

# Commissioning Plan for Advice, Support and Accommodation Services to Prevent Homelessness 2011-2016: Summary of Consultation

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City of Edinburgh Council

25 August 2011

## 1 Purpose of Report

To refer recommendations from the Health, Social Care and Housing Committee, in terms of Standing Order 53, on the Commissioning Plan for Advice, Support and Accommodation Services to Prevent Homelessness 2011-2016.

## 2 Main Report

### 2.1 Background

At its meeting on 16 August 2011, the Health, Social Care and Housing Committee considered the attached report by the Director of Services for Communities (Appendix 1) on the outcome of consultation on the draft Commissioning Plan for Advice, Support and Accommodation Services to Prevent Homelessness 2011-2016. The report proposed changes to the Plan as a result of the consultation.

### 2.2 Deputation

The Committee heard a deputation from UNITE. The deputation raised the concerns of their members who worked in homelessness services on the Director's report and on the Equalities Impact Assessment. A copy of their submission is attached at Appendix 2 to this report.

### 2.3 Committee Consideration

The Committee heard submissions from and asked questions of Services for Communities and the Chair of the Checkpoint Group (Ella Simpson, EVOC). The questions related to the report and to the concerns expressed by the deputation.

## **2.4 Motion**

- 1) To agree the consultation report and the proposed changes to the draft Commissioning Plan for Advice, Support and Accommodation Services to Prevent Homelessness.
- 2) To agree the submission of the final Commissioning Plan for Advice, Support and Accommodation Services to Prevent Homelessness to the Policy and Strategy Committee on 6 September 2011.

- moved by Councillor Edie, seconded by Councillor Work.

## **2.5 Amendment 1**

- 1) To agree that the Committee remained deeply concerned that the voices, concerns and needs of very vulnerable service users and the people who worked closely with them had not been taken fully into account in this process and that risks remained of a recurring cycle of homelessness and an increasing number of clients whose needs would not be met.
- 2) To note, but not to agree the revisions at this point.
- 3) To call for a further report to the Policy and Strategy Committee on 6 September 2011 which addressed all the concerns expressed by front-line workers and service users on continuity of care, all the financial and staff resources available to meet a growing need, how other health and social care services would dovetail to meet the need, choice of service provider and accommodation.
- 4) In any event, to agree that both the Checkpoint Group and the Joint Commissioning and Planning Group for homelessness services should include a representative of the trades unions and a service user from a multiple and complex needs service background who could represent views from this unique and central perspective.

- moved by Councillor Child, seconded by Councillor Ewan Aitken.

## **2.6 Amendment 2**

- 1) To agree that the Committee remained concerned that the needs of vulnerable service users and the people who worked closely with them had not been taken fully into account in this process and that risks remained of a recurring cycle of homelessness and an increasing number of clients whose needs would not be met.
- 2) To note, but not to agree the revisions at this point.
- 3) To call for a further report to the Policy and Strategy Committee on 6 September 2011 which addressed all the concerns expressed by front-line workers and service users on continuity of care, all the

financial and staff resources available to meet a growing need, how other health and social care services would dovetail to meet the need, choice of service provider and accommodation.

- 4) In any event, to agree that both the Checkpoint Group and the Joint Commissioning and Planning Group for homelessness services should include at least two service users from a multiple and complex needs service background who could represent views from this unique and central perspective.

- moved by Councillor Buchan, seconded by Councillor Elaine Aitken.

## 2.7 Voting

The voting was as follows:

For the motion	-	9 votes
For amendment 1	-	5 votes
For amendment 2	-	3 votes

## 3 Decision

- (a) To approve the motion by Councillor Edie.
- (b) **In terms of Standing Order 53, the requisite number of members required that the decision be referred to the Council as a recommendation.**

**Alastair Maclean**  
Head of Legal and Administrative Services

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Appendix	1	Report by the Director of Services for Communities
	2	Submission from UNITE
Contact/tel		Carmel Riley 529 4830, e-mail carmel.riley@edinburgh.gov.uk
Wards affected		City wide
Background Papers		Minute of Health, Social Care and Housing Committee 16 August 2011

## Commissioning Plan for Advice, Support and Accommodation Services to Prevent Homelessness 2011-2016: Summary of Consultation

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### Health, Social Care and Housing Committee

16 August 2011

#### 1 Purpose of report

- 1.1 This report summarises the main comments received during the formal consultation on the draft Commissioning Plan for Advice, Support and Accommodation Services to Prevent Homelessness 2011-2016. It outlines the changes which will be made to the Plan as a result of these comments.

#### 2 Summary

- 2.1 Following approval of the draft Commissioning Plan, a six week period of consultation took place between 25 May and 6 July 2011. The majority of respondents agreed with:
- The vision, aims and outcomes set out in the draft Commissioning Plan;
  - The focus on preventing homelessness and preventing people from being homeless for any longer than necessary;
  - The view that demand for services would grow; and
  - Using volunteers, befriending and other social networks to provide emotional and social support.
- 2.2 However, even where a majority of respondents agreed with the proposition, others disagreed. There were also useful comments on the potential risks of implementation in some areas. Account has been taken of these views and comments within the Council's proposed response.
- 2.3 Views were more mixed when asked about limiting medium term accommodation to specific groups of people, providing access to temporary accommodation only through the Council and focussing the Council's internal visiting support services on service users with more chaotic lifestyles. There were also varying views on target timescales for temporary accommodation and visiting support. Similarly, views on the use of private rented sector accommodation varied but there was strong disagreement with the use of flat sharing.

- 2.4 A number of important areas of the plan will be amended to reflect comments and feedback during the consultation process. This will include:
- Clarification that the length of time spent in temporary and other forms of accommodation needs to take into account individual needs;
  - Different options will be considered to streamline access to emergency and temporary accommodation and to other services for people in crisis. This will be done in partnership with the voluntary sector.
  - A Joint Commissioning and Planning Group for the Prevention of Homelessness will be set up to ensure that commissioning decisions across different commissioning plans will be co-ordinated effectively and support the outcome of preventing homelessness.
  - A Checkpoint Group will be established involving external stakeholders to provide advice on the implementation of the commissioning plan and to take an overview of the performance framework for Council run and externally commissioned services.
- 2.5 A Checkpoint Group was established to ensure that the consultation process was carried out effectively. The Checkpoint Group agreed the consultation plan and the process for consultation and met regularly during the consultation process, agreeing amendments to the plan such as additional focus groups. It has confirmed that the plan was carried out and the process was followed. The Group confirms that this report represents an accurate summary of the issues raised during the consultation and that responses to these have been provided. Appendix 1 sets out the remit and membership of the Checkpoint Group.

### **3 Context**

- 3.1 The Commissioning Plan will set out the approach which will be taken to delivering services over the next five years. It seeks to deliver the outcomes set out in the Homelessness Strategy and follows the principles laid out in the overarching Commissioning Strategy. The Homelessness Strategy was approved by Health, Social Care and Housing Committee on 4 February 2008.
- 3.2 There is an important and valued partnership in the city between the Council, other statutory agencies, providers and others in the voluntary sector. This partnership needs to continue and to be strengthened even further.
- 3.3 The Plan is being developed at a time of significant policy and economic change. The economic environment means that the Council and its partners have to be more effective at delivering outcomes within the resources available.
- 3.4 Significant reform of welfare benefits will also impact on households who are or could become homeless. Changes are already having an impact. For example, in 2011/12 the Council will lose around £1.2M in income as a result of housing benefit levels for temporary and supported accommodation. Changes brought about by welfare reform will have an impact on both service users and service providers and the homelessness strategy and commissioning plan will have to refine its outcomes and approach in response to these over the next five years.

- 3.5 The draft Plan highlighted the need to consider the balance between Council run and externally commissioned services. This will continue to be reviewed through each stage of implementation of the Plan. This will allow a thorough consideration of what is the most appropriate approach for each service area.
- 3.6 Each phase of procurement will have a well developed implementation plan which will allow thorough consideration of equalities impacts and procurement risk assessment as well as the relative balance and focus of Council run and externally commissioned services. It will also examine the various procurement options including areas such as public social partnerships which have not previously been part of the commissioning process for these services.
- 3.7 A Joint Commissioning and Planning Group will be established for homelessness services. This will ensure that commissioning plans for Adult Social Care and Children and Families services, as well as commissioning plans and strategies for addictions services, mental health services and personalisation and choice are co-ordinated to the best effect to meet the outcomes set out in this plan.
- 3.8 The Commissioning Plan sets out significant challenges and seeks greater performance and effectiveness in Council run and externally commissioned services to prevent homelessness. A Checkpoint Group will be established involving external stakeholders. This will advise on the implementation of the Commissioning Plan and take an overview of performance for Council run and externally commissioned services. This group will also take an overview of the performance management and improvement required of both Council run and externally commissioned services.
- 3.9 The measurement of outcomes will be reviewed as part of the implementation of the Plan. This will include both how things are measured and what should be measured. It will also include a review of the current Edinburgh Common Client Outcomes database (ECCO).

#### **4 Consultation process**

- 4.1 The consultation process took place between 25 May and 6 July 2011 and included a large number of users, providers and Council staff. Staff from provider organisations were consulted by means of a survey at the pre draft stage. The consultation covered more than 500 individuals and provided nearly 2,000 comments. These covered a range of interested parties including carers, provider organisations, advocacy organisations and religious groups. This built on the earlier pre-draft consultation which covered approximately 300 people.
- 4.2 The Chair of the Checkpoint Group also met a request from a service user to meet with them to explain the consultation process that was followed.
- 4.3 There are three categories of response. These are outlined in the table below.

**Table 1: Response categories**

<b>Response category</b>	<b>Number of participants</b>	<b>Number of comments</b>
<b>Survey</b>	212	1,073
<b>Focus groups</b>	265	751
<b>Other submissions</b>	38	119
<b>Total</b>	515	1,943

- 4.4 The survey responses included 54 on behalf of organisations with the rest submitted by individuals. Not all surveys included a response to every question so numbers vary throughout the report. The voting responses to specific questions were analysed using “survey monkey” technology to give numbers and percentages for each response.
- 4.5 A total of 27 focus group events were held. These covered service users, providers and Council staff from a range of services, including sessions with the Strategic Homelessness Action Partnership Edinburgh (SHAPE) and Edinburgh Alcohol and Drug Partnership’s (EADP) Treatment and Recovery Group. Focus groups covered a smaller range of more detailed questions than in the main consultation document and these are highlighted under the relevant sections in the analysis.
- 4.6 A total of 58 responses were received from other stakeholders. This included a special consultation with the Homelessness Planning Group (HPG). The HPG oversees the implementation of the homelessness strategy. It includes representatives from the voluntary sector, other Council departments, Registered Social Landlords, the NHS and Shelter. Where the HPG highlighted specific issues these have been identified within the summary.
- 4.7 The responses also included a meeting of the Homeless Quality Assurance Group, which involves operational homelessness staff within the Council.
- 4.8 In addition, 38 written responses were hand delivered to Waverley Court in one batch and received by the Commissioning Team on the final day of consultation. These disagreed with all proposals except one. For example, 100% of these responses disagreed with the prevention of homelessness being an outcome for the strategy. Only 10 contained any comments. Each one of the 38 responses was addressed wrongly.
- 4.9 The Checkpoint Group agreed that these 38 responses should be identified separately within this report and as a group. They are identified as “other submissions” in the relevant tables. Given the contrast between these 38 responses and other responses received during the consultation the Checkpoint Group agreed to write to these respondents and invite them to two focus groups to seek to obtain further views from this group. Two respondents replied to the written invitation. None of the 38 respondents attended the focus groups.

- 4.10 Even where people agreed with the proposition, comments identified risks and specific practical concerns with implementation. These comments have been taken into account in this response.
- 4.11 Appendix 2 summarises the consultation undertaken during the formal consultation period while Appendix 3 contains information on the pre draft consultation. Appendix 4 contains a summary of the results of the formal consultation.

## 5 Detailed analysis of responses

- 5.1 Responses below are grouped together under the main topics of the consultation but there is some overlap between questions, particularly where respondents have made comments.

### Vision statement (Survey Question 1)

- 5.2 The vision statement establishes that the focus of the plan is preventing homelessness. It places people at the centre of decisions on how support should be delivered. Respondents to the survey were asked whether they supported the vision which had been outlined for the Commissioning Plan. Most respondents agreed with the vision as shown in the table below, although the other submissions received almost universally disagreed with the statement. This question was not asked in focus groups.

**Table 2: Vision statement**

	<b>Strongly agree/agree</b>	<b>Disagree/ strongly disagree</b>
<b>Survey</b>	<b>(114) 69%</b>	<b>(52) 31%</b>
<b>Other submissions</b>	<b>(0) 0%</b>	<b>(38) 100%</b>
<b>Survey + other submissions</b>	<b>(114) 56%</b>	<b>(90) 44%</b>

- 5.3 Whilst a significant proportion of survey respondents supported the vision statement, comments included:
- A range of specific items which should be highlighted within the vision statement; these included referring to emergency response or causes of homelessness but none of these were mentioned by more than one respondent;
  - Interpretation of the statement as being, for example, “only about saving money”, “quality of support rather than the cheapest support”; or
  - That the plan focuses on providing support to people ‘quickly’ rather than effectively.



## Response

- 5.4 It would not be possible to include all of the suggestions made for the vision within one statement. However, the revised Plan will be altered to further make clear that the intention is to deliver services which respond quickly and are effective. This recognises the need to deliver services which shorten the length of time which people have to be homeless and help to minimise the possibility of recurrence. This is supported by responses to other consultation issues in relation to minimising the amount of time people are homeless.

### Challenges and aims (Survey Question 2)

- 5.5 The online survey asked whether respondents agreed with the aims of the draft Commissioning Plan. These aims were to:
- Meet the strategic outcomes set out in the City Housing Strategy within the resources available;
  - Provide good quality services, that are value for money, to help more people achieve these outcomes; and
  - Make access to these services as simple and effective as possible for the people who need them.
- 5.6 As shown in the table below, a majority of respondents to the survey agreed with the aims.

**Table 3: Challenges and aims**

	<b>Strongly agree/Agree</b>	<b>Disagree/ strongly disagree</b>
<b>Survey</b>	<b>(110) 82%</b>	<b>(24) 18%</b>
<b>Other submissions</b>	<b>(0) 0%</b>	<b>(3) 100%</b>
<b>Survey + other submissions</b>	<b>(110) 80%</b>	<b>(27) 20%</b>

*NB: A number of individuals indicated 'Neither Agree or Disagree' in response to this question.*

- 5.7 Many comments to this question related to the challenge of achieving this, for example:
- “is it do-able within restricted resources?”; or
  - “Whilst getting value for money from the providers is essential....it is also important to maintain continuity”.
- 5.8 Some respondents who agreed also suggested prioritising specific areas, such as veterans or those who were ‘difficult to engage’.

## **Response**

- 5.9 The strong level of agreement with the challenges and aims identified in the draft Commissioning Plan sets a good foundation for partnership working. The emphasis on constrained resources is required given the need to deliver more service at a time when the Council's Long Term Financial Plan identifies the need for a 12% reduction in overall budget over the next three years.
- 5.10 Other statutory organisations, the voluntary sector and private sector providers will also face constraints on resources. Many individuals will feel the impact of welfare changes and the economic situation. The Plan focuses on preventing homelessness wherever possible in this situation and resolving homelessness as quickly as possible where it does occur. This will help to ensure that resources are correctly targeted and well used.
- 5.11 It is important that service users receive continuity of support and direction through their time in homelessness services. The focus on prevention and effective resolution of homelessness will help to provide this. We will also examine how case management approaches can be used to ensure continuity between different support services. The overarching Commissioning Strategy underlines the need for service users to be able to choose to remain with an existing provider and we will incorporate this in our implementation planning.

## **Delivering outcomes for people (Survey Question 3)**

- 5.12 The survey asked whether respondents agreed that there should be a stronger emphasis on the effectiveness of services in delivering positive outcomes for people, rather than on the management and design of those services. This means that the performance of services would be measured against what was achieved, for example, was homelessness prevented, were people moved from crisis to independence quickly and in a way that reduced the likelihood of them facing homelessness again rather than specifying too closely the management structures or specific services provided. For example it would be more important to measure that the provision of advice was successful at preventing homelessness rather than specifying and monitoring the many different types of advice that could be made available. Delivering key outcomes would give services a clear strategic direction.
- 5.13 Again survey respondents were significantly in agreement, as shown in table 4.

**Table 4: Outcomes**

	<b>Strongly agree/agree</b>	<b>Disagree/ strongly disagree</b>
<b>Survey</b>	<b>(91) 65%</b>	<b>(50) 35%</b>
<b>Other submissions</b>	<b>(0) 0%</b>	<b>(38) 100%</b>
<b>Survey + other submissions</b>	<b>(91) 51%</b>	<b>(88) 49%</b>

5.14 One respondent highlighted that “the outcome for the client has to be top priority otherwise what is the point in doing it”. There was no suggested alternative or rewording of outcomes.

5.15 The main issues identified in the comments were:

- Who will set the outcomes?
- How will the outcomes be measured?
- Outcomes should be set by service users; and
- Outcomes have to be sustained in the long term.

#### **Response**

5.16 The Council will set these outcomes in consultation with partners and service users. As part of the implementation process, work will be done to examine the best ways of measuring these outcomes. These will have to be measured in the short, medium and long term to ensure that work is effective at preventing recurrence of homelessness. This process will include a review of current monitoring systems such as the ECCO database.

5.17 Individuals and service providers will be able to determine objectives and requirements within those key outcomes in order to best give them the skills and independence required.

5.18 At paragraph 5.52 of this response we deal with the specific questions regarding how the performance of housing support services in delivering outcomes should be measured.

#### **Preventing homelessness (Survey Question 4)**

5.19 The draft Plan outlined a primary outcome of preventing people becoming homeless wherever possible and to prevent people being homeless any longer than is necessary. The majority of respondents agreed with this focus as shown in table 5. The HPG also agreed with this focus.

**Table 5: Preventing homelessness**

	<b>Strongly agree/agree</b>	<b>Disagree/ strongly disagree</b>
<b>Survey</b>	<b>(111) 77%</b>	<b>(34) 23%</b>
<b>Other submissions</b>	<b>(0) 0%</b>	<b>(37) 100%</b>
<b>Survey + other submissions</b>	<b>(111) 61%</b>	<b>(71) 39%</b>
<b>Focus group</b>	<b>(102) 76%</b>	<b>(32) 24%</b>

5.20 As with the survey the main view of the focus groups was that preventative work or early intervention should be at the heart of the plan. The main concerns identified in comments were that:

- Some types of support or tasks would not be "permitted" if this was the focus of housing support;
- Focusing on homelessness prevention would result in short term solutions and more repeat homelessness;
- Resettlement should be included within preventing homelessness; and
- The needs of people with long term support requirements, particularly those people who will never be able to live without support, were not sufficiently addressed.

#### **Response**

5.21 The revised Plan will continue the focus on prevention in line with the support received in consultation. It will be more specific about the types of housing support that exist, including prevention services which help with issues such as rent arrears and anti-social behaviour.

5.22 While previously housing support was defined for funding purposes by 21 tasks, other forms of support will not be excluded where it can be demonstrated that it is helping to achieve independence. However, there is a need to focus on key priorities and to ensure that housing support is clearly defined. In the past support has sometimes become an ongoing feature – for example in taking people to social activities. The revised Plan will make clear that this will not be a focus for housing support in the future. Providers will be able to assist people to gain the confidence to participate in activities but will then be expected to look at community groups, befrienders and volunteers to keep this going in the long term.

5.23 The revised Plan will be strengthened to make clear that prevention includes prevention of recurrence. This recognises that, to minimise the harm caused by homelessness and to make best use of resources, there is a need to get the support right first time. The revised Plan will also have a focus on “quickly and effectively”, rather than just referring to speed.

- 5.24 The focus of housing support is to give someone the skills to resettle and live independently. Where there are care needs there are services and accommodation which are better able to deal with these. Where the person initially presents with housing support needs but the need for long term care becomes apparent, providers will be expected to work to ensure the appropriate services are in place and to help the transition to take place.
- 5.25 The revised Plan will place a stronger emphasis on case management for more complex cases. There will continue to be a review process at six months which will allow extensions of support. This will be done where there is clear evidence that some more work is required to achieve independence.

**Moving from temporary into settled accommodation (Survey Question 5)**

- 5.26 Survey respondents were asked if people should be supported to move from temporary forms of accommodation to settled accommodation as quickly as possible and be able to access support in their own home without having to go to specialist accommodation to get it.
- 5.27 Temporary accommodation is not an ideal form of accommodation for the long term. While people remain in such accommodation they are still in a form of crisis. A small majority of survey respondents agreed with this proposal as shown in table 6.

**Table 6: Moving from temporary into settled accommodation**

	<b>Strongly agree/agree</b>	<b>Disagree/ strongly disagree</b>
<b>Survey</b>	<b>(83) 58%</b>	<b>(59) 42%</b>
<b>Other submissions</b>	<b>(2) 5%</b>	<b>(36) 95 %</b>
<b>Survey + other submissions</b>	<b>(85) 47%</b>	<b>(95) 53%</b>

- 5.28 There was some similarity in responses between those who disagreed and those who agreed (but had some concerns). The key concerns tended to stress that some people/groups may have greater difficulties in achieving settled accommodation quickly or at all or noted that “quickly should not be too quickly.”

**Response**

- 5.29 The revised plan will be amended to ensure that there are safeguards to ensure that where people are moved to their own self contained accommodation and need support that this is identified and delivered. Later in this response we deal specifically with the proposals to set targets for the maximum amount of time in temporary accommodation.

5.30 A small minority of people said that service users should be allowed to stay in the hostel of their choice for as long as they want to. Temporary accommodation is generally costly, in high demand and designed to be a last resort when someone has no home. It is not an appropriate long term home. However, the draft Commissioning Plan does make provision for some groups who may need a longer period in supported accommodation.

**Provision of medium term accommodation for specific groups (Survey Question 6)**

5.31 The draft Plan highlighted that some groups might need longer in accommodation in order to develop the skills for independent living. This accommodation would not be emergency hostel provision but separate specialist accommodation where individuals could stay for up to two years. The survey asked whether such medium term accommodation should be focussed on young people, people with mental illness, those dealing with addictions or fleeing violence in order to help the transition to settled accommodation.

5.32 The majority of survey respondents agreed with this proposition. There were a significant number of neutral responses to this question. The results are shown in table 7. A slight majority of those in focus groups disagreed with this proposal. When this was broken down, providers were unanimous in their support, a majority of Council staff were in favour but there was significant disagreement amongst service users. HPG was in agreement with the proposal subject to some issues about client groups.

**Table 7: Provision of medium term accommodation**

	<b>Strongly agree/agree</b>	<b>Disagree/ strongly disagree</b>
<b>Survey</b>	<b>(69) 58%</b>	<b>(49) 42%</b>
<b>Other submissions</b>	<b>(0) 0%</b>	<b>(37) 100%</b>
<b>Survey + other Submissions</b>	<b>(69) 45%</b>	<b>(86) 55%</b>
<b>Focus groups</b>	<b>(43) 45%</b>	<b>(53) 55%</b>

5.33 A number of survey comments were supportive of the groups selected, highlighting specific parts such as “looked after children” or suggesting that fleeing violence should not be limited to women. Some focus group attendees suggested that it includes other groups to the extent of “everyone who needs it.”

5.34 Some comments suggested that rather than emphasising support for specific groups, it may be better to emphasise specific types of support.

## Response

- 5.35 We will continue to commission specific supported accommodation for young people, people with mental illness and those dealing with addictions. We recognise that some people will need time to prepare for settled accommodation and will allow the provision of support or accommodation for longer periods than other groups in order to help them develop the skills they need to live independently. We will also continue to commission specific accommodation for women fleeing domestic abuse (to ensure their personal safety and provide opportunities to deal with the trauma of domestic violence).

## Using temporary accommodation more effectively (Survey Question 7)

- 5.36 In addition to the emergency nature of temporary accommodation, there is also a limited supply of temporary accommodation. The survey asked whether respondents agreed that better use should be made of the existing range of temporary and medium term accommodation by moving people on more quickly to settled accommodation. The majority of respondents agreed as shown in table 8.

**Table 8: Using temporary accommodation more effectively**

	<b>Strongly agree/agree</b>	<b>Disagree/ strongly disagree</b>
<b>Survey</b>	<b>(73) 61%</b>	<b>(47) 39%</b>
<b>Other submissions</b>	<b>(0) 0%</b>	<b>(38) 100%</b>
<b>Survey + other submissions</b>	<b>(73) 46%</b>	<b>(85) 54%</b>

- 5.37 Comments in support of people moving on more quickly were generally qualified by the need to take into account individual needs. Those who disagreed stated that it would lead to an increase in inappropriate referrals or that it may “look good on paper but probably won’t work”. One respondent stated “Not everyone wants a house”. Some respondents felt long term hostels would be a solution for those with long term addiction issues.

## Response

- 5.38 Hostels are designed to provide short term emergency accommodation. They are not ideal places for people to stay in the medium to longer term. Moving people to settled homes with adequate support is more likely to achieve positive outcomes. Additionally, the pressures on temporary accommodation as a result of welfare reform and changes to homelessness requirements mean that there is a need to use temporary accommodation as effectively as possible.

### Access to temporary accommodation (focus group question 1a)

- 5.39 There is a need to maximise the efficient use of temporary accommodation. This includes increasing daily occupancy even more, ensuring that accommodation is given to the most appropriate people and that support and other needs are identified early. There is also a need to ensure that the access route to accommodation for those in crisis is quick and effective. At present some emergency accommodation can be accessed by self referral. This means that people often have to retell their story at a number of locations to deal with homelessness assessment, access accommodation, health and other support needs.
- 5.40 Attendees at focus groups were asked whether people should have to approach the Council to access temporary accommodation. A slight majority disagreed with this proposal as shown in table 9. The HPG did not agree with this proposal although members recognised some advantages of a single process.

**Table 9: Access to temporary accommodation**

	<b>Strongly agree/agree</b>	<b>Disagree/ strongly disagree</b>
<b>Focus groups</b>	<b>(41) 47%</b>	<b>(47) 53%</b>

- 5.41 Those in favour tended to stress that a single gateway could provide fairness and increased choice. They also suggested that it would save time for those requiring accommodation and for services. Some respondents were concerned that it might limit access because individuals who were already excluded from accommodation, might choose not to approach the Council or might have difficulty in getting to an access point.
- 5.42 Different hostels have different criteria for entry so there was a perception that a uniformity of rules could be beneficial and increase equalities. Other responses highlighted concern that a single access route might not take account of these differences in criteria. Amongst those in favour it was also felt that the process could be good for identifying early intervention options.

### Response

- 5.43 Given the range of issues which have been identified, the Commissioning Plan will be revised to make clear the need to pilot an approach to simplify access processes and further improve efficiency in the use of accommodation. This will be done in partnership with the voluntary sector, providers and other stakeholders. It will consider access criteria, exclusions and risk management as well as who is best placed to manage such a system. This will allow us to assess the risks and benefits of such a scheme.



### **Demand for support (Survey Question 8)**

- 5.44 The Commissioning Plan emphasises the potential sources of increased demand. These include changes in homelessness requirements, increasing population and economic pressures. Survey respondents were asked whether they considered that demand for housing support was likely to grow. Unsurprisingly there was almost universal agreement with this suggestion as shown in table 10.

**Table 10: Demand for support**

	<b>Strongly agree/agree</b>	<b>Disagree/ strongly disagree</b>
<b>Survey</b>	<b>(133) 99%</b>	<b>(2) 1%</b>
<b>Other submissions</b>	<b>(31) 97%</b>	<b>(1) 3%</b>
<b>Survey + other submissions</b>	<b>(164) 98%</b>	<b>(3) 2%</b>

- 5.45 There was no pattern relating to the comments with a wide variety of responses, including the need for additional affordable housing and noting the changing economic context.

### **Response**

- 5.46 The Plan will set out proposals to maximise the number of people who can access advice and support, ideally to prevent homelessness in the first place or to limit the length of time people are homeless.

### **Council services to focus on those with chaotic lifestyles (Survey Question 9, focus group question 5)**

- 5.47 Survey respondents were asked to consider whether, during the lifetime of the plan, Council provided support services should focus on providing help to those with chaotic lifestyles, which include those who present a complex range of problems and challenges, and that external services should focus on more straightforward cases.
- 5.48 This proposition was based on a similar model used for the re-ablement of personal care services by the Council and sought to make best use of the Council's position to case manage complicated cases which demand a range of public sector and other responses to help the service user. It also sought to minimise duplication in the delivery of services.
- 5.49 This question was asked of both survey respondents and focus groups. There were significant variations in response between the types of consultation as shown in table 11. Survey respondents and other submissions generally disagreed with the proposal while those in focus groups were more split. Within

the focus groups a majority of Council staff and service users agreed with the proposal but none of the providers agreed. HPG was against this proposal but believed that there was a place for much stronger case management, particularly where people might require more than one service.

**Table 11: Council services focus**

	<b>Strongly agree/agree</b>	<b>Disagree/ strongly disagree</b>
<b>Survey</b>	<b>(33) 27%</b>	<b>(88) 73%</b>
<b>Other submissions</b>	<b>(0) 0%</b>	<b>(38) 100%</b>
<b>Survey + other submissions</b>	<b>(33) 21%</b>	<b>(126) 79%</b>
<b>Focus group</b>	<b>(54) 51%</b>	<b>(52) 49%</b>

5.50 Most comments in favour stressed a division of labour, the beneficial work that in house services are doing and greater ability to co-ordinate with other services. Other comments challenged assumptions made about the effectiveness and best value of internal services while stressing the quality and experience of the voluntary sector in managing less straightforward cases and establishing relationships with individuals. They also felt that voluntary organisations might be better placed to advocate on behalf of the individual. The responses highlighted a requirement for better case management for these cases. The important work of Council services in early intervention with their own tenants was also highlighted.

**Response**

5.51 Given the wide range of views expressed, further consideration will be given to developing alternative options to this proposal. This will be done in consultation with our partners and service users.

**Measurement by outcomes rather than hours (Survey Question 10)**

5.52 With regard to managing the performance of services, Survey respondents were asked whether services should be measured by outcomes achieved rather than hours of service provided. This was a specific proposal following the earlier question in the survey (Question 3) on the need for positive outcomes for people. Measurement by outcomes would enable a greater focus on successfully dealing with homelessness and the underlying issues rather than just providing a number of hours of service. A majority of respondents agreed with this as shown in table 12.

**Table 12: Measurement by outcomes**

	<b>Strongly agree/agree</b>	<b>Disagree/ strongly disagree</b>
<b>Survey</b>	<b>(65) 57%</b>	<b>(50) 43%</b>
<b>Other submissions</b>	<b>(0) 0%</b>	<b>(38) 100%</b>
<b>Survey + other submissions</b>	<b>(65) 42%</b>	<b>(88) 58%</b>

5.53 Some of the comments to this question were diametrically opposed. For example:

- “outcomes measured by quality is more important than hours put in”; or
- “outcomes [are] a distraction to service delivery. Effective delivery should be based on individual needs”.

#### **Response**

5.54 The focus of performance will be on the achievement of positive outcomes for individuals that reflect their needs but that are also in line with wider strategic outcomes such as the prevention of homelessness and the aim to resolve crisis quickly and effectively rather than the process undertaken or the number of hours to get there. Although contracts may still have volumes specified the focus will be much more clearly on the end outcomes. This will allow more scope for innovation and flexibility. The extent of this will be made clear in specifications for services.

5.55 Work will be needed with our partners to review the current approach to monitoring services and to consider the ways in which these outcomes can be measured for services.

5.56 While there will be a need to demonstrate that services are providing support to meet the key outcomes, service users and providers will be able to consider what methods might best deliver this.

#### **Stay in temporary accommodation services (Survey Question 12)**

5.57 Survey respondents were specifically asked if the Council should aim to minimise the length of time people stay in temporary accommodation and medium term accommodation and work towards achieving a maximum stay of three months. Temporary accommodation is designed for emergencies. It does not provide a particularly homely environment, can lead to people becoming institutionalised if they are resident for too long, and is generally very expensive. In 2010/11 the average length of stay in externally commissioned hostels was 12 weeks and in Council run temporary accommodation just under 11 weeks.

5.58 Survey respondents were asked earlier in the survey for their views on the principle of moving the emphasis of supported accommodation from temporary accommodation to providing support in people's own homes (Survey Question 5). Both survey respondents and focus groups were also asked whether the Council should aim to minimise the length of time people need to stay in temporary accommodation and work towards a maximum stay of three months in order to minimise the time people spend in crisis. A slight majority of survey respondents agreed with this proposal, while focus groups tended to disagree as shown in table 13. The HPG disagreed with this proposal.

**Table 13: Stay in temporary accommodation services (question 12, focus group question 2a)**

	<b>Strongly agree/agree</b>	<b>Disagree/ strongly disagree</b>
<b>Survey</b>	<b>(62) 51%</b>	<b>(59) 49%</b>
<b>Other submissions</b>	<b>(0) 0%</b>	<b>(38) 100%</b>
<b>Survey + other submissions</b>	<b>(62) 39%</b>	<b>(97) 61%</b>
<b>Focus group</b>	<b>(34) 40%</b>	<b>(52) 60%</b>

5.59 Comments were often diametrically opposed. One respondent suggested a maximum stay of one month while some others said that service users should be able to stay as long as they wanted to. It was also highlighted that staying in temporary accommodation could be detrimental to recovery.

5.60 However other views included:

- Services should be needs led, based on housing history and personal requirements which may require more than three months;
- Those with addiction issues may need longer stays;
- Enforcing a maximum stay may result in more people becoming vulnerable; and
- A potential lack of settled accommodation may make this difficult.

5.61 The SHAPE group made a particular recommendation in relation to this area including no bed space reduction, flexibility in length of stay and not capping the length of stay to three months.

### **Response**

5.62 The Commissioning Plan already recognises the need for some longer term accommodation where more intensive support is required. This would include people recovering from or dealing with addictions.

- 5.63 In response to the comments the Plan will be amended to make clear that an average three month stay will be an aim to be worked towards across all services, rather than an absolute maximum for every service. It will also set out a review process so that when people reach three months in temporary accommodation, progress to achieving outcomes can be reviewed and any service gaps can be identified. This is similar to the process used for visiting support. It also recognises that some people may need longer in temporary accommodation. The Council will require providers to be equally committed to moving people to more appropriate, settled and stable accommodation quickly and effectively.
- 5.64 The City Housing Strategy will also take into account the consultation in this area. It will examine how the level of affordable housing can be increased in the City.

**Changing focus from medium stay accommodation to more visiting support (Survey Question 13, focus group question 3b)**

- 5.65 The aim of housing support is to ensure people can settle independently in their own home. In order to help people to achieve this more quickly the draft Commissioning Plan proposed moving some resources from medium stay accommodation to allow an increase in the amount of visiting support.
- 5.66 An almost equal amount of survey respondents agreed and disagreed with the proposition that resources should be shifted from providing medium stay supported accommodation to supporting people in their own home. A significant majority of the focus groups supported this proposal (across providers, staff and service users). This is shown in table 14.

**Table 14: Changing focus**

	<b>Strongly agree/agree</b>	<b>Disagree/ strongly disagree</b>
<b>Survey</b>	<b>(56) 50%</b>	<b>(55) 50%</b>
<b>Other submissions</b>	<b>(0) 0%</b>	<b>(35) 100%</b>
<b>Survey + other submissions</b>	<b>(56) 38%</b>	<b>(90) 62%</b>
<b>Focus group</b>	<b>(57) 70%</b>	<b>(24) 30%</b>

- 5.67 Those comments that disagreed focussed on the belief that people who are subject to chaotic episodes will move in and out of accommodation, that some people will need supported accommodation for longer periods and that a certain amount of supported accommodation is required for those who find it difficult to maintain settled accommodation. Those who supported this question stressed that supporting people in their own home is preferred and helps prevent repeated homelessness.

## Response

- 5.68 Medium stay supported accommodation will be provided for some people who need longer to be ready for their own accommodation. In addition, the revised Plan identifies the need to consider a small amount of additional accommodation for those with the most chaotic lifestyles who are hard to engage and/or regularly sleep rough.
- 5.69 Increased visiting housing support delivery will help people to settle in their own home and ensure that we meet the forecasted additional demand for support.

### Providing focussed visiting support to increase capacity (question 4b)

- 5.70 Housing support is designed to give people the skills to live independently in the community. The draft Plan set out proposals to do this as quickly as possible, in line with the aim of minimising the time spent in crisis. Those responding to the consultation on the draft Plan indicated that six months support was long enough for the majority of people.
- 5.71 Those attending focus groups were asked whether six months was sufficient time to meet the support needs of most people. The focus groups had a slight majority against the proposal as shown in table 15. The majority of staff (82%) and providers (64%) at focus groups agreed with this proposal. However, the majority of service users opposed the idea. Most of these service users were from two organisations which deal with more complex cases. This suggests that people receiving specialist support are more likely to oppose this particular proposal and need longer support.

**Table 15: Focussed visiting support**

	<b>Strongly agree/agree</b>	<b>Disagree/ strongly disagree</b>
<b>Focus group</b>	<b>(72) 47%</b>	<b>(80) 53%</b>

## Response

- 5.72 The proposal in the plan would mean that most people would be able to get regular housing support for a period of up to six months. The most vulnerable people will be enabled to access housing support beyond six months where there is clear evidence of the need for a longer time to build skills. Case management will be used to ensure that this is being done as quickly and effectively as possible. Where people do require long term support to address other issues we will expect providers to work to manage transition to these services.

### Use of volunteers to meet social and emotional support needs (question 4c)

- 5.73 Many organisations already make significant use of volunteers and befrienders. The draft Plan highlighted that this could be a useful way of moving on from

formal support and that it could provide social and emotional support for many people.

- 5.74 The majority of service users, providers and staff agreed that volunteers could support the social and emotional support needs of service users as shown in table 16. The majority of those who disagreed came from services which deal with more complex cases, where more difficulties with this approach might be expected.

**Table 16: Social and emotional support needs**

	<b>Strongly agree/agree</b>	<b>Disagree/ strongly disagree</b>
<b>Focus group</b>	<b>(97) 68%</b>	<b>(46) 32%</b>

- 5.75 Many of the comments suggest that volunteers have a valuable contribution to make. Some service users held the view that volunteers are not suitable for supporting people with multiple needs.
- 5.76 Shakti support women from black and minority ethnic (BME) communities fleeing domestic abuse. The staff and service users of Shakti felt that as the BME community in Edinburgh is small and close knit it is likely that any volunteer would be known to the service user. They also expressed the view that there was an increased risk that volunteers could be pressurised into revealing the whereabouts of women who had fled the domestic home.
- 5.77 Some of the focus groups supported the idea with the caveat that volunteers were monitored, have appropriate checks and receive ongoing support and training.

**Response**

- 5.78 The Commissioning Plan acknowledges that many organisations already use volunteers and befrienders very effectively. It will be updated to emphasise that volunteers will have to undergo appropriate checks and receive ongoing support. As part of the implementation process consideration will be given to requiring appropriate accreditations for organisations using volunteers.
- 5.79 The revised Commissioning Plan will be amended to recognise that such support is not suitable for all circumstances, in particular for those with multiple needs and those from BME communities fleeing domestic violence.

**Greater access to private rented accommodation (question 11, focus group question 9a)**

- 5.80 The survey and focus groups were asked about the use of the private sector. This reflects the shortage of social rented housing in the city. Around 5,000 households become homeless each year. There are around 3,500 lets available in the social rented sector annually and about 60% of these are made

to homeless people. However, there are an estimated 26,000 lets in the private rented market each year and better use needs to be made of this sector to meet people's housing needs.

- 5.81 A majority of survey respondents agreed with the view that there should be an emphasis on increasing access to the private rented sector and a majority of service users in the focus groups stated that they would consider renting in the private rented sector. This is shown in table 17.

**Table 17: Access to the private rented sector**

	<b>Strongly agree/agree</b>	<b>Disagree/ strongly disagree</b>
<b>Survey</b>	<b>(67) 57%</b>	<b>(51) 43%</b>
<b>Other submissions</b>	<b>(0) 0%</b>	<b>(38) 100%</b>
<b>Survey + other submissions</b>	<b>(67) 43%</b>	<b>(89) 57%</b>
<b>Focus group</b>	<b>(86) 54%</b>	<b>(74) 46%</b>

- 5.82 Comments focused on the need for more social housing and the risk of a benefits trap with higher rental charges in the private rented sector. Respondents also suggested that in an increasingly popular market landlords might be unlikely to choose people who have been homeless.

### **Response**

- 5.83 The private rented sector can offer greater choice and flexibility, with housing options available in a wider range of types and locations of property. It also often allows a quicker move on to settled accommodation. However, the welfare reform changes set out in the context to this document highlight some challenges which will need to be addressed as there are likely to be fewer affordable private lets for people receiving welfare benefits.
- 5.84 The Commissioning Plan will be amended to recognise the need to change the balance of service to ensure more visiting support is given to those living in the private sector. The Council and its partners are building significant numbers of new affordable homes in the city. However, this will not deliver the number of new homes that would be required if housing needs were being met from social housing providers alone.

### **Flat sharing (question 9b)**

- 5.85 The Welfare Reform Bill will make changes to Local Housing Allowance (housing benefit for private rented tenants). Many single people under the age of 35 will only be eligible for housing benefit for a room in a shared flat, and not



a whole flat or house. This means that many more single people will have to look for a room, rather than a flat to meet their housing needs.

- 5.86 Those attending focus groups were asked whether they thought flat sharing should be explored as an option for homelessness people. Most people disagreed as shown in table 18.

**Table 18: Flat sharing**

	<b>Strongly agree/agree</b>	<b>Disagree/ strongly disagree</b>
<b>Focus group</b>	<b>(19) 14%</b>	<b>(121) 86%</b>

- 5.87 The main issues identified by those who disagreed were that flat sharing can be challenging in terms of relationships particularly for those who may have chaotic lifestyles and or for those who have challenging behaviour. Bill payments and other responsibilities can be difficult to deal with for those with high support needs. Many respondents said that sharing a private flat would not be suitable for people with high support needs. They also said there would be difficulties if some people did not pay their share of bills, when someone moved out and when there are personality conflicts. Respondents recognised that changes to benefits would make sharing a requirement for many people. It was suggested that there would need to be support to deal with all of these issues.

**Response**

- 5.88 If the welfare reform proposals are enacted many single people under the age of 35 will have no choice but to rent a room in a shared flat if they are on welfare benefits, although exceptions are now proposed for some people who have been in homeless hostels.
- 5.89 Sharing accommodation can often be difficult. There are additional issues to be addressed such as shared bills and relationships with flatmates. This is likely to mean that some people need support to settle in to such accommodation. There is also a need to work with landlords to increase willingness to house those who have come through homelessness and have support needs. Work will be done to improve access to existing capacity as well as consider the potential for incentives and support to landlords. These issues will be addressed in the revised Commissioning Plan.
- 5.90 There is a need to provide training to support workers and other staff to enable them to give the correct advice and support on flat sharing and private renting to people during their time in temporary accommodation. Similar training will also be required to help people settle, develop good relations with landlords and be clearer about their options. Increased housing management processes may also be required. This will also be included in the revised Commissioning Plan.

### Joint working between homelessness and other specialist services (question 7a)

- 5.91 The draft Plan outlines the need for closer links with strategic commissioning partners to develop a co-ordinated approach to commissioning. This means moving over time to services that focus on the prevention of homelessness and not specialist services with different outcomes and priorities such as recovery from addiction services, where the strategic responsibility for doing so lies elsewhere. We will work to improve the linkages between services both strategically and for the individual through this partnership approach.
- 5.92 Focus groups were asked whether mental health and addiction services should contribute to the outcome of preventing homelessness. Views were mixed on these proposals and are outlined in table 19. Staff and providers were generally opposed to this proposal whereas service users were very much in favour of the proposal.

**Table 19: Joint working between homelessness and specialist providers**

	<b>Strongly agree/agree</b>	<b>Disagree/ strongly disagree</b>
<b>Focus group</b>	<b>(43) 57%</b>	<b>(33) 43%</b>

- 5.93 Some of the comments suggested that it would be difficult to separate different support needs and that one service should address all of the service user's needs. In contrast other comments suggested that addictions and mental health services should focus on the specific support issue and that housing support should be addressed separately. Where this was the case many people said that it was important for services to work together, share information and understand what support the other service provides.

### Response

- 5.94 Working with other strategic commissioning partners we will develop a co-ordinated approach to commissioning. This means that over time we will move to only fund housing support work and not specialist services such as addictions where the strategic responsibility for doing so lies elsewhere. We will work to improve the linkages between services both strategically and for the individual through this partnership approach.
- 5.95 This will be done through the development of a joint commissioning group for the prevention of homelessness. This will include representation from adult social care services such as mental health and addictions, children and families services, employability services and from the personalisation working group. This group will work to ensure that the delivery of commissioning plans are harmonised and that the contribution of a range of services to prevent homelessness is maximised. This group will also develop a clear process for assessing the future funding needs of services which may cut across these different commissioning plans and strategies.

**Outreach, practical help and advice and information services supporting older people (Focus Group Question 8)**

- 5.96 Focus groups were asked if the Council should concentrate on supporting older people who actually need support rather than providing general support funding to everyone in sheltered housing. Separate, ongoing consultation has been undertaken with sheltered housing providers to help develop the draft Older Person’s Housing and Support Strategy. This has demonstrated general support for the need to develop community links and provide more support to those in mainstream accommodation as well as those in sheltered units including proposals from RSLs to use sheltered housing as ‘hubs’ for service in their neighbourhoods.
- 5.97 The majority of service users and Council staff disagreed with the focus group proposal. This is shown in table 20.

**Table 20: Services to older people**

	<b>Strongly agree/agree</b>	<b>Disagree/ strongly disagree</b>
<b>Focus group</b>	<b>(7) 39%</b>	<b>(11) 61%</b>

- 5.98 Work on the older people’s housing strategy has shown broad support from sheltered housing providers for the need to develop community links and provide more support to those in mainstream accommodation as well as those in sheltered units. However, they had a number of concerns with the proposal in the draft plan. Providers felt that any change to the way services are funded would require a programmed approach with time to consult and advise tenants. They, and the sheltered housing residents who were consulted, felt that the service provided by effective sheltered housing managers to all residents was important. This service included providing low-level preventative support, contact and access to social activities. They also emphasised the importance of housing and social care services working better together, particularly in relation to changing funding mechanisms.

**Response**

- 5.99 The key priority is to find ways of providing advice and support to the great majority of older people who live in mainstream housing. Consultation with stakeholders on the city’s housing strategy for older people is ongoing. However, any changes to funding for sheltered housing would need to be phased in over time. This would take account of the need for proper communication with service users and planning by providers. An advisory group of stakeholders has already been established and is involved in work to consider the best use of resources to support the increasing number of older people in the city.

## **6 Financial Implications**

- 6.1 The Commissioning Plan will guide spending of an annual budget of £25.1 million (£17 million currently spent on commissioned services and £8.1 million contributed by the General Fund to Council services).

## **7 Equalities Impact**

- 7.1 An Equalities Impact Assessment was carried out to inform the draft Commissioning Plan. This is available on the Council web site at:  
[http://www.edinburgh.gov.uk/downloads/file/4851/equality\\_impact\\_assessment-draft\\_commissioning\\_plan-help\\_prevent\\_homelessness](http://www.edinburgh.gov.uk/downloads/file/4851/equality_impact_assessment-draft_commissioning_plan-help_prevent_homelessness).
- 7.2 This assessment will be revised in the light of comments received during the consultation.

## **8 Environmental Impact**

- 8.1 There are no adverse environmental impacts arising from this report. There will be further assessment and evaluation as specific commissioning and procurement exercises are planned.

## **9 Conclusions**

- 9.1 There was significant support for most of the central proposals in the draft Commissioning Plan. These included the vision, aims and outcomes. There was particular support for the need to prevent people from becoming homeless and preventing people from being homeless for any longer than necessary. There was also support for increasing the extent of support to people in their own home and increasing the use of volunteers and befrienders.
- 9.2 This report also highlights areas where there was disagreement with the principles proposed or practical issues with implementation. It outlines the proposed changes to be made to the final Commissioning Plan to take these comments into account.
- 9.3 The Plan will continue to focus on the aims which received agreement from most respondents. These are:
- Meet the strategic outcomes set out in the City Housing Strategy within the resources available;
  - Provide good quality services, that are value for money, to help more people achieve these outcomes; and
  - Make access to these services as simple and effective as possible for the people who need them.

## 10 Recommendations

10.1 That Health, Social Care and Housing Committee agree:

- a) This consultation report and the proposed changes to the draft Commissioning Plan for Advice, Support and Accommodation Services to Prevent Homelessness; and
- b) The submission of a final Commissioning Plan for Advice, Support and Accommodation Services to Prevent Homelessness to Policy and Strategy Committee on 6 September.

**Mark Turley**  
Director of Services for Communities

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Appendices	1 Commissioning Plan Consultation Process
	2 Consultation to inform Draft Commissioning Plan for Advice, Support and Accommodation to Prevent Homelessness 2011-2016
	3 Checkpoint Group Remit
	4 Summary of the Results of the Formal Consultation
Contact/tel/Email	Mairi Keddie, Planning, Partnerships and Commissioning Manager, 0131 529 7087 <a href="mailto:mairi.keddie@edinburgh.gov.uk">mairi.keddie@edinburgh.gov.uk</a>
Wards affected	All
Single Outcome Agreement	(1) We live in a Scotland that is the most attractive place for doing business in Europe. (6) We live longer, healthier lives. (7) We have tackled the significant inequalities in Scottish Society. (8) We have improved the life chances for children, young people and families at risk. (10) We live in well-designed, sustainable places where we are able to access the amenities that we need. (11) We have strong, resilient and supportive communities where people take responsibility for their own actions and how they affect others. (15) Our public services are high quality, continually improving, efficient and responsive to local people's needs.

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Background  
Papers

Report to Health, Social Care and Housing Committee, 24 May: Draft Commissioning Plan for Advice, Support and Accommodation Services to Prevent Homelessness 2011-2016

Draft Edinburgh Commissioning Strategy for Care and Support 2011-2016 (Policy & Strategy Committee 2 November 2010)

Meeting the Challenges of Edinburgh's City Housing Strategy: A Consultation Paper (Health, Social Care & Housing Committee 1 March 2011)

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## **APPENDIX 1**

### **Checkpoint Group Remit**

#### **Commissioning Plan for advice, support and accommodation services for prevent homelessness**

The purpose of the checkpoint group is to ensure the Council carries out effective consultation with key stakeholders on the commissioning plan for advice, support and accommodation services for people at risk of homelessness.

The group will

- advise on stakeholder engagement and communications strategy that includes consultation on the draft commissioning plan and will monitor the effectiveness of the consultation;
- comment on the Equalities Impact Assessment; and
- comment on the plan's alignment with other commissioning plans and strategies.

The group will feedback views from a range of stakeholders on the consultation process.

This will be done by:

- Meetings of the group at key stages in the project, built into the project plan
- Provision of updates and reports to the group
- Seeking the views of representatives (where appropriate, wider audiences will be informed and views sought e.g. for hard to reach groups).

#### **Formation of the Group**

The Project Board will agree the membership of the Group, including representation from service providers, the voluntary and private sectors and advocacy groups.

Council officers will support the Group and participate on an *ex officio* basis.

#### **Checkpoint Group Membership**

Sam Armstrong, Who Cares Scotland

John Blackwood, Scottish Association of Landlords

Irene Garden, A City for All Ages

Iain Gordon, Strategic Homelessness Action Partnership Edinburgh

Sandy Peacock, Scottish Care

Ella Simpson, Edinburgh Voluntary Organisations Council

Craig Sanderson, Edinburgh Affordable Housing Partnership

Ex officio

Nick Smith, Edinburgh Alcohol and Drugs Partnership

Chris Whelan, Health and Social Care

Michael Thain, Services for Communities

Mairi Keddie, Services for Communities

Bernie Giles, Services for Communities



## **APPENDIX 2**

### **Commissioning Plan Consultation Process**

#### **1. Background**

1.1 The consultation took place between 25 May and 6 July 2011.

#### **The Consultation Process**

2.1 Consultation was open to any member of the public who wished to contribute. The Plan was available to view online and paper copies could be obtained from the Council. Responses were invited in a number of ways:

- Completion of the paper copy of the document available as a full or 'easy read' version;
- Online version of both the full and 'easy read' documents;
- By email, telephone or letter;
- Through a series of organised events, meetings and focus groups; and
- Through a third party such as an unpaid carer, family member, support worker or care provider.

2.2 A communications plan was developed to ensure that the draft plan was circulated as widely as possible. This included:

- Emails to named contacts of all current providers and interest groups;
- Emails to all known ECCO users;
- Publishing the information on the City of Edinburgh Council website including links in relevant areas;
- Inclusion of information about the consultation in email signatures of the Council's Commissioning Team staff;
- Distribution of the draft Commissioning Plan to libraries;
- Publicising the plan through representative bodies including EVOG
- Briefing sessions for providers; and
- Focus groups with service users.

2.3 During the consultation period 265 individuals were spoken to in focus groups, interviews or in briefings and 212 individuals and organisations submitted responses via the survey. The detail of this is summarised as:

- 3 seminars for providers - 46 people attended
- 16 focus groups with current and ex-users - 134 service users attended
- 5 services also offered to speak to their service users on behalf of the Council to supplement the focus groups;

- 5 focus group sessions were organised with internal housing support staff and neighbourhood social workers - 39 people attended;
- 3 briefing sessions were held with SHAPE, HPG and EADP – 46 participants; and
- 212 survey responses were received.

2.4 In addition, 38 written responses were received in a single batch to Waverley Court on the last day of consultation.

### **3 List of Organisations taking part in Consultation**

#### **Service users – current and past**

Focus Groups held:

- Gowrie Visiting
- Gowrie services (alcohol)
- LEAP (drugs)
- Cyrenians HPS
- Shakti
- Streetwork - 2 events
- Cranston Street
- Dunedin Harbour
- CEC North, South and Central Neighbourhoods
- Port of Leith HA
- Dunedin Canmore HA
- Dean and Cauvin
- LetFirst

#### **Provider seminars**

- Accommodation: 13 providers
- Advice and Support: 15 providers
- Sheltered Housing: 18 Providers

#### **Council staff seminars**

- Events for CEC housing support staff: 18 participants
- Event for CEC housing support staff, Neighbourhood social workers and health visitors: 18 participants

- 1 event for CEC social workers: 3 participants
- Provider front line staff were surveyed as part of the pre-draft consultation

### **Briefings**

- Strategic Homelessness Action Partnership Edinburgh (SHAPE): 15 participants
- Homelessness Planning Group (HPG): 14 Participants
- Edinburgh Alcohol and Drugs Partnership (EADP): 17 participants

### **Responses to the Survey**

The 212 responses can be broken down as follows;

- 158 individuals
- 54 on behalf of an organisation. This included service providers (commissioned and otherwise), churches and Networks representing service users and agencies

## APPENDIX 3

### Consultation to inform Draft Commissioning Plan for Advice, Support and Accommodation to Prevent Homelessness 2011-2016

#### 1. Background

1.1 The consultation took place during March and April 2011.

#### 2 The Consultation Process

2.1 In total, 296 people took part in the consultation through a variety of methods as outlined below:

- Five focus groups were held with Council and external accommodation service users;
- Seven sessions were held for service users within a range of both Council run and externally provided housing support services, including those for older people;
- Three focus groups were held for older people living in Council and Registered Social Landlord (RSL) sheltered housing;
- Two provider seminars were hosted for all current accommodation and housing support providers; and
- A frontline housing support workers online survey.

2.2 A range of service users and staff from providers currently commissioned to provide housing support were consulted. The services were selected to ensure that views from a range of advice, support and accommodation providers were gathered.

2.3 During the consultation period 110 service users were listened to in focus groups; 42 providers were listened to in provider seminars and 144 front line visiting housing support workers submitted their views via the survey. The detail of this is summarised as:

- Five events were held for service users in temporary accommodation including two hostels, one women's only hostel, one young person's hostel and one supported accommodation hostel – 45 service users attended.
- Seven events for service users through internal and external service providers. These included services for young people, older people, people with mental health issues and homeless people. – 31 service users attended.
- Three focus groups with sheltered housing residents in RSL and CEC sheltered housing accommodation across the city - 34 residents took part
- Two provider seminars were hosted for all current accommodation and visiting housing support providers – 42 people attended

- An online survey was developed for frontline housing support workers (within both the Council and commissioned services) who deliver visiting housing support -144 responses received.

### **3 List of Organisations taking part in Consultation**

#### **Service users – accommodation**

- Bethany House (Hostel)
- Keymoves Cranston Street (Women’s Hostel)
- Salvation Army Pleasance (Hostel)
- Rock Trust Bedrock (Young people’s supported accommodation)
- Gowrie St John’s Hill (Supported accommodation)

#### **Service users – visiting support**

- HSIS south east team
- HSIS north west team
- Streetwork tenancy support
- Streetwork women’s service
- CHAI (older people)
- Link Living Young persons service
- Link Living Mental Health service

#### **Service users – sheltered housing**

- City of Edinburgh Council
- Bield Housing Association
- Castlerock Edinvar Housing Association

#### **Provider seminars**

- Accommodation: 19 providers
- Advice and Support: 23 providers

#### **Visiting Housing Support Staff – Online Survey**

Respondents were anonymous. The organisations invited to take part included:

- Barnardos - Visiting support
- Barony
- Bethany Christian Trust

- Carr Gomm
- CHAI
- City of Edinburgh Council
- City Youth Cafe
- Crossreach
- Cyrenians - Homelessness Prevention Service
- Dean & Cauvin Trust
- Edinburgh Housing Advice Partnership
- Four Square
- Gateway Visiting Support
- Health in Mind
- Home Scotland
- Link Living – Young Persons Service
- Link Living - Mental Health Service
- Orchard and Shipman - LetFirst
- Penumbra - Visiting Support
- Places for People
- Prestonfield Neighbourhood Project
- Queensferry Churches
- Rock Trust – Mainstay
- Salvation Army
- SAMH
- Streetwork
- Turning Point - Midpoint

## **APPENDIX 4**

### **Summary of the Results of the Formal Consultation**

**Table 1 – Survey Responses**

**Table 2 – Other Submissions**

**Table 3 – Focus Groups**

Table 1 - Survey Responses

	Strongly Agree / Agree		Strongly Disagree / Disagree	
	No.	%	No.	%
<b>Question 1</b> - Do you agree with the vision for the commissioning plan for advice, support and accommodation services to prevent homelessness? Do you have any comments on the vision statement that you feel would strengthen it?	114	69%	52	31%
<b>Question 2</b> - Do you agree with the aims of the commissioning plan for advice, support and accommodation services to prevent homelessness? Do you have any comments on the aims that you feel would strengthen them?	110	82%	24	18%
<b>Question 3</b> - Do you agree that there should be a stronger emphasis on the effectiveness of services in delivering positive outcomes for people rather than on the management and design of those services? Do you have any comments on how the Council should assess the services it commissions?	91	65%	50	35%
<b>Question 4</b> - Do you agree that the primary outcome of services commissioned by the Council should be to prevent people becoming homeless wherever possible, and to prevent people being homeless any longer than is necessary? Do you have any comments on how this outcome can be achieved or other outcomes that you feel the commissioning plan should set?	111	77%	34	23%
<b>Question 5</b> - Do you agree that people should be supported to move from temporary forms of accommodation into settled accommodation as quickly as possible and that they can access the support they need without having to live in specialist accommodation? Do you have any comments on how people can be supported to make the move to settled accommodation as quickly as possible?	83	58%	59	42%
<b>Question 6</b> - Do you agree that more emphasis should be placed on providing accommodation to look after young people, people recovering from mental ill health and women fleeing violence to help the transition to settled accommodation? - Do you have any comments on what temporary and transitional accommodation should be prioritised and for whom?	69	58%	49	42%
<b>Question 7</b> - Do you agree that better use should be made of the existing range of temporary and medium term accommodation and that services need to move people on more quickly? Do you have any comments on what support people will need to help them move from temporary and medium term accommodation to settled accommodation more quickly in the future?	73	61%	47	39%
<b>Question 8</b> - Do you agree that demand for support is likely to grow in response to increased statutory requirements, increasing population and an increased focus on prevention? Do you have any comments on what support people will need and how it should be delivered?	133	99%	2	1%
<b>Question 9</b> - Do you agree that during the timescale of this plan the Council's in house services should focus on supporting people with a range of needs and chaotic behaviour and externally commissioned services should focus on more straightforward cases? Do you have any comments on how this could be implemented or alternatives to this proposal?	33	27%	88	73%
<b>Question 10</b> - Do you agree that during the timescale of this plan support services should be measured against the outcomes they achieve rather than the hours they provide? Do you have any comments on how this could be implemented or alternatives to this proposal?	65	57%	50	43%
<b>Question 11</b> - Do you agree that there should be an increased emphasis on increasing access to the private rented sector to help people increase the range of housing options they have and to minimise the time they are homeless? Do you have any comments on how this could be implemented or alternatives to this proposal?	67	57%	51	43%
<b>Question 12</b> - Do you agree that during the lifetime of this plan the Council should aim to minimise the length of time people stay in temporary and medium term accommodation and work towards achieving a maximum stay of three months? Do you have any comments on how this could be implemented or alternatives to this proposal?	62	51%	59	49%
<b>Question 13</b> - Do you agree that during the lifetime of this plan resources should be shifted from providing medium stay supported accommodation to supporting people in their own homes? Do you have any comments on how this could be implemented or alternatives to this proposal?	56	50%	55	50%



Table 2 - Other Submissions

	Strongly Agree / Agree		Strongly Disagree / Disagree	
	No.	%	No.	%
<b>Question 1</b> - Do you agree with the vision for the commissioning plan for advice, support and accommodation services to prevent homelessness? Do you have any comments on the vision statement that you feel would strengthen it?	0	0%	38	100%
<b>Question 2</b> - Do you agree with the aims of the commissioning plan for advice, support and accommodation services to prevent homelessness? Do you have any comments on the aims that you feel would strengthen them?	0	0%	3	100%
<b>Question 3</b> - Do you agree that there should be a stronger emphasis on the effectiveness of services in delivering positive outcomes for people rather than on the management and design of those services? Do you have any comments on how the Council should assess the services it commissions?	0	0%	38	100%
<b>Question 4</b> - Do you agree that the primary outcome of services commissioned by the Council should be to prevent people becoming homeless wherever possible, and to prevent people being homeless any longer than is necessary? Do you have any comments on how this outcome can be achieved or other outcomes that you feel the commissioning plan should set?	0	0%	37	100%
<b>Question 5</b> - Do you agree that people should be supported to move from temporary forms of accommodation into settled accommodation as quickly as possible and that they can access the support they need without having to live in specialist accommodation? Do you have any comments on how people can be supported to make the move to settled accommodation as quickly as possible?	2	5%	36	95%
<b>Question 6</b> - Do you agree that more emphasis should be placed on providing accommodation to look after young people, people recovering from mental ill health and women fleeing violence to help the transition to settled accommodation? - Do you have any comments on what temporary and transitional accommodation should be prioritised and for whom?	0	0%	37	100%
<b>Question 7</b> - Do you agree that better use should be made of the existing range of temporary and medium term accommodation and that services need to move people on more quickly? Do you have any comments on what support people will need to help them move from temporary and medium term accommodation to settled accommodation more quickly in the future?	0	0%	38	100%
<b>Question 8</b> - Do you agree that demand for support is likely to grow in response to increased statutory requirements, increasing population and an increased focus on prevention? Do you have any comments on what support people will need and how it should be delivered?	31	97%	1	3%
<b>Question 9</b> - Do you agree that during the timescale of this plan the Council's in house services should focus on supporting people with a range of needs and chaotic behaviour and externally commissioned services should focus on more straightforward cases? Do you have any comments on how this could be implemented or alternatives to this proposal?	0	0%	38	100%
<b>Question 10</b> - Do you agree that during the timescale of this plan support services should be measured against the outcomes they achieve rather than the hours they provide? Do you have any comments on how this could be implemented or alternatives to this proposal?	0	0%	38	100%
<b>Question 11</b> - Do you agree that there should be an increased emphasis on increasing access to the private rented sector to help people increase the range of housing options they have and to minimise the time they are homeless? Do you have any comments on how this could be implemented or alternatives to this proposal?	0	0%	38	100%
<b>Question 12</b> - Do you agree that during the lifetime of this plan the Council should aim to minimise the length of time people stay in temporary and medium term accommodation and work towards achieving a maximum stay of three months? Do you have any comments on how this could be implemented or alternatives to this proposal?	0	0%	38	100%
<b>Question 13</b> - Do you agree that during the lifetime of this plan resources should be shifted from providing medium stay supported accommodation to supporting people in their own homes? Do you have any comments on how this could be implemented or alternatives to this proposal?	0	0%	35	100%

Table 3 - Focus Groups

	All Responses				Providers				Staff				Service Users			
	Agree		Disagree		Agree		Disagree		Agree		Disagree		Agree		Disagree	
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
Q1a - Should people have to approach the Council to get a hostel or temp bed	41	47%	47	53%	0	0%	14	100%	12	100%	0	0%	29	47%	33	53%
Q2a - Do you agree that people should only stay in a hostel for up to three months?	34	40%	52	60%	7	54%	6	46%	11	79%	3	21%	16	27%	43	73%
Q3a - Should medium term supported accommodation only be for young people/care leavers, women fleeing violence, people recovering from mental illness, people recovering from an addiction?	43	45%	53	55%	13	100%	0	0%	10	67%	5	33%	20	29%	48	71%
Q3b - Do you agree that more people should be supported in their own home rather than in medium term supported accommodation?	57	70%	24	30%	11	92%	1	8%	13	93%	1	7%	33	60%	22	40%
Q4a - Should the main focus of housing support should be preventing homelessness?	102	76%	32	24%	14	70%	6	30%	29	94%	2	6%	59	71%	24	29%
Q4b - Do you agree that six months is enough time to meet the support need of most people?	72	47%	80	53%	14	64%	8	36%	23	82%	5	18%	35	34%	67	66%
Q4c - Should people get emotional and social support through volunteers, befriending and other social networks?	97	68%	46	32%	17	94%	1	6%	27	90%	3	10%	53	56%	42	44%
Q5 - Do you agree that the Council is best placed to organise and look after the support needs of people who are "chaotic" or have 'complex needs'?	54	51%	52	49%	0	0%	13	100%	17	68%	8	32%	37	54%	31	46%
Q7a - Should Mental Health/Addictions services also have a focus on homelessness prevention?	43	57%	33	43%	0	0%	7	100%	2	11%	17	89%	41	82%	9	18%
Q8 - It is proposed that the Council will concentrate on supporting older people who actually need support rather than providing general support funding to everyone in sheltered housing. Do you agree?	7	39%	11	61%	0	0%	11	100%	5	100%	0	0%	2	100%	0	0%
Q9a - Would you consider renting in the private rented sector?	86	54%	74	46%	7	54%	6	46%	22	79%	6	21%	57	48%	62	52%
Q9b - Sharing - Would you consider flat sharing in the private rented sector?	19	14%	121	86%	2	11%	17	89%	0	0%	14	100%	17	16%	90	84%

## Appendix 2

I wish to thank the Committee for agreeing to hear our deputation. The deputation consists of two people. My name is Des Loughney and I am secretary of the UNITE Edinburgh Voluntary Sector Branch. The other member of our deputation is Pat Stuart who is the chair of our branch, and sits on the national executive of UNITE and is a UNITE representative on the General Council of the TUC.

We are here to day because our members who work in homelessness services have drawn to the branch's attention some serious issues in regard to the provision of homelessness services. The branch has agreed to draw these to the attention of the City Council.

We wish to comment on the Report that is Item 18 and the Equalities Impact Assessment that is referred to in the Report. The following are our comments on the EIA.

We think that these Assessments are important and were disappointed that the Assessment ignores totally the impact of the Commissioning Plan on the staff who provide the services. It does not bother considering any evidence that the conditions of employees, particularly female employees, is being worsened by Council policies.

The Assessment makes bland statements that Council proposals (see page 16), on the gender front will still mean commissioning of accommodation for women fleeing violence. This is classified as a ' potential or actual positive impact'. There is no comment on the real world situation where the service is being cut. It remains a mystery to us that a diminishing service can unreservedly be placed in the positive box.

The Assessment ( p24 ) does provide the useful information that demand for homelessness services increased by 11% between 2009/2010 and 2010/2011. This suggests that the Services in the Report we are discussing needs extra resources, including experienced and trained staff, to meet demand.

We do not think that the Assessment is an example of what the Report calls for (page 3) 'a thorough consideration of equalities impacts'.

**Our branch has studied the Report which is item 18 and wishes to make the following comments.**

Our members and branch officials have received feed back from members that over the past year there have been attacks on terms and conditions, including rates of pay, access to training,

& supervision, sick leave entitlement, annual and public holiday remuneration. In addition hours of work have been cut – all with the full approval of Council officials.

We would also note that members have reported to us higher levels of stress related sickness, greatly diminished morale, lower standards in terms of quality and delivery due to the cut backs as outlined above.

We would also note that Choices Care, a private sector provider identified as a preferred provider using the same methods of procurement as part of the discredited Health and Social Care strategy, has now been declared bankrupt.

Our members are frontline workers, many of whom feel unable, as do their organizations, to speak out against the changes being proposed. We note the response of the SHAPE & Shelter Scotland has been to publicly raise significant concerns about the potential impact of these proposals on services, service quality, staffing and the wider sector.

The proposals in the report will lead to a loss of at least 30 jobs across the voluntary sector. It is unclear as to whether job losses have been factored into these proposals. We are unsure as to what assessment city of Edinburgh Council has made in relation to potential job losses in the sector. There have already been redundancies arising from funding cuts. Sometimes the actual loss of experienced and qualified staff is disguised by the employment of lower paid, inexperienced and unqualified staff, in lower paid jobs, often on a relief or zero hour basis. Staff numbers seem the same but quality is lower.

The structure of the report on proposals appears to avoid TUPE liability, removing protection for workers affected by job losses outlined above with particular reference to specialized housing support workers working with clients of multiple and complex needs. In addition the proposal to use volunteers to offer emotional support to vulnerable adults could further diminish the skill set of experienced workers currently delivering services. Using volunteers as cheap, unskilled, undertrained labour for work with vulnerable adults that is currently provided by trained and experienced professionals is of concern. The Council officials who have drafted this report do not seem to be aware of the boundaries that exist between what experienced and trained staff can do and what volunteers can do.

In 13.15, the proposal seems to be that complex needs work can be done either by the Council, or by the voluntary sector.

There are around 20 jobs in the City Of Edinburgh Council that focus on complex needs housing support as a result of the TUPE transfer of Edinburgh Homelink Partnership staff in 2009. By creating this either or scenario for complex and multiple needs workers, the outcome of the proposals is to create competition between the voluntary and public sector members who currently deliver housing support to adults with complex and multiple needs.

Given the significant impact outlined above, and the significant concerns of trade union members it would seem appropriate that there is trade union representation on the checkpoint group that will monitor the proposed Joint Commissioning and Planning Group for the Prevention of Homelessness. We consider that a trade union representative would be an important external stakeholder.

### **Resources Implications**

It mentions, within the Report, that proposed Services will be constrained by resources available. It is not clear what these constraints will actually mean to the final Commissioning Plan. What is mentioned are losses of £ 1.2 million in Housing Benefit and the overall Council budget reduction of 12% over the next three years.

As a trade union we are well aware that resources constraints will have an obvious effect on staffing levels; staff terms and conditions; on staff training and professional development. Experienced staff are needed to deliver effective services. The big question for us is: Does the Council believe that experienced and qualified staff are necessary to deliver quality services? It seems not to coupled with misleading the public that because staff number seem not to change quality has been preserved.

UNITE Edinburgh Voluntary Sector Branch.

15th August 2011