencies in Leicester – notably Inclusion Healthcare – making training available for staff in line with their individual Personal Development Plans. A counsellor from Leicester Mental Health Services supports staff in dealing with work stress and pressure. Staff particularly valued the reflective sessions with the local community practice nurse and felt that they provide a much needed opportunity for staff teams to communicate.

Outcomes
The service collects data on a range of outcomes as required by Leicester City Council commissioners, as well as other specific data for the Board such as progress in the staff’s Personal Development Plans. The City Council uses the data to better understand the needs of the local people and to forecast future needs.

In 2015/2016, 185 people were accommodated by the hostel (68% of this cohort had long-term illnesses/disabilities). The service continues to focus on supporting positive planned move-on. In 2015/2016, 62% of residents left in a positive and planned away, representing a 10% increase on the previous year.

A total of 90% of residents present with two support needs additional to homelessness and its causes and consequences. Whilst the service has worked hard to address this need, it remains an ongoing challenge. The majority of this cohort has a minimum of one drug or alcohol support need, with mental health and offending often presenting as a secondary need. Approximately 80% of the daily work of this hostel involves working in partnership with other services to meet the complexity of need.
Case Study 9: John Austin Court, St Basil’s, Birmingham

John Austin Court provides self-contained accommodation for young people between the ages of 16-25 who are homeless or at risk of homelessness. The service is one of 30 accommodation schemes run by the youth homelessness charity St Basil’s.

Service aims, ethos and principles
The overarching aim of St Basil’s is to tackle and prevent youth homelessness in Birmingham and the surrounding areas. John Austin Court offers supported accommodation and services to create opportunities for young people that can function as springboards to help them realise their potential and avoid entering the cycle of homelessness. Prevention is addressed by a focus on the risk factors associated with repeat homelessness, such as rough sleeping, addiction, poor mental health, and unemployment.

The service additionally offers a ‘step down project’ which helps young people develop vital skills for independent living. At John Austin Court young people are responsible for their own council tax, utility bills, and TV licences.

Whenever safe and appropriate, the service focuses on reconnecting estranged young people with their families. Besides providing accommodation, St Basil’s prioritises employment-related support. At this service employment is seen as key in helping young people stabilise, improve in wellbeing, and avoid future crises.

Delivery of the service
John Austin Court provides 41 self-contained flats for single young people, couples, and parents between the ages of 16-25. The units have been designed to maximise privacy and each flat has its own front door and can be accessed directly from the street. The slightly larger units provide extra space for parents and their children. The flats are of good quality and well suited as secure and safe temporary homes. Young people who have a local connection to Birmingham can access these accommodations via the Youth Hub, which is managed by St Basil’s on behalf of Birmingham City Council.

To stay at John Austin Court young people must agree to engage in a support programme, working with staff to set personal objectives that relate to moving to independent living. A life skills programme that focuses on building practical skills is available for all residents and includes topics such as securing benefits, applying for housing, cooking, attending appointments, and accessing employment. This programme is delivered as a 3-5 module course, and concludes with an end-of-year graduation ceremony:

‘For young people that have never had a qualification, to even just be, it’s a level one qualification but actually to be able to go to that graduation, to bring their family and friends, it is so rewarding for them, and us.’ (Staff member)

St Basil’s employs a psychiatrist for mental health support of the young people. A specialised team from Birmingham University also provides a 12-week mental skills training programme, and by organising a range of activities such as weekend trips, cake bakes, etc., the programme helps build young people’s self-confidence and ability to engage in education, employment, and training.

The service focuses on building self-confidence and raising aspirations by identifying and building on young people’s existing skills and interests. At John Austin Court each support worker is responsible for about 10 service users, but when the designated worker is absent the team works closely to support all the young people.

The approach and attitude of the staff are critical to the project’s success, focusing on the developing of constructive relationships with the young people to help them achieve as much as possible during their stay.
Looking back and forward: exploring changes over time
In recent years Birmingham City Council has reduced its funding and, following a period of negotiation, has announced a further 20% cut to young people’s services. It is unclear how the reduction will be found.

St Basil’s currently holds £2.3 million from the Supporting People (formally known as) budget for housing, floating support, and supported lodgings. 90% of the resources allocated stems from contract delivery, with the additional 10% provided on the basis of a composite outcome measure made up of 13 elements. The current arrangement remains in place until November 2017, and management is exploring various ways to sustain activities.

Changes to St Basil’s funding contract caused the amount of time that residents were permitted to stay at John Austin Court to be reduced. The maximum stay used to be two years, but is now 12 months for those between the ages of 16–21 year, and six months for those 22 years and older. Staff reported that the building of trusting relationships with residents has since become more challenging, especially for those with complex needs. St Basil’s has responded by increasing the level of floating support, which is now set officially to three months (although young people can continue to visit the project after this point).

Contextual factors
Because of Birmingham’s severe lack of social housing it can be challenging to secure a move-on for residents of John Austin Court. Residents expressed frustration at the slow progress of securing accommodation, and said that they struggled to keep abreast of Birmingham City Council’s allocation processes.

Once tenancies are awarded, young people are expected to take them up quickly. It can however take several weeks before furniture and white goods are provided and/or benefits are secured, and staff at John Austin Court work hard to minimise the disruption and stress of a move into a new property.

Outcomes
Strategic city-wide outcomes are systematically measured through the Hub, allowing St Basil’s to collect demographic and needs-related data for each young person accessing the service. This information allows St Basil’s to track the outcomes of engagement with the project, progress made, and the nature and rates of dropout, and subsequently informs how the services are developed and targeted.

Individual progress is measured by the Homelessness Outcomes Star and a Risk Tracker, assessing each young person’s needs in regard to housing and support. These processes allow young people to work with staff in creating action plans and work towards personal goals. Both tools allow young people to visually track their process and monitor what needs to be done in order to move forward. After the young people achieve these goals, the service focuses on moving them on to alternative accommodation. Youth Hub data shows that 87% of young people using St Basil’s services leave in a planned positive way.

Examples of good practice
One of the most striking aspects of John Austin Court consists of its commitment to a Psychologically Informed Environment (PIE). The key principle underlining St Basil’s incorporation of the PIE approach into John Austin Court’s services is captured in the statement, ‘you are important, you are valued.’ Specialist training and reflective group sessions led by a psychologist focus on best practice in supporting people with trauma and poor mental health, and provide staff with the skills and confidence to understand and manage their own behaviours effectively. The service operates in a climate of support and constructive challenge that prioritises individual and collective learning.

The interviews with residents demonstrated the benefits of the PIE approach with the young people, where they reflected at length about feeling that staff takes them seriously and treats them like adults, and how they felt able to discuss personal issues and believed that the workers operate in their best interest. One resident said that at John Austin Court he felt safe for the first time in his life and that his support worker was the first adult he had ever really trusted.
St Basil’s has strong partnerships with national bodies, commissioners, funders, and other provider organisations and is a leading organisation; this partly because of its size and partly because of its ambition and vision. A manager articulated St Basil’s role in ending homelessness in that they seek to strengthen the ‘jigsaw of services’ across the region and recognise the components of an effective offer: ‘it’s a whole system, it’s collaborative, it’s multi-agency, it’s well managed.’

St Basil’s focuses on the needs of young people rather than the aspirations of their organisation and shares knowledge, experience, learning, data, and resources with partners in order to improve the system for young people, and seeks to influence the wider system. Working in partnership has brought significant benefits; in 2016 no young people slept rough in Birmingham.

St Basil’s has sought to secure a broad funding base that provides flexibility and increases the sustainability of services. Funding is received from several local authorities, the DCLG, Public Health England, a range of charity funders, and via initiatives such as The Fair Chance Programme.
Case Study 10: 90 Hope Street, Stoke-on-Trent
90 Hope Street is a hostel that provides accommodation and 24-hour support for homeless men and women in Stoke-on-Trent. The service is delivered by Brighter Futures, a charity that supports people who need help to live independent and fulfilled lives

Aims, ethos and principles of the service
The hostel provides a safe and secure environment for highly vulnerable homeless people who have experienced trauma and have complex needs. Many of the residents have been known to services for a long time and have found it difficult to settle in other accommodation projects. The hostel’s primary focus is to prepare people to live independently and address their problems (which often includes substance abuse). The hostel supports residents in accessing a range of services and preparing for the demands of taking on and maintaining a tenancy.

90 Hope Street has adopted a creative approach in supporting those struggling with addiction. The service operates as a “wet hostel” where alcohol can be consumed on the premises under closely monitored and regulated conditions. This approach helps prevent harm to individual residents, minimises disruption to the wider community, and prevents problems being simply taken elsewhere.

The hostel’s policies and procedures are based on principles of tolerance and flexibility, and staff and management demonstrate a strong commitment to adapting support to the needs of residents:

‘The nature of our customers, they’re chaotic. Their lifestyles are chaotic. Their attitudes and behaviours change. No two days are ever the same here, no two hours are the same. For me, it’s tailoring the policy and procedure, and the support, to the needs of the individual. Not tailoring the individual to meet the needs of policies and procedures and support, I always work like that.’ (Staff member)

Building relationships forms a core ethos of the service, and staff will spend time getting to know residents through key working sessions and informal interactions. The hostel has an ‘open-door policy’, with manager and duty workers available to speak with the residents at any time. The hostel also promotes equality and focuses on challenging discrimination and prejudice in all its forms.

Delivery of service
90 Hope Street provides a total of 26 rooms that function on three different tiers: full board, half board, and bedsits. Full board is available for those with the greatest needs, with service charges set at £44 per week. Rent for half-board is £35 per week, and £17.50 per week for the bedsits. The hostel can accommodate up to three couples and also has two emergency beds, of which one is reserved for females. All residents must have a local connection, and the maximum stay at the hostel is 12 months. The hostel is direct access, and residents can approach the service and request a space.

The hostel employs a rigorous move-on assessment process and offers several internal and external move-on options. Typically, residents will progress through the three tiers as they grow in confidence and demonstrate that they are ready for independent living. Residents are likely to be considered for a bedsit if they engage with the support provided, maintain a clean and tidy room, and pay their service charges. Staff will closely monitor the independent living skills of the people in the bedsits, which helps to inform move-on referrals.

When residents move on from the hostel they will usually be referred to lower support hostels and/or resettlement properties provided by Brighter Futures. The hostel offers transitional support for a maximum period of 12 weeks, with floating support workers from Brighter Future providing ongoing support afterwards.

Keyworkers will closely tailor and adapt support to the needs of individual residents. For example, while some residents are able and willing to attend scheduled key working sessions, others face particularly acute barriers in engaging with structured support. In these cases staff will adopt a flexible and adaptable approach by for example engaging with residents in a more relaxed environment such as the hostel garden.
A number of services are provided in-house by various external agencies such as Citizen’s Advice, Job Centre, and sexual and dental health services. Lifeline – a substance abuse agency – has a regular presence in the hostel with a drop-in service. Until recently the hostel employed a permanent community matron, but after local NHS providers recently reconfigured services this position was terminated.

**Looking back and forward: exploring changes over time**

A general redesign of the hostel was informed by a Psychologically Informed Environment (PIE) based approach. Window bars were removed and the entrance areas and communal areas have been opened up and repainted to make them more welcoming. Wherever possible, posters and warning signs have also been removed.

Interviewees reported that for some long-term rough sleepers the relationship with their dogs is critical to maintaining their wellbeing. These individuals repeatedly rejected offers of accommodation that would separate them from their pets. In response to this issue the hostel addressed the possibility of allowing dogs in the hostel. Staff first consulted residents on any emergent issues (such as dog allergies and fears of attack), and a policy was then adopted which allowed dogs to stay in the hostel if they were kept under control. A number of bedrooms were adapted to accommodate dogs, replacing carpet with tiles and removing skirting boards. There are now two dogs staying in the hostel, and staff and residents report this to have positively impacted the hostel’s dynamics.

**Contextual factors**

In terms of financial stability, Stoke-on-Trent City Council has developed a strategy to combat homelessness that has a significant focus on prevention and promoting wellbeing. The responsibility for commissioning homelessness services rests with the Public Health Department and forms a critical element of strategies that focus on reducing inequalities in health and wellbeing.

The hostel works in partnership with local agencies such as the Homelessness Team at Stoke-on-Trent Council, hostel providers (notably the Salvation Army), as well as Voices, which is an agency that co-ordinates access to services for people with complex needs (and is critical to the hostel’s success).

**Examples of best practice**

90 Hope Street is an example of a forward-thinking hostel. As illustrated by the service’s recent change into a ‘wet hostel’ (described below), the management team responds quickly to emergent issues and is not afraid to break new ground.

Anti-social behaviour outside the hostel used to be common, where residents would get together and drink alcohol on nearby derelict land. The wider community often complained and called the police, which detrimentally impacted the hostel’s reputation. To address this issue the hostel began a period of careful planning and consultation. Management first visited other wet-hostels to learn from their experiences, and several meetings were held with both staff and residents to address any fears or concerns. The hostel carried out (ongoing) risk assessments to mitigate potential harm to staff, residents, and the wider community.

The hostel then decided to permit alcohol consumption on the premises under regulated and managed conditions. Residents can bring a limited number of beers and ciders into the hostel which must be signed in at reception (spirits are not permitted). In addition, residents are not allowed to congregate in each other’s rooms. Following this change there has been a reduction in anti-social behaviour outside the hostel and the relationship with the local community has improved.

This hostel is also a prime example of dedicating time and effort to build relationships between staff and residents, and a general atmosphere of trust and openness seems to prevail within the hostel.

‘Before it would have been ‘right you’ve had three strikes and you’re out. You’ve not been paying it. But why exclude somebody to go back on a case load, when we can actually do further work with somebody.’ (staff member)
Staff at this hostel are committed to understanding a person’s history and motivation. Communication with residents is prioritised and sanctions are only used as a last resort.

The interviews also showed that the hostel performed particularly well in regard to client engagement. Both staff and residents mentioned several positive changes that were introduced after resident consultation, such as regular film nights and the provision of an XBox and table tennis.

Something which is critical to the success of the hostel is finding – and supporting – a full complement of staff with the right attributes, experience, and attitudes. Customers spoke warmly about the staff and recognised that they worked hard and in their best interests.

Brighter Futures works with various vulnerable populations, which benefits staff in terms of skills sharing and personal development. The in-house Training Academy provides opportunities for staff to gain insight into the various aspects of their roles and learn about best practice.

Outcomes
Outcomes are agreed and monitored via the Outcomes Star. The Star is used to initiate conversations with customers about their past such as their offending history, the challenges they face, how they found themselves in the hostel, and their longer term plans (such as finding a job, contacting family, the needed changes in order to live independently). The Outcomes Star is also used to identify services that residents could access, such as primary care and substance abuse services. The keyworker additionally uses these discussions to help customers maximise income. Progress in relation to the Star is monitored and tracked in a WorkBook. The hostel considers this information important to secure a successful transition of customers into their own accommodation.
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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