

Homelessness in Northern Ireland







Homelessness in Northern Ireland



This report has been prepared under Article 8 of the Audit (Northern Ireland) Order 1987 for presentation to the Northern Ireland Assembly in accordance with Article 11 of the Order.

K J Donnelly Comptroller and Auditor General Northern Ireland Audit Office 21 November 2017

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	An integrated cro	An integrated cross-departmental strategy is needed				
	An Inter-Departme	An Inter-Departmental Homelessness Action Plan is under development				
	People who are care services	People who are homeless face barriers in accessing health and social care services				
	There is overlap	There is overlap between homelessness and other support needs				
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Abbreviations

B&B Bed and Breakfast

C&AG Comptroller and Auditor General

DFC Department for Communities

DIME Dispersed Intensively Managed Emergency (Accommodation)

DoH Department of Health

EU European Union

FDA Full Duty Applicant

GB Great Britain

GP General Practitioner

HMP Her Majesty's Prison

HSS Housing Solutions and Support

HSSG Homelessness Strategy Steering Group

KPI Key Performance Indicator

MARAC Multi-Agency Risk Assessment Conference

NAO National Audit Office

NIAO Northern Ireland Audit Office

NIHE Northern Ireland Housing Executive

PBNI Probation Board for Northern Ireland

SMART Specific, Measurable, Achievable, Relevant and Time Bound

UK United Kingdom

Key Facts: 2016-17

WHY ARE HOUSEHOLDS LOSING THEIR HOMES?















MAJORITY OF PRESENTERS

6,200

5,850

3,350

Single male



Single female



MAJORITY OF ACCEPTANCES

2,950

4,150

2,150

Key Facts: 2016-17

WHAT HAPPENS TO HOUSEHOLDS LOOKING FOR HELP?



2,800

placed in temporary accommodation

39 weeks

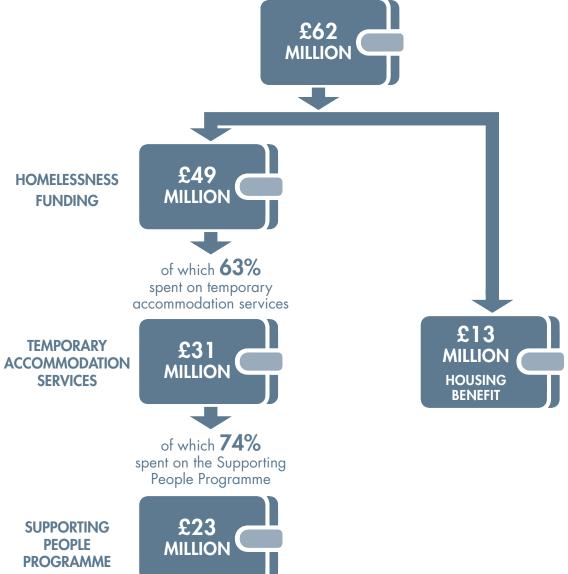
average length of stay across all temporary accommodation 80%

of available social homes allocated to statutory homeless households

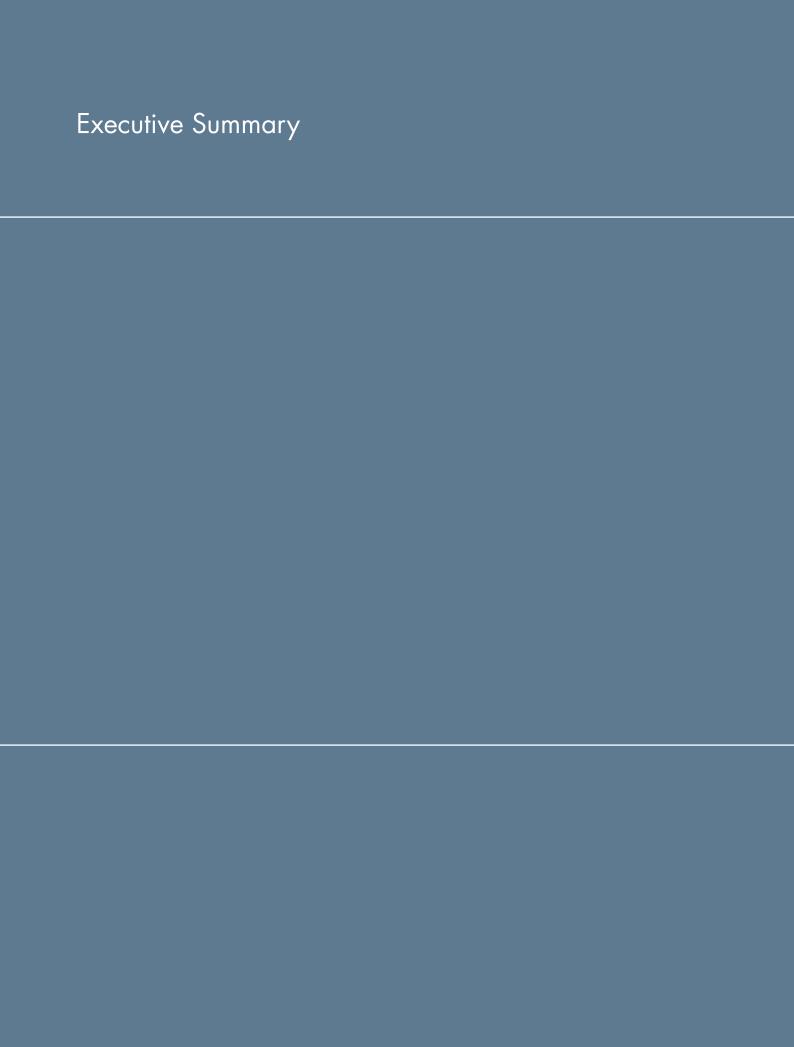


Allocated a social rented home

WHAT IS THE COST TO THE PUBLIC PURSE?









Executive Summary

- 1. Homelessness can affect anyone in society. Contrary to popular belief it is not restricted to people who sleep rough. Many households, recorded in official statistics as homeless, are living somewhere that it is not suitable for them. Other households, not included in the statistics or visible on the streets. are the hidden homeless who may be squatting or sharing with friends. Homelessness is also often linked to mental health problems, drug and alcohol dependencies, street lifestyles and institutional experiences including prison and the care system.
- 2. The Northern Ireland Housing Executive (NIHE) has statutory responsibility for dealing with homelessness but other government departments and public sector organisations also have a role to play. A household seeking help from NIHE can only be accepted as statutory homeless upon meeting certain criteria set out in legislation.
- 3. NIHE is required to publish a
 Homelessness Strategy every five years
 which sets out, among other things,
 how it intends to prevent homelessness,
 provide sufficient accommodation and
 advice and assistance. In April 2012
 the Strategy for 2012-17 was published
 with a vision to eliminate long term
 homelessness and rough sleeping across
 Northern Ireland by 2020.

Scope of this report

- 4. In Part One we consider the scale and nature of homelessness in Northern Ireland. In Part Two we examine how progress in delivering the Homelessness Strategy 2012-17 was monitored and reported. In Part Three we provide an overview of the measures aimed at preventing homelessness and the arrangements to deal with households accepted as statutory homeless. In Part Four we look at the nature and extent of joined-up working across Departments, other public sector bodies and the third sector¹ in Northern Ireland.
- 5. We adopted a variety of methods in our review of homelessness and these are explained in more detail at **Appendix 1**.

Key findings

Trends

6. Since 2005-06 around 20,000 households each year have presented² to NIHE as homeless with on average around 50 per cent accepted as statutory homeless. The statutory homeless acceptance rate per thousand households is relatively high in Northern Ireland compared to other UK jurisdictions. This is partly because the number of presenters has declined in other jurisdictions following the

Includes voluntary and community organisations (both registered charities and other organisations such as associations, self-help groups and community groups), social enterprises, mutuals and co-operatives. Third sector organisations generally are independent of government.

² Applicants (individuals or households) who have applied to NIHE for a homelessness assessment.

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implementation of the Housing Options³ preventative approach. NIHE told us that there are also differences in legislation and how it discharges its statutory homeless duty.

- 7. The number of households presenting to NIHE as homeless reduced by 12 per cent between 2012 and 2017 but those accepted as statutory homeless increased by 32 per cent during the same period. Accommodation not reasonable has consistently been the category with the highest number of statutory homeless acceptances (around 30 per cent of the total). This category has been increasing year on year since 2011.
- 8. Around 80 per cent of the social homes that become available in Northern Ireland are allocated to households that are statutory homeless as opposed to a range of 13 to 38 per cent in other UK jurisdictions. It has been custom and practice for NIHE to discharge its homeless duty through the social housing sector and not the private rented sector. In addition, in Northern Ireland social housing is allocated on the basis of points awarded for housing need and homeless households are awarded a high number of points in the social housing allocation system. This inevitably weights the allocation of social homes towards the statutory homeless.
- 9. In the five years to 2017 at least £226 million of public funding was provided for measures to prevent and deal with

homelessness. In addition, welfare costs of £65 million in the form of Housing Benefits were incurred. There are wider financial costs across public services that arise from homelessness. For example, costs associated with chaotic use of the health service and repeat interaction with the criminal justice system. There is no doubt that the social costs of homelessness are significant and would be far greater without this public expenditure.

Preventative approach

10. NIHE has been slow to adopt the Housing Options preventative approach which has resulted in decreased levels of homeless presentations and acceptances in England, Scotland and Wales over a number of years. This preventative approach was further embedded through amendments to homelessness legislation in Scotland and Wales. England is currently in the process of amending its homelessness legislation. NIHE intends to implement its own preventative model, the Housing Solutions and Support (HSS) approach across all its offices by March 2018. We note that the new Homelessness Strategy 2017-22 has a greater emphasis on homelessness prevention.

Strategic approach and collaboration

We have seen evidence of considerable joined-up working across the public

11.

Under this approach when someone approaches a local authority with a housing problem they are offered advice on their options and choices in the widest sense. This approach features early intervention and explores all possible tenure options, including social housing and the private rented sector.

and third sector however, more needs to be done to break down silos across government and ensure that addressing homelessness is a strategic priority for the Northern Ireland Executive as a whole. Homelessness prevention is now at the core of NIHE's approach and the effectiveness of the HSS model is heavily dependent on collaborative working and coordination of public and third sector services across Northern Ireland.

Performance measurement

- 12. It is difficult to assess how effective the range of activities, detailed in the Homelessness Strategy 2012-17, were in dealing with and reducing homelessness. The Strategy's objectives were not linked to clear high level expected outcomes nor were there any outcome based targets. Reporting against performance was intermittent and focused on measuring activity at an individual initiative level, rather than progress towards the outcomes of preventing and reducing homelessness. This may have affected NIHE's ability to use available evidence to identify interventions/initiatives that were working.
- 13. It is encouraging that the Homelessness Strategy 2017-22 has adopted an outcomes based approach and NIHE has given an undertaking to report annually to key stakeholders on performance and progress.

Temporary accommodation

14.

Temporary accommodation services account for over 60 per cent of the total annual spend on homelessness, (excluding Housing Benefit), however detailed costing information was not regularly reported to the NIHE Board. During 2016-17, there were 2,777 placements in temporary accommodation. The Department for Communities' (the Department) recent review of the Supporting People Programme identified variations in costs across services and locations. The Department and NIHE are implementing the recommendations arising from this review to help ensure better value for money across accommodation-based services.

Official statistics

Data sets and statistics on homelessness that are published by the Department are less comprehensive than those published in other jurisdictions. Expanding the number of published datasets and statistics will improve comparability and benchmarking of data with other jurisdictions. This will enhance both transparency and accountability.

Data collection and analysis

16. We found weaknesses in analysis, interpretation and presentation of the data that NIHE collects. For example:

Executive Summary

- NIHE was unable to provide evidence based explanations for the year on year increasing number of homeless acceptances and homelessness trends across its regions;
- NIHE, in developing its new Homelessness Strategy, has only recently conducted preliminary analysis of the largest and growing category of accommodation not reasonable; and
- there is a lack of data analysis and statistics assessing and demonstrating how successful early interventions have been in preventing homelessness.

A specific action to examine homeless trends and develop new measures has been included in NIHE's Homelessness Strategy 2017-22.

Rough sleeping

17. The increase in "street activity⁴" in Belfast City Centre has led to the perception that the level of rough sleeping in Northern Ireland has grown significantly in recent years. Rough sleeper counts have not been carried out on a regular basis across Northern Ireland. An exercise commissioned by NIHE in 2015 found that on average six people sleep rough in Belfast each night: an earlier 2008 exercise in Derry/Londonderry found an average of eight rough sleepers a night. Although circumstances can change rapidly, based on the latest available information, the scale of rough sleeping

does not appear to be as significant in Northern Ireland as it is elsewhere in the UK or in the Republic of Ireland.

Overall conclusions

- 18 Between 2012 and 2017 substantial financial resources of around £226 million, excluding Housing Benefit costs of £65 million, were committed to preventing and dealing with the complex issue of homelessness. A large number of activities and initiatives were funded to provide a wide range of services, however, over this period statutory homeless acceptances increased from 9,021 to 11,889 (32 per cent). We accept that the homeless numbers are dependent on many external influences and variables outside the control of the Department and NIHE. The homelessness trends reflected in official Departmental statistics indicate that the aim of reducing homelessness over the course of the Homelessness Strategy 2012-17 has had limited success.
- 19. The flawed design of the performance system supporting the Homelessness Strategy 2012-17, including the lack of evaluation of the outcomes resulting from each activity, make it difficult to assess which activities are the most cost effective in reducing homelessness. Linking cost information to activities and outcomes is important to decision making and the NIHE Board and the Department cannot demonstrate that value for money has been achieved without this financial information. The challenge for the Department and NIHE is to consider

where future investment in homelessness services can best deliver value for money for the taxpayer.

- 20. The supply of sufficient, affordable housing is a corner stone of any Homelessness Strategy but particularly in Northern Ireland as NIHE discharges its homeless duty almost exclusively through the social housing sector. Alternative options for the Department and NIHE include investing in new social homes, sustaining and making best use of existing stock, and being innovative in making other affordable housing solutions available.
- 21. Third sector service providers and NIHE told us that they are dealing with a growing number of vulnerable homeless households with increasing complex needs (not just housing needs) such as mental health and drug and alcohol issues. The strategic approach to dealing with homelessness in Northern Ireland must shift further towards a fully cross-departmental strategy, with those involved committing to common goals, solutions and expected outcomes.
- 22. Given the complexity and scale of the challenges ahead the Department, and NIHE must drive forward the pace of change. Services and initiatives must be monitored closely to ensure that resources are being targeted where they are needed most, and make a difference to some of the most vulnerable households in Northern Ireland.

Recommendations

R1: NIHE needs to be more innovative in its analysis, interpretation and presentation of the homelessness data it collects. We recommend that, to fully understand the causes of homelessness, NIHE:

- carries out research to determine why the level of statutory homeless acceptances in Northern Ireland are significantly higher than in other UK jurisdictions;
- analyses the reasons for variations in acceptances across its regions; and
- analyses the data relating to the accommodation not reasonable category.

R2: We recommend that NIHE establishes:

- clear objectives that capture key high level expected outcomes; and
- SMART key performance indicators to measure overall success.

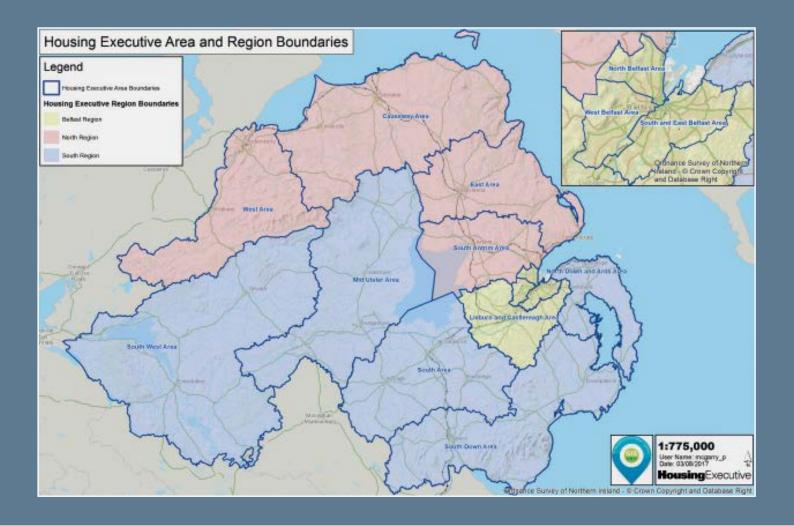
This should be part of their strategic planning process in all business areas.

R3: We recommend that NIHE systematically evaluates performance in dealing with homelessness against its strategic objectives and regularly reports progress to the Board and other key stakeholders.

Executive Summary

- **R4:** We recommend that the Department and NIHE develop a system that captures data on intervention outcomes of its partner agencies and feeds this into the new customer management information system to help target resources appropriately.
- **R5:** We recommend that the Department expands the number of data sets collected and statistical information published on homelessness in Northern Ireland.
- **R6:** We recommend that an annual report is submitted to the NIHE Board which presents a summary of expenditure and benchmarked cost data demonstrating that accommodation-based services provide value for money.
- **R7:** We recommend that the framework for addressing homelessness is developed in an integrated way with an emphasis on outcomes rather than existing departmental structures. This may lead to a widening of the scope of the Homelessness Strategy Steering Group.
- **R8:** We recommend that an in-depth cross-departmental review is jointly commissioned to identify and quantify health-related support needs for homelessness service providers and homeless households across Northern Ireland.
- **R9:** We recommend that NIHE, in partnership with other service providers, develops improved systems for regularly monitoring and measuring the extent of rough sleeping throughout Northern Ireland to determine if action currently being taken is adequate.

Scale and nature of homelessness in Northern Ireland



Scale and nature of homelessness in Northern Ireland

Homelessness is a complex societal problem

- 1.1 Homelessness can affect anyone in society (see Case Example 1). Being homeless is widely associated with sleeping rough on the streets but this view conceals the range and true extent of the problem. The majority of families, couples or single people recorded in official homelessness statistics are living with friends or relatives, are living in temporary accommodation such as Bed and Breakfasts, hostels, night shelters and refuges, private single lets⁵ or living in properties that are not suitable. This may mean living in temporary accommodation with reduced security of tenure that can be detrimental to health and wellbeing.
- 1.2 Research⁶ identifies four broad causes that increase the probability of becoming homeless (see **Figure 1**). In addition,

- specific events may lead directly to an episode of homelessness or increase the prospect of homelessness.
- One common risk factor for homelessness is unemployment. In 2014 a survey⁷ assessed how long a United Kingdom (UK) household's savings could sustain their current levels of spending if they had a sudden shock to their income. The average household in the UK was estimated to have 29 days. In Northern Ireland it was estimated to be 19 days. A comparison of UK household types showed that a typical household living in private rented accommodation could sustain their normal spending for two days while households in social rented housing were constantly on the breadline. This situation is concerning given that around 260,0008 (over 30 per cent) households in Northern Ireland live in the rented sector. The split between private and social rented sector is roughly even.

Case Example 1: The impact of street outreach services

Rick was once the owner of three successful businesses, but his life changed when the recession hit and within a few months he'd lost everything. Rick found himself sleeping rough on the streets of Belfast and was approached by the Welcome Organisation's street outreach volunteers who were able to offer practical advice and immediate assistance. Within days Rick had a hostel bed.

1.3

A local radio journalist picked up on his story and a local businessman, who was listening, decided to arrange an interview with a Belfast hotel. Rick got the job.

"If someone had told me years ago that at some stage in my fifties I would be homeless and penniless I would have laughed in their face. Life is very fragile; in a moment everything can change. If it happened to me, it could happen to anyone."

Source: The Welcome Organisation

⁵ Private sector landlords enter into an agreement with NIHE to make private sector rental properties available for temporary accommodation.

⁶ Homelessness and Homeless Policies in Europe: Lessons from Research, FEANTSA, December 2010.

⁷ Deadline to the Breadline Report, Legal and General, 2014.

⁸ Northern Ireland Housing Statistics 2015-16, Department for Communities, 14 December 2016.

Figure 1: Risk factors and triggers for homelessness

Cause	Factor of vulnerability	Trigger	
Charach and	Economic processes (poverty, unemployment) Housing market processes	Rent or mortgage arrears Eviction from rented or owned home Loss of tied accommodation Change of place for job search	
Structural	Social protection/Welfare	New arrival Change of status	
	Immigration, citizenship	Access to affordable housing and social protection blocked	
Institutional	Shortage of adequate mainstream services and lack of coordination between existing services to meet demand or care needs Allocation mechanisms	Support breakdown or no adequate support in case of emerging need	
	Institutional living (foster and child care), prison, long term hospital Institutional procedures (admission,	Discharge Loss of home after admission	
	discharge)	I i f i l	
Relationship	Family status Relationship situation (abusive partners or parents) ⁹	Leaving family home Domestic violence	
•	Relationship breakdown (death, divorce, separation)	Living alone	
		Illness episode	
Personal	Low educational attainment Addiction (alcohol, drugs, gambling)	Support breakdown or problems in getting adequate support	
		(Increased) substance misuse	

Source: European Observatory on Homelessness

The Department of Justice has advised that the terminology used in its Stopping Domestic and Sexual Violence and Abuse Strategy includes by a current or former intimate partner or family member.

Scale and nature of homelessness in Northern Ireland

1.7

NIHE has statutory responsibility to ensure accommodation is available for those who meet specific criteria

- 1.4 Housing and homelessness policy is a devolved matter across the UK. The Regional Strategic Housing Authority with statutory responsibility for responding to homelessness is the Northern Ireland Housing Executive (NIHE). The Department for Communities (the Department) is NIHE's sponsor department and works with it in the development of homelessness and housing policy for Northern Ireland.
- 1.5 Housing legislation in 2010 set out NIHE's responsibility to formulate and publish a homelessness strategy for revision within five years. In April 2012 NIHE launched its Homelessness Strategy 2012-17. A new strategy for 2017-22 was published in April 2017.
- 1.6 A household 10 must meet four tests to be accepted as statutory homeless: they are homeless; eligible 11; in priority need 12; and unintentionally homeless.

 A household meeting these tests will be accepted as a "Full Duty Applicant" (FDA) and NIHE has a duty to find suitable accommodation. These households are entitled to temporary accommodation while waiting to be re-housed (see paragraph 3.28). Households that fail to meet all four tests may still be homeless but not owed the full duty under the legislation. In these circumstances NIHE

has a duty to provide advice, free of charge.

- NIHE allocates social housing accommodation in line with the Housing Selection Scheme (or Common Waiting List). This Scheme sets out the social housing allocations policy in Northern Ireland and applies to accommodation owned by NIHE and participating registered housing associations. As it is a points based scheme the level of points awarded determine the applicant's position on the waiting list. Points are awarded under four categories with the highest number awarded to applicants facing intimidation (200 points) and the next highest to applicants with FDA status. NIHE told us that as homeless applicants receive 70 points more than those who are not homeless this will inevitably result in the majority of tenancies being allocated to homeless applicants. Indeed, around 80 per cent of available social homes each year are allocated to statutory homeless households (see paragraph 3.17).
- 1.8 The Housing Selection Scheme has been in operation with few changes since 2000. It is widely accepted that the present allocations system could be vulnerable to abuse and a review is long overdue. We welcome the proposals for a fundamental review of social housing allocations policy, prepared by the Department and debated in the Assembly in September 2016. The proposals are

¹⁰ A household may comprise one or more people, for example, families, couples, single males/females.

¹¹ To establish eligibility for homeless assistance NIHE first investigates if the applicant, or any member of the applicant's household, has been involved in any unacceptable behaviour. NIHE must also establish the applicant's eligibility for housing assistance under immigration/asylum regulations.

The following homeless presenters are considered to have priority need: persons with dependents; pregnant women or persons with whom a pregnant woman resides; persons who are vulnerable for specified or other special reasons; persons made homeless as a result of an emergency; persons subject to violence or at risk of violence and young persons at risk of sexual or financial exploitation.

currently out for public consultation which closes in December 2017.

Statutory responsibilities vary in other UK jurisdictions

- 1.9 In Northern Ireland and England, NIHE and local authorities have a duty to secure accommodation for homeless households (and those threatened with homelessness) who are unintentionally homeless and in priority need. In Scotland, local authorities have a duty to find permanent accommodation for all applicants who are unintentionally homeless or threatened with homelessness. In Wales, there is a statutory duty on local authorities to help secure accommodation for all applicants assessed as homeless for a period of 56 days.
- 1.10 Both Scotland and Wales have amended their legislation in the last five years and England is currently amending legislation in this area.

At least £226 million of public funding has been spent on homelessness between 2012 and 2017

1.11 In the five years to 2017 at least £226¹³ million of public money was spent on

- dealing with homelessness. In addition, there were welfare costs of £65¹⁴ million through Housing Benefit, resulting in a total cost to the public purse of £291 million (see **Appendix 2**). While the majority of this expenditure is managed through the Department, other central government departments, for example Health and Justice, also allocate resources to tackle homelessness. Local government contributes a limited amount of funding. The third sector¹⁵ also generates income from grant making trusts, the general public and Lottery funding.
- 1.12 The £48.5 million of public funding provided for measures to prevent and deal with homelessness in 2016-17 comprises Supporting People Programme 16 funding of £29.1 million 17 (59 per cent), NIHE salary costs of £6.1 million (12 per cent), NIHE miscellaneous accommodation costs of £5.1 million (10 per cent) and other costs of £8.2 million (see **Figure 2**). In addition, welfare costs of £13 million were incurred in the form of Housing Benefits.

¹³ NIHE was unable to provide precise details for its internal staffing costs over the period 2012-13 to 2013-14. We estimate the costs to be £10 million over this period (see Appendix 2 – Note 7).

NIHE was unable to provide precise details for aspects of Housing Benefit expenditure in 2012-13, 2013-14 and 2016-17. We estimate the costs to be £22 million for these years (see Appendix 2 – Notes 2, 3 and 5).

¹⁵ Includes voluntary and community organisations (both registered charities and other organisations such as associations, self-help groups and community groups), social enterprises, mutuals and co-operatives. Third sector organisations generally are independent of government.

NIHE has statutory responsibility for delivering the Supporting People programme on behalf of the Department. It is a working partnership between NIHE, Department of Health and the Probation Board NI and delivered through approximately 100 service providers, the majority of whom are community and voluntary sector organisations.

¹⁷ This includes £23.3 million for accommodation-based services and £5.8 million for floating support services

Scale and nature of homelessness in Northern Ireland

Others
£8.2 million

Supporting People
£29.1 million

NIHE miscellaneous accommodation costs
£5.1 million

NIHE salary costs
£6.1 million

Figure 2: Breakdown of public funding for homelessness services in 2016-17

Source: NIHE and Department for Communities

Since 2006-07 around 20,000 households each year have presented to NIHE as homeless

1.13 It is difficult to measure the scale of homelessness with precision, given the sometimes hidden nature of the problem. The Department collates statistics 18 on the number of households provided with assistance under homelessness legislation. Since 2006-07 around 20,000 households each year have

presented¹⁹ to NIHE as homeless with an average of 50 per cent accepted as statutory homeless. Presenters include formerly "looked after²⁰" children leaving the care system who are referred by the health and social care trusts. In 2016-17 the number of presenters was 18,573. The highest proportion were 33 per cent single males (6,188), 32 per cent families (5,851) and 18 per cent single females (3,329). The majority of the 11,889 presenters that were accepted

¹⁸ Northern Ireland Housing Statistics 2016-17, Department for Communities. The figures referred to are from administrative data recording contacts with the statutory system by people who are homeless rather than being a survey of the homeless population. Any household or individual that is homeless but who does not present themselves to NIHE will not be recorded.

¹⁹ Applicants (individuals or households) who have applied to NIHE for a homelessness assessment.

²⁰ A child is "looked after" by a health and social care trust if he or she is in its care by reason of a court order or is being provided with accommodation for more than 24 hours by agreement either with the parents or with the child, if aged 16 or over.



Figure 3: Percentage increase in acceptances in each NIHE Region from 2012-13 to 2016-17

Source: NIHE

as FDA were families (4,165 or 35 per cent); single males (2,942 or 25 per cent); single females (2,128 or 18 per cent) and pensioner households (1,941 or 16 per cent). Of the 6,684 presenters who were not accepted as FDA, 6,306 households were placed on NIHE's social housing waiting list.

1.14 NIHE is operationally split into three geographical regions²¹ (Belfast, North and South) with the highest number of acceptances in Belfast and the lowest in South. Over the past five years there has been a 23 per cent increase in homelessness acceptances in the South Region; 13 per cent increase in the

North Region and 11 per cent increase in the Belfast Region (see **Figure 3**).

NIHE has suggested that the majority of the increases in North and South Regions may be attributable to increases in the accommodation not reasonable and loss of rented accommodation categories. Other potential reasons behind the increase in acceptances include local demographics, the private rented market being less well developed outside Belfast, and the increasing vulnerability amongst homeless applicants, including mental health issues as well as mobility problems.

²¹ Belfast Region covers all of the Belfast offices. North Region covers offices in South Antrim, East, Causeway and West and South Region covers offices in North Down and Ards, South Down, South, South West and Mid Ulster.

Scale and nature of homelessness in Northern Ireland

1.15 The number of repeat homeless presenters²² has remained static over the past four years²³. In 2016-17 there were 1,246 repeat presenters representing around seven per cent of the total homeless presenters for that year. Until March 2017 NIHE did not analyse the reasons for repeat presenting. NIHE has included the number of cases of repeat homelessness as an indicator in the Homelessness Strategy 2017-22 and will analyse this from now on.

Accommodation not reasonable is the most common reason for being accepted as homeless in Northern Ireland

1.16 **Figure 4** shows that the most common reasons for statutory homelessness were accommodation not reasonable (3,652 or 31 per cent), sharing breakdown/family dispute (2,140 or 18 per cent) and loss of rented accommodation (1,546 or 13 per cent). Other reasons include intimidation, release from hospital and mortgage default.

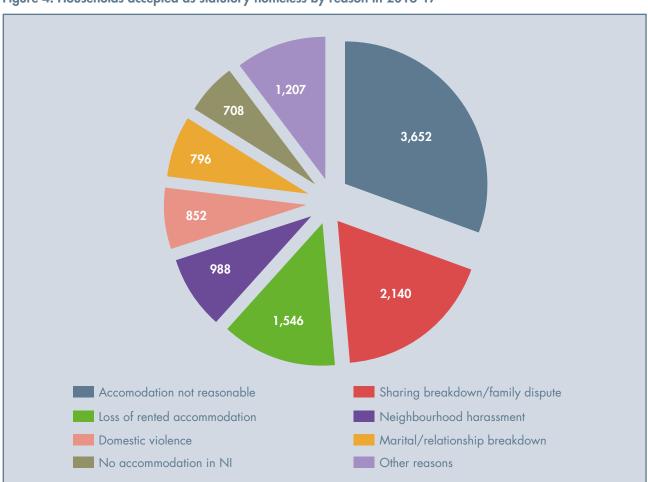


Figure 4: Households accepted as statutory homeless by reason in 2016-17

Source: Department for Communities and NIHE

²² Previous application had been closed less than 12 months before the current homeless application.

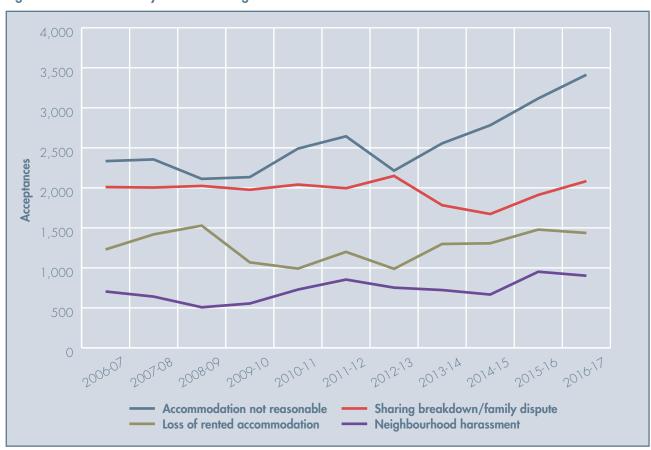
²³ No data is available prior to 2013-14.

- 1.17 **Figure 5** shows trends in the key homeless categories over the past ten years.

 Accommodation not reasonable has consistently been the category with the highest number of statutory homeless acceptances and, from 2011-12, numbers have been steadily increasing. In the ten years since 2006-07 around 29,000 households in total have been accepted as statutory homeless in this category.
- 1.18 Housing legislation in Northern Ireland states that "a person shall not be treated as having accommodation unless it

is accommodation which it would be reasonable for him to continue to occupy." The accommodation not reasonable category, also in some cases known as the "homeless at home", includes households accepted as statutory homeless because of health grounds, the current occupied property being unfit, overcrowding and the location of the property being unsuitable. Acceptances in this category are aligned to the individual's needs rather than the quality or type of accommodation that they are living in.

Figure 5: Trends in the key homeless categories between 2006-07 and 2016-17



Source: Department for Communities and NIHE

Scale and nature of homelessness in Northern Ireland

- 1.19 The Homelessness Strategy 2012-17 attributed homelessness arising from accommodation not reasonable to the aging population and difficulties older people have in continuing to maintain their family homes. However, recent analysis by NIHE shows that 60 per cent of these acceptances are presenters under 60 years old (see **Figure 6**).
- 1.20 We asked NIHE to provide an analysis of previous housing types for the accommodation not reasonable category. In 2015-16, 1,375 acceptances (40 per cent) were social housing tenants, 1,335 were private rented tenants (39 per cent) and 512 acceptances (15 per cent) originated from owner occupied properties. This pattern is representative of the previous four years.
- 1.21 NIHE told us that if it is unreasonable for a household to continue to occupy a property and it is unable to provide a short term solution, the applicant is entitled to pursue a homelessness application. NIHE further explained that where physical incapacity results in accommodation not reasonable, it

- may be possible for social properties to be adapted. In the case of private properties there are grants available for adaptation works to meet the needs of the occupants. In some cases it will not be technically feasible to adapt a property and in others it may not make economic sense (see **Case Example** 2). NIHE carried out 31,866 welfare adaptations to help people remain in their homes in the five years ending 2016-17. NIHE told us that there is no mechanism to link grants awarded to those accepted as homeless.
- 1.22 A recent Equality Commission report²⁴ recommends: the provision of easy to access and affordable adaptation services across all tenures, including streamlining existing services; increasing awareness of grants and reducing waiting times. The Report notes that this would complement the Transforming Your Care agenda which emphasises the delivery of social care within the home. Given the steadily increasing number of statutory homeless acceptances in this category further analysis of the data could identify important trends. This should inform NIHE's work in addressing

Figure 6: Recent NIHE analysis of the accommodation not reasonable category

Household Type	Age 60+	Single Male/ Female	Single Parent	Others	Total
2014-15	1,204 (39%)	868 (28%)	501 (16%)	534 (17%)	3,107
2015-16	1,359 (40%)	914 (27%)	560 (16%)	580 (1 <i>7</i> %)	3,413

Source: NIHE

²⁴ Draft Policy Recommendations: Equality in Housing and Communities, Equality Commission for Northern Ireland, June 2017.

this category of homelessness (see paragraph 2.17). The Department has advised that an Inter-Departmental Review of Housing Adaptations has been finalised and is awaiting NI Executive approval.

Homelessness is not always visible

1.23 Hidden homeless refers to people who could be considered homeless but are not visible on the streets or in official statistics, for example, households staying with friends or sharing with family members or squatting. Research²⁵ commissioned by NIHE concluded that "these populations are inherently difficult to count and no country or region has entirely robust or complete data on these groups". The Homelessness Monitor²⁶ estimates that this could be thousands of people, but the full extent is unknown. The hidden homeless often make the transition to statutory

homeless and preventing this is a major challenge for organisations responding to homelessness. NIHE told us that the Homelessness Strategy 2017-22 includes actions focused on early prevention work which aims to ensure households avail of advice and assistance at an earlier stage and thus prevent the transition to statutory homelessness.

The rate of statutory homeless acceptances in Northern Ireland is high compared with other UK **jurisdictions**

1.24 The rate of statutory homeless acceptances per thousand households²⁷ is relatively high in Northern Ireland when compared with the rest of the UK (see **Figure 7**). Appendix 3 shows homelessness trends across the UK. In the other three jurisdictions acceptances have fallen substantially since the mid-2000s as a result of shifts towards proactive

Case Example 2: Accommodation not reasonable

The homeless applicant was a 72 year old man who had resided in an upstairs flat for 12 years. As the applicant's Chronic Obstructive Pulmonary Disease had worsened he could now no longer ascend the external steps to enter his flat. His social worker stated that he would be unable to return to his flat on discharge from hospital and social services would try and arrange respite care for two weeks after which he would have no suitable accommodation to live in. The applicant's daughter lived in a NIHE estate in another part of the town and wanted her father to be housed close beside her so that she could provide support when it was required. The officer dealing with this case explained that NIHE could not guarantee suitable temporary accommodation and that the applicant may need to consider the possibility of privately rented accommodation close to his daughter.

The applicant was awarded FDA status on the grounds that it was unreasonable for him to continue to occupy his former upstairs flat. NIHE offered the applicant one of its two bedroom bungalows in an area close to his daughter, which he accepted.

Source: NIHE

²⁵ Measuring Homelessness and Housing Exclusion in Northern Ireland, Centre for Housing Policy, University of York, 2013.

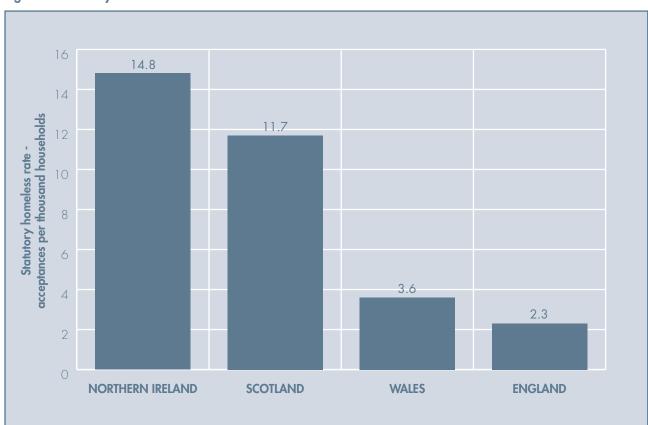
²⁶ The Homelessness Monitor: Northern Ireland 2016, Crisis, November 2016. Crisis is a national charity for homeless

²⁷ Proportionate to total population, statutory homeless acceptances in Northern Ireland are much higher than in England and Wales and somewhat higher than in Scotland.

Scale and nature of homelessness in Northern Ireland

preventative measures including the Housing Options approach²⁸. NIHE has been piloting a similar approach since 2015 (see paragraph 3.12). NIHE told us that homeless presentations may have declined elsewhere because homelessness status does not guarantee highest priority for a social home or the allocation of a social home in other jurisdictions. By comparison, in Northern Ireland social housing is allocated on the basis of points awarded for housing need and homeless households are awarded a high number of points in the social housing allocations system. A social housing tenancy provides lifetime security for households which is not

- necessarily the case for private rented tenancies which are subject to short term letting agreements.
- NIHE and the Department have suggested that the higher rate of acceptances in Northern Ireland may also be due to:
 - the higher number of acceptances in the accommodation not reasonable category. As Northern Ireland legislation is less prescriptive in this area consideration of what meets this category is more open to interpretation than it is elsewhere in the UK;



1.25

Figure 7: Statutory homeless rates across the UK in 2015-16

Source: The Homelessness Monitor: Northern Ireland 2016, Crisis

Under this approach when someone approaches a local authority with a housing problem they are offered advice on their options and choices in the widest sense. This approach features early intervention and explores all possible tenure options, including social housing and the private rented sector.

- the post conflict society which has higher levels of physical and mental health vulnerabilities:
- differing allocation policies across
 the UK having an impact on whether
 households present as homeless.
 For example, applicants in other
 jurisdictions may receive only one
 offer and this may be to a social or
 private tenancy. Also the offer may
 be significantly distant from where
 the applicant currently resides.
 Applicants in Northern Ireland
 receive three reasonable offers to a
 social tenancy; and
- Northern Ireland having one regional organisation that deals with homelessness as opposed to the local authority system in the rest of the UK. NIHE also engages closely with community, voluntary and statutory sectors and this leads to increased awareness of homelessness and homelessness services.

Another factor which complicates allocations policy and practice in Northern Ireland is that a large proportion of social housing is segregated along religious lines.

1.26 These explanations may well have some validity, however they are not substantiated by evidence from analysis and research. There is considerable scope for further research into the underlying reasons for trends in homelessness in Northern Ireland. This, in turn, has the potential to provide NIHE with information on how it can prevent homelessness arising in the first place.

Recommendation 1

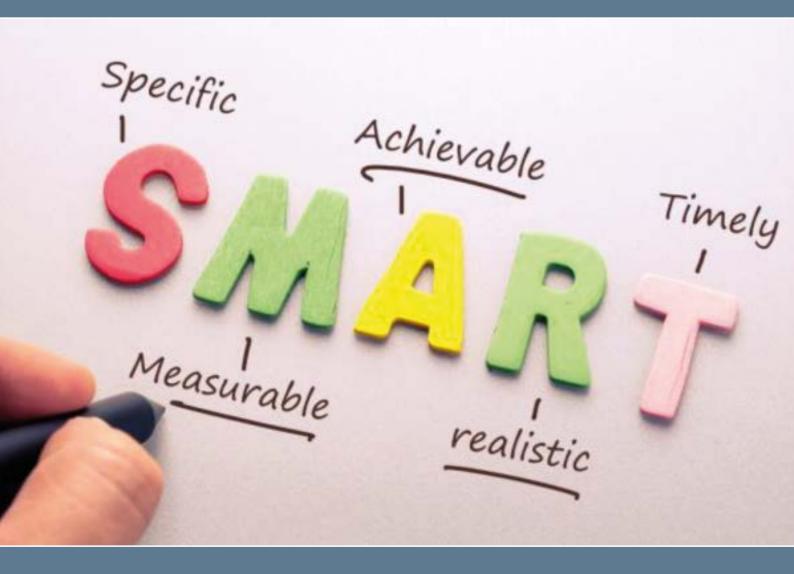
NIHE needs to be more innovative in its analysis, interpretation and presentation of the homelessness data it collects. We recommend that, to fully understand the causes of homelessness, NIHE:

- carries out research to determine why the level of statutory homeless acceptances in Northern Ireland are significantly higher than in other UK jurisdictions;
- analyses the reasons for variations in acceptances across its regions; and
- analyses the data relating to the accommodation not reasonable category.



Part Two:

Monitoring and reporting of progress in delivery of the Strategy



Part Two:

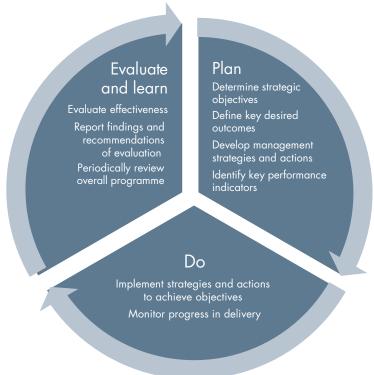
Monitoring and reporting of progress in delivery of the Strategy

The Homelessness Strategy 2012-17 had no overall outcome based targets

- 2.1 Performance measurement helps the public sector ensure it is achieving its objectives and making the best use of resources. When accompanied by a good reporting framework it ensures accountability by showing the Assembly, taxpayers and stakeholders they are getting value for money (see Figure 8).
- 2.2 The NI Executive's Programme for Government 2011-15 had no key commitment or related outputs on homelessness. The consultation for the Programme for Government 2016-21 includes an outcome indicator on

- improving the supply of suitable housing with a lead measure of the number of households in housing stress²⁹. All applicants awarded statutory homeless status are deemed to be in housing stress
- 2.3 The vision of the NIHE Homelessness Strategy 2012-17 was to eliminate long term homelessness and rough sleeping across Northern Ireland by 2020. The strategic objectives were to:
 - place homelessness prevention at the forefront of service delivery;
 - reduce the length of time households and individuals experience

Figure 8: Key elements of a performance framework



Source: Northern Ireland Audit Office

homelessness by improving access to affordable housing;

- remove the need to sleep rough; and
- improve services to vulnerable homeless households and individuals.
- 2.4 Eliminating long term homelessness and rough sleeping by 2020 is ambitious. Measuring progress would have been difficult as long term homelessness had not been defined and the target date for achieving the vision was set beyond the Strategy term. The objectives were not linked to clear high level expected outcomes, which made it difficult to assess how successful the 2012-17 Strategy has been.
- 2.5 In 2012, NIHE devised one Key Performance Indicator (KPI) with six sub indicators to monitor progress and performance. Appendix 4 sets out the KPIs used by NIHE from 2012-13 to 2016-17. The original KPI was not adequately designed. It was not SMART³⁰, nor linked to expected outcomes and there is no evidence that clear baseline and benchmark data was developed. For example, monitoring the implementation of the Strategy, developing an Action Plan and completing a revised Belfast Rough Sleeper strategy does not measure the overall impact and effectiveness of the Strategy in terms of outcomes. In

"There were no consistent outcome based measures to monitor effectiveness of the 2012-2017 strategy".

A third sector view

addition, KPIs established at the outset were revised across the duration of the Strategy.

- 2.6 In 2015-16, the fourth year of the Strategy, two new KPIs were introduced which could broadly be considered as SMART and capable of measuring impact:
 - to decrease the number of homeless presenters; and
 - to reduce the average length of time households spend in temporary accommodation.
- 27 A well developed performance framework supports the delivery of outputs and shows the contribution those outputs are making to the expected outcomes. The performance framework supporting the Homelessness Strategy had no overall outcome based targets. Therefore the evaluation of a suite of actions (described as "What we will do") was the primary means of demonstrating impact and effectiveness of the Strategy. NIHE set out 38 recommended actions which were linked to the four strategic objectives (see Appendix 5).
- 2.8 The Westminster Public Accounts
 Committee took evidence and
 reported on homelessness in Northern
 Ireland around 13 years ago³¹. We
 acknowledge that progress has been
 made, especially with respect to the use
 of Bed and Breakfast accommodation
 but some of the recommendations on
 performance measurement remain
 relevant (see **Appendix 6**).

³⁰ Specific, Measurable, Achievable, Relevant and Time Bound.

³¹ Housing the homeless, House of Commons: Committee of Public Accounts, HC 559, 20 May 2004.

Part Two:

Monitoring and reporting of progress in delivery of the Strategy

2.11

Recommendation 2

We recommend that NIHE establishes:

- clear objectives that capture key high level expected outcomes; and
- SMART key performance indicators to measure overall success.

This should be part of their strategic planning process in all business areas.

Monitoring of progress in delivering the Homelessness Strategy was inconsistent

Reporting progress to the Department

- 2.9 Between 2012 and 2014, NIHE reported progress in delivering the 38 recommended actions through monitoring reports presented to the Promoting Social Inclusion Partnership Group. This Group was replaced by the Homelessness Strategy Steering Group (HSSG) in 2014 following an internal review (see paragraph 4.3). The HSSG, chaired by the Department, received verbal progress updates from NIHE at its six monthly meetings.
- 2.10 For the first few years of the Strategy the Department had a greater focus on significant organisational issues within NIHE and less on its operational performance. Following an internal review the Department introduced a more efficient and focused oversight

framework to monitor NIHE's general performance in August 2015. The oversight of performance prior to August 2015 may not have been as effective and resilient as it should have been. Since then, however there is evidence that clear KPI information (including Homelessness KPIs) highlighting delivery risk have been provided by NIHE to the various oversight meetings.

Reporting progress within NIHE

- The NIHE Board received an initial progress report in June 2013, followed by a paper in July 2014 asking it to approve revised governance arrangements for homelessness and a greater emphasis on preventative measures. A further Board paper in November 2015 provided an update on the revised arrangements and analysis of homelessness trends. Neither of the Board papers provided an assessment of the overall impact of the Homelessness Strategy in reducing homelessness and had very limited financial information. Given that homelessness is a high profile and important social issue the NIHE Board should have sought greater detail and been kept more fully informed on all aspects of performance and progress. NIHE told us that it is reviewing the format of information submitted to the Board to ensure that it is appropriate.
- 2.12 The intermittent focus on reporting activity at an initiative level led to limited information being available.

It is difficult to assess the extent to which the approach of funding a large suite of initiatives supported the achievement of the Homelessness Strategy's overall outcomes and service delivery. We acknowledge that much work was done (see Appendix 5) but the flawed design of the performance system meant that the impact of this was not fully demonstrable. The presentation of clear, accessible performance information to all stakeholders is a key factor in demonstrating transparency and accountability. NIHE has given an undertaking to publish an annual report on progress and performance in the Homelessness Strategy 2017-22.

2.13 Our previous report on homelessness in 2002³² highlighted a number of shortcomings relating to management and costing information. It is unacceptable that 15 years on, shortcomings still persist. Linking cost information to activities and outcomes is important to decision making and the NIHE Board and the Department cannot demonstrate that value for money has been achieved without this financial information.

Evaluation of the Homelessness Strategy

2.14 NIHE carried out an internal review in July 2014 which noted that progress was being made against the 38 recommended actions in the Strategy but a preventative approach focusing on five key priorities would increase effectiveness. This led to the Strategy being reprioritised and **Appendix 7** sets

out details of these five key priorities.

2.15

NIHE engaged consultants to formally evaluate its Homelessness Strategy in July 2016, less than a year before it ended. The consultants reported that 32 of the 38 recommended actions were assessed as complete, a further three were in progress (as significant changes had occurred) and three were not yet complete. Appendix 5 includes details of the individual actions and the assessment against each of them. The evaluation report³³ concluded that the goals of the Strategy were supported by the results of approaches to homelessness used in other UK jurisdictions and international evidence. However, it identified ambiguity and limitations in the design and implementation of the Strategy, with the actions and key priorities more complex than those found in other homelessness strategies. The evaluation also highlighted that the daily achievements for NIHE, government departments and, particularly, for the third sector in preventing and reducing homelessness must be fully acknowledged.

Recommendation 3

We recommend that NIHE systematically evaluates performance in dealing with homelessness against its strategic objectives and regularly reports progress to the Board and other key stakeholders.

³² Housing the Homeless, NIA 55/01, 21 March 2002.

³³ The Homelessness Strategy for Northern Ireland 2012-2017: An Evaluation, Fiona Boyle and Nicholas Pleace, January 2017.

Part Two:

Monitoring and reporting of progress in delivery of the Strategy

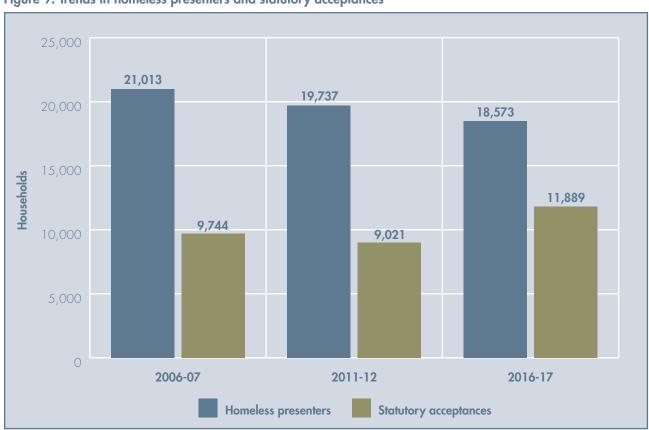
2.18

NIHE's strategic approach had limited success in reducing statutory homeless acceptances

- 2.16 Households presenting to NIHE as homeless reduced by 12 per cent between 2007 and 2017 and six per cent between 2012 and 2017. However, households accepted as statutory homeless have increased by 22 per cent and 32 per cent over the same periods (see **Figure 9**).
- 2.17 NIHE was unable to explain why acceptances have increased significantly

- as it does not currently analyse data tracking the individual circumstances of household acceptances (see **Recommendation 1**).
- The average length of time households spent in temporary accommodation decreased from 46 to 39 weeks between 2012 and 2016 and this is a positive outcome for NIHE (see paragraph 3.36). However, the number of placements into temporary accommodation per annum increased from 2,738 to 2,890 (six per cent) between 2012 and 2016. NIHE

Figure 9: Trends in homeless presenters and statutory acceptances



Source: Department for Communities and NIHE

- explained that this trend is to be expected as there was a rise in statutory homeless acceptances over this period.
- 2.19 The homelessness trends reflected in official Departmental statistics (see paragraph 1.13) indicate that the aim of reducing homelessness over the course of the Homelessness Strategy 2012-17 has had limited success.

NIHE cannot demonstrate the effectiveness of its approach to homelessness prevention

- 2.20 Despite homeless prevention being "placed at the forefront" of efforts over the past five years (and being a key objective of the earlier 2002 strategic approach), there is little empirical evidence or published statistics to show how many households have actually been prevented from becoming homeless by the work of NIHE and its partners. NIHE explained that there is no mechanism in place to gather or analyse data from its partners on successful preventative initiatives and outcomes. Poor data availability may hamper efforts to track trends and lack of data analysis impacts on targeting of resources, monitoring of performance and the assessment of impact.
- 2.21 The roll-out of the Housing Solutions and Support approach (see paragraph 3.12), presents an opportunity for NIHE to improve its management information. NIHE told us that it is currently developing a new customer management system which will improve the quantity

- and quality of information on applicants who present to it, including successful preventative and sustainability outcomes. NIHE further explained that there is a specific action in the Homelessness Strategy 2017-22 'to examine homeless trends and develop new measures'.
- 2.22 In 2016, a report³⁴ concluded that this new model when fully rolled out across NIHE should record information and data that was not previously captured. Identification and development of systems for managing performance will be essential for NIHE to understand how the service is operating and whether it provides value for money.

Recommendation 4

We recommend that the Department and NIHE develop a system that captures data on intervention outcomes of its partner agencies and feeds this into the new customer management information system to help target resources appropriately.

Other jurisdictions publish more comprehensive homelessness data sets and statistics

2.23 According to the Northern Ireland
Statistics and Research Agency website,
"official statistics are fundamental to
good government, to the delivery of
public services and to decision-making
in all sectors of society". Statistics help
to provide a better understanding of
the way things are, to back up claims
being made, to measure impact, provide

³⁴ The Supporting People Programme in NI: a Methodology for Strategic Needs Assessment, North Harbour Consulting, March 2016.

Part Two:

Monitoring and reporting of progress in delivery of the Strategy

context or background information or to make forecasts. The Crisis Homelessness Monitor 2016 concluded that statistical analysis of homelessness trends is "restricted by the relative paucity of officially published data on homelessness in Northern Ireland."

2.24 Other jurisdictions publish data sets and statistics on homelessness that are more comprehensive than those published by the Department. Expanding the number of data sets and statistical information would improve both accountability and transparency. Publication of data that is comparable with other jurisdictions could help identify better practice.

Recommendation 5

We recommend that the Department expands the number of data sets collected and statistical information published on homelessness in Northern Ireland.

Reducing demand and increasing supply



Reducing demand and increasing supply

NIHE is now placing greater emphasis on homelessness prevention activities

3.1 In 2015-16 around 38,000 households were on the social housing waiting list of which 23,000 were in housing stress (see footnote 29). With demand for affordable housing³⁶ being greater than the available supply NIHE has been concentrating its efforts on preventing households becoming homeless and increasing the supply of available affordable housing.

Supporting People Programme

3.2 The aims of the Supporting People
Programme include helping vulnerable
people live more independently through
providing housing support services. The
Programme funds a range of floating
support services³⁷ for up to two years
linked to the household's needs rather
than their accommodation, for example,

providing advice on housing and welfare rights and general counselling and support. In 2015-16, floating support services were delivered by 44 service providers to 3,976 clients, at an average weekly cost per client of £41 (see footnote 34). Floating support services received a total of £6.4 million and account for 23 per cent of the homelessness element of Supporting People expenditure (see **Case Example 3**).

The Department's recent review of the Supporting People Programme³⁸ noted that the preventative value of this Programme was a key strength while acknowledging that it was difficult to quantify its impact accurately. Other studies³⁹ have provided qualitative evidence from service providers of benefits, such as reducing hospital admissions and preventing tenancy breakdown. NIHE is currently working towards implementing the recommendations from the review,

Case Example 3: Floating Support Services

A young pregnant woman became homeless following a relationship and family breakdown. She was 'sofa surfing' with friends in unsuitable accommodation, with no means of income.

3.3

She was referred by social services to a housing association providing floating support services. The case officer established that the young woman had a lack of experience of living independently. The officer helped her to find suitable housing, provided advice on accessing benefits, helped her to set up home and register for healthcare. She was also encouraged to engage with social services and to approach a local training and employment provider.

The young woman is now living in a NIHE house and studying at a local college.

Source: Housing Association

- 36 We consider affordable housing to include social rental, affordable private sector rental and affordable home ownership.
- Housing support can be permanently attached to a particular tenancy or can be provided on a 'floating' basis. Floating Support Services are linked to individuals, rather than their accommodation, and are provided for a period of up to two years.
- 38 Supporting People Review, Department for Communities, November 2015.
- 39 Evaluation of Accommodation-Based Services (October 2015) and Evaluation of the Effectiveness of Floating Support (2012), RSM McClure Watters.

which include extending floating support services and developing a revised approach to outcome measurement.

Sustaining Tenancies

- 23.4 Landlords incur financial costs when tenancies fail, including change of tenancy repair costs and the loss of rental income. In 2015-16 NIHE managed 6,398 change of tenancies costing £12.9 million. There are also significant social costs to households following tenancy breakdowns. Keeping tenants in their homes (tenancy sustainment) is a cost effective way of reducing homelessness.
- 3.5 NIHE manages around 87,000 social tenancies, with an annual turnover in stock of around 5,600 (6.5 per cent).

 NIHE told us that many of the themes in its Customer Support and Tenancy Sustainment Strategy have been incorporated into the Housing Solutions and Support model (see paragraph 3.12). The roll out of this approach across NIHE's network of offices includes an extensive programme of training for staff in which the ethos of customer support and tenancy sustainment is central.
- 3.6 NIHE properties are allocated unfurnished and this was a recurring tenancy failure risk identified in our meetings with the third sector. We were told about an instance where a heavily pregnant woman was allocated a NIHE tenancy but had to sleep on the floor because she did not have access to a bed. NIHE told us that it cannot legally

allocate furnished tenancies. We note that consultants⁴⁰ engaged by NIHE to assess the need for furniture provision for new tenants found that furniture provision services can reduce tenancy failure but was not a panacea to solve tenancy sustainment problems. The Department and NIHE should carefully consider if the provision of furnished NIHE accommodation would help reduce cases of homelessness.

"Allocating homeless households a NIHE property lacking basic furniture and fittings increases the risk that their tenancy will fail".

A third sector view

3.7 In 2015, the Council for the Homeless for NI was provided with funding and support from the Public Health Agency and NIHE to manage a 'starter pack' scheme for new tenants to help them sustain tenancies and 278 packs were distributed. The packs included a microwave; a toaster; crockery and cutlery; a kettle; an iron and ironing board; and bedding. A survey⁴¹ to evaluate the impact of the scheme found that the packs had helped tenants start up home and tenants suggested that the initiative be extended to a furniture scheme including white goods. It also highlighted that furniture schemes are more common and geographically widespread throughout Great Britain with starter pack schemes established in Scotland since 1998 and across England since 2010. A further evaluation after the second year of the scheme found that 88 per cent of a sample of scheme applicants were still in a tenancy.

⁴⁰ Assessment of the need for furniture provision for new NIHE tenants, Sheffield Hallam University, March 2016.

⁴¹ Council for Homelessness NI 'Starter pack' Scheme Evaluation, 2016.

Reducing demand and increasing supply

Advisory and Mediation Services

- 3.8 In Northern Ireland housing advice services are provided by local NIHE teams and third sector organisations. The Department, Department of Justice and NIHE fund the charity Housing Rights to provide a range of different services. In 2015-16, Housing Rights advisors dealt with 10,735 people with housing problems and prevented homelessness for over 1,096 people⁴². This included the mortgage debt advice service which helped 1,406 clients, preventing homelessness in 258 cases (416 cases in 2014-15).
- 3.9 Family mediation schemes can play an important role in helping to reconcile young adults with their family thus reducing the risk of eviction from the family home. NIHE told us that since November 2015 consultants have been engaged to provide mediation between

communities and neighbours. Given that family dispute contributes to the second largest category of homelessness acceptances we believe that there is opportunity to widen the scope of this mediation work.

The Housing First approach

- 3.10 This approach advocates that 'wrap around' support, social care and health services are provided to homeless households, with drugs and alcohol dependencies or mental health issues, in their own home or locally in the community. This compares to the traditional approach of households moving in stages from temporary to permanent accommodation (see **Case Example 4**).
- 3.11 In 2013, the charity Depaul established a pilot Housing First service in Belfast, funded through Supporting People,

Case Example 4: Housing First Service

Sandra was 50 years old and alcohol dependent for around 25 years. She had been homeless on a number of occasions over the years due to tenancy breakdown as a result of alcohol misuse and chaotic behaviour.

The Housing First team began to support Sandra in May 2013 by providing a floating support service for a total of 15 hours per week. The Housing First team and social services operated a harm reduction approach to Sandra's alcohol dependence which resulted in her alcohol intake being reduced from at least a bottle of vodka a day to a bottle of wine or cider.

Sandra's self-esteem increased and her social isolation decreased through participation in a service user involvement group. Sandra has sustained her latest tenancy for almost two years, when previously she struggled to maintain a tenancy for more than a few months. She stopped drinking and focused on saving money to visit her son living abroad and redecorating her home.

Source: NIHE Spotlight publication, May 2015

A third sector view

which received 108 referrals by the end of 2015 from a variety of sources. An evaluation⁴³ found that 19 of the 24 people accepted into the service in 2014 were still in a tenancy at the end of year⁴⁴. The cost of Housing First per service user, per week, in 2014 was £128 (reducing to £80 in 2015). This compares to £217 per unit per week for accommodation-based services for single homeless people. The evaluation concluded that compared to the cost of accommodation-based services Housing First appeared to represent good value for money. Other qualitative benefits realised included development of selfcare and life skills.

NIHE's Housing Solutions and Support approach

3.12

NIHE decided in July 2014 to explore the possibility of adopting a Housing Solutions and Support (HSS) approach (akin to the Housing Options preventative approach) to households contacting it with a housing problem. The HSS teams provide assistance not only to households meeting the statutory homelessness tests but any household that is homeless or approaches NIHE with a housing problem. Households now have one point of contact with a housing advisor who takes ownership of their case and works with them to explore each housing option and choice. The approach has been piloted in offices across each of the three regions, NIHE now plans to adopt the approach across all offices by March 2018 (see Case Examples 5a and 5b).

Case Example 5a: NIHE's Housing Solutions and Support Service

A single female, living in an owner occupied property in negative equity, had been on the social housing waiting list for eight years. Her original application was assessed in 2008 and awarded nil points and she was given little advice on the prospect of securing a social tenancy. Renewed applications were received annually but circumstances remained unchanged.

This case was referred to the HSS team and a housing advisor visited to discuss her circumstances and explain there were no prospects of being allocated a social tenancy. The advisor directed her to Housing Rights for more specialist advice on negative equity. She subsequently decided that she was happy in her own home and withdrew from the waiting list. A debt repayment plan was developed and she is now making progress in addressing the debts.

Source: NIHE

⁴³ The Efficiency and Effectiveness of the Housing First Support Service Delivered by Depaul, Funded by Supporting People: An SROI Evaluation, North Harbour Consulting, June 2016.

⁴⁴ Three tenants died during 2014, one abandoned the tenancy and one returned to custody.

Reducing demand and increasing supply

Case Example 5b: NIHE's Housing Solutions and Support Service

A male homeless applicant was 19 years old when he applied for housing and homelessness assistance.

The applicant had been residing in a supported housing scheme in South Belfast for approximately 18 months prior to his application. This accommodation was for young people aged 16 to 21 who were previously in care.

The applicant was awarded FDA status due to having previously been a child in care. The applicant wanted to be considered for re-housing in two areas of South and East Belfast. Both areas were in high demand and the likelihood of being re-housed there was comparatively low.

The applicant was contacted by his housing advisor as part of the HSS approach as he had been on the waiting list for a year. The advisor explained that his chances of being offered social housing were limited and also explained how the Smartmove⁴⁵ scheme worked. When the applicant expressed interest in this scheme the housing advisor contacted Smartmove and the application process was started. Smartmove subsequently sourced a private rental flat for the applicant which he accepted.

Source: NIHE

- 3.13 NIHE measures outcomes for all HSS cases including the number of tenancies sustained and cases where homelessness was prevented. An internal evaluation⁴⁶ states that from August 2014 to March 2016:
 - more than 10 per cent of customers were helped to sustain their tenancy or their homelessness was prevented;
 - 37 per cent of HSS customers were re-housed in social housing, reflective of the emphasis on encouraging customers to choose areas where they have realistic prospects of being re-housed; and
 - over 13 per cent of HSS customers were supported to access housing in the private rented sector.
- 3.14 In our meetings with the third sector, concern was expressed about the potential increase in demand for floating support services and the ability to provide them. For both HSS and Housing First to work effectively, there needs to be sufficient 'wrap around' support available through floating support services. The Department's recent review of the Supporting People Programme concluded that floating support services deliver strong preventative benefits, and recommended that opportunities should be taken to extend these services as a cost effective way of meeting need. A recent policy position paper (see footnote 24) recognises the multi-faceted nature of homelessness including households presenting with increasing vulnerabilities and/or complex needs. The paper recognises the work of NIHE and others

⁴⁵ This is a private rented sector access scheme.

⁴⁶ Build Yes, Redesigning our Housing Services Evaluation Report, NIHE, July 2016.

"The NIHE Housing Solutions and Support approach is the right way forward but is heavily dependent on other departments, agencies and the third sector for the necessary support services".

A third sector view

and concludes that the availability of support services is crucial in, not only assessing vulnerable individuals but also identifying appropriate accommodation and providing ongoing support.

Each year around 80 per cent of available social homes are allocated to statutory homeless households

3.15 NIHE's most recent estimate of future social housing need was completed in November 2015. NIHE set an annual requirement of 2,000 additional new social dwellings between 2011 and 2021, in order to make significant inroads into the social housing waiting list and to take account of the relatively low rate of new private construction expected over the three years to 2017. We accept that the number of new build starts is dependent on the availability of

"The delivery of an adequate supply of new affordable decent homes is a crucial element of being able to offer people who are homeless a permanent housing solution in a reasonable timescale".

A third sector view

funding. The 7,669 new build social houses that were planned between 2011 and 2016 were 23 per cent below the five year annual requirement of 10.000.

- 3.16 The House Sales Scheme (Right to Buy) also impacts on the number of social homes that are available. From 2011-12 to 2016-17 the number of properties sold to former NIHE tenants under this Scheme was 2,327.
- 3.17 Each year around 80 per cent of the social homes that become available in Northern Ireland are allocated to households that are statutory homeless (see paragraph 1.7). This percentage is considerably higher than in other UK jurisdictions (see Figure 10).

Reducing demand and increasing supply

Figure 10: Allocation of social housing to new tenants in the UK⁴⁷

	Northern Ireland				Scotland	England	Wales
	2013-14	2014-15	2015-16	2016-17	2014-15	2013-14	2013-14
Statutory homeless acceptances	9,649	11,016	11,202	11,889	28,615	54,430	5,115
Allocations available	8,809	8,129	7,805	7,672	44,329	313,000	17,552
Allocations to statutory homeless	6,623	6,187	6,217	6,446	1 <i>7</i> ,081	40,000	3,131
% of available social homes allocated to statutory homeless	75	76	80	84	38	13	18

Source: UK Housing Review 2016 and NIHE

3.18 In our opinion, the dependence on social housing to provide a solution for homeless households has contributed in part to the waiting list for social housing remaining above 35,000 for some 10 years. Furthermore, with statutory homeless acceptances apparently showing a year on year upward trend, NIHE must consider carefully the long term sustainability of continuing to discharge its homeless duty through the social housing sector only and the option for tenants to purchase their social rented accommodation. The situation emphasises the importance of continued commitment to investment in new social housing, sustaining existing social housing stock numbers and a need to make alternative affordable solutions available.

Making best use of existing housing stock

Social housing tenancy fraud

3.19 In September 2013⁴⁸ we highlighted a range of best practice that had not yet been adopted by social housing providers in Northern Ireland. Following the introduction of new tenancy fraud procedures the number of social houses recovered by NIHE increased by 72 per cent (or 496 properties) in the three years to 2016-17. As it was estimated that each social house recovered could save around £8,000 per annum in temporary accommodation costs for homeless families this represents savings of around £3 8 million over the three years.

⁴⁷ The data for England, Scotland and Wales was the latest available information from the UK Housing Review.

Tackling Social Housing Tenancy Fraud in Northern Ireland, Report by the Comptroller and Auditor General, 24 September 2013.

Managing voids in social homes

3.20 Voids are social properties that do not have a tenant for a period of time. At the end of March 2016 a total of 1,044 NIHE properties (1.2 per cent of housing stock) and 901 Housing Association properties (2.4 per cent of housing stock) were void. The average number of days taken to re-let NIHE properties has reduced from 44 days in 2013-14 to 36 days in 2015-16 (23 days for standard properties and 55 days for difficult to let properties). In addition, the total number of void bed spaces in hostels and shared accommodation managed by Housing Associations was 512^{49} at the end of March 2016 (600: 31 March 2015). representing 13 per cent of total bed spaces. NIHE provided a one-off report for 2015-16 showing that in the hostels it manages there were 5,639 void days. This represents ten per cent of the total days available throughout the year.

The Empty Homes Strategy

3.21 The average cost of building a three bedroom social home in Northern Ireland is around £128,000⁵⁰. Refurbishment of empty homes may, in some cases, represent value for money by increasing the supply of affordable housing. The 2011 Northern Ireland House Condition Survey estimated that around 9,400 vacant private properties had potential to be brought back into use as social homes.

3.22 In September 2013 the Empty Homes Strategy and Action Plan 2013 -2018 was launched by the then Department for Social Development, aiming to look at positive and innovative ways in which empty homes could be brought back into use. The Strategy appears to have had limited success, with two Housing Associations being given access to £13.9 million of funding with the aim of bringing over 300 empty homes into use, either for onward sale or for the private rental market. However, since early 2016 the NIHE Empty Homes Unit has been scaled back and the Strategy is currently being revised.

In comparison, the Welsh Government in the three years to 2014-15 brought 2,511⁵¹ homes back into use. The Scottish Empty Homes Partnership, established in 2010, reported⁵² that 1,255 homes were brought back into use in 2015 and 2016. In England the government provided £216 million of direct funding to local authorities, registered providers and community groups between 2012 and 2015. This created 9,044⁵³ homes from empty properties.

3.23

3.24

Accessing the private rented sector

While custom and practice has been for NIHE to discharge its duty exclusively through the social housing sector, housing legislation does not preclude it from using the private rented sector. NIHE will only discharge its duty in this sector

⁴⁹ Of these only 29 per cent (or 147) were available for placement.

⁵⁰ Source: Department for Communities.

⁵¹ Houses into Homes Evaluation, Welsh Government, 2015.

⁵² The Scottish Empty Homes Partnership: Annual Report 2015-16, June 2016.

⁵³ Empty Homes (England), The House of Commons Briefing Paper Number 3012, 5 May 2016.

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with applicant consent. NIHE believes that any significant change in policy will require a full consultation process (see paragraph 1.8).

- 3.25 In April 2014 a Private Rented Sector Access Scheme was introduced across Northern Ireland. A private sector service provider was awarded a three year contract (with an option to extend for another 12 months), with an ambitious target to create 1,200 tenancies per year. Initial criteria for access to the Scheme included being statutory homeless and on the waiting list for at least six months. The aim of the Scheme was to meet housing need and create sustainable tenancies, with the provider required to:
 - secure furnished properties from private sector landlords in 12 designated areas of high housing need;
 - match applicants to a suitable property and assist the applicants to establish a tenancy;
 - undertake tenancy support assessments;
 - assist the landlord in the management of the tenancy for six months; and
 - administer a rent bond guarantee scheme and savings scheme.
- 3.26 A review after six months highlighted that the Scheme had created 32 tenancies (against an anticipated 600). The review

found an insufficient number of statutory homeless households had engaged and that there had been difficulties in securing accommodation from landlords.

3.27 Targets and costs were revised following a negotiated change to the contract in November 2014. The Scheme was opened up to all households in housing need not just those with statutory homeless status. In the 38 months to June 2017 the Scheme has delivered 1,417 tenancies (1,018 new tenancies and 399 sustained tenancies) against an original target of 3,800. NIHE told us that the current Scheme will be evaluated as part of an options appraisal which will guide any future provision of a similar scheme.

NIHE has access to a range of temporary accommodation solutions costing around £31 million per year

- 3.28 NIHE has access to a range of temporary accommodation solutions including:
 - 18 NIHE hostels with 166 units comprising 334 beds;
 - 75 third sector hostels with 1,315 units comprising 1,703 beds;
 - 1,160 private single let properties ranging from one to five bedroom (rental accommodation made available to households on a short term basis);

- Bed and Breakfast facilities and hotels; and
- Dispersed Intensively Managed Emergency Accommodation (DIME)⁵⁴ with 70 units.

"There will always be a need for half way house (hostel) accommodation as many homeless households are not equipped to live independently".

A third sector view

3.29 In 2016-17, the cost to the public purse, of providing temporary accommodation was around £31 million or over 60 per cent of the overall expenditure on

homelessness. This includes furniture removal and storage costs of £1.5 million. In addition, there were welfare costs of £13 million for Housing Benefit. The total cost over the past five years was around £141 million plus Housing Benefit payments of around £65 million over the same period (see **Appendix 8**).

There were 2,777 placements⁵⁵ in temporary accommodation in 2016-17 (see **Figure 11** for breakdown). Bed and Breakfast/hotel placements are considered to be short term emergency accommodation in response to crisis situations, while other options are transitional arrangements with households expected to move on into independent living arrangements.

Figure 11: Weekly expenditure per unit for temporary accommodation in 2016-17

Accommodation type	Weekly unit cost	Number of temporary accommodation placements	Temporary accommodation costs in 2016-17 £ million
Bed and Breakfast/hotels	£315 to £630	322	0.2
Third sector hostels (based on NIHE data)	£437	631	29.9
NIHE hostels	£382	281	3.3
Dispersed Intensively Managed Emergency (DIME) Accommodation	£174	315	1.0
Private single lets	£129	1,228	7.9
Furniture removal and storage			1.5
Total		2,777	43.8

3.30

Source: NIAO from NIHE and Department for Communities data

A private residential care company provides NIHE with 70 units of DIME accommodation for homeless singles under a four year contract.

⁵⁵ Households may receive more than one placement in a year.

Reducing demand and increasing supply

- 3.31 In 2016-17, there were 322 placements within Bed and Breakfasts/Hotels which included 115 families (with 172 children) and 207 couples/singles. This option accounts for around 12 per cent of total placements but has reduced by 30 per cent since 2014-15 (462 placements).
- 3.32 The weekly unit cost illustrated in Figure 11 shows that Bed and Breakfast/Hotel placements can be the most expensive option and generally not suitable for families with young children. The use of Bed and Breakfast/hotel placements should therefore be minimised. Third sector hostels appear to be expensive but as some service providers deal with high risk households such as domestic violence victims, ex-offenders and individuals with drug and alcohol issues this requires more intensive staff management and support. The DIME accommodation arrangement deals with very high risk individuals with multiple and complex needs but its unit cost is much lower. As private lets are the least expensive option by some margin, maximising the use of good quality private rented properties is important in helping to make better use of the resources available to NIHE for temporary accommodation services. Funding arrangements for the various temporary accommodation types are set out in **Appendix 9**.
- 3.33 One of the five key actions identified in the 2014 reprioritised Homelessness Strategy was the need for a central access point to be implemented to ensure central oversight of the availability of

all hostel spaces. This should lead to placements being allocated to hostels that best suit the households' needs. In our meetings, the third sector expressed frustration at the delay in setting this up and observed that more transparency was required as some hostels chose not to accept people with particularly complex needs.

"Homeless households are not necessarily allocated to the hostel that best suits their needs – implementing the central placement register is critical in getting people who are homeless placed into appropriate hostel accommodation".

A third sector view

- 3.34 The Department's recent review (see footnote 38) of Supporting People found that there was significant variation in costs across third sector and NIHE hostels and it was difficult to explain these differences. The Department recommended introducing standardised regional payment rates to ensure better value for money. It also recommended that a competitive tendering approach should be piloted and evaluated to assess impact on value for money and service delivery.
- 3.35 Given continued pressures on public sector budgets, there is an ongoing need to closely monitor costs, benchmark cost data and demonstrate continued value for money in accommodation-based services. Such information should be regularly reported to the NIHE Board and other key stakeholders.

Recommendation 6

We recommend that an annual report is submitted to the NIHE Board which presents a summary of expenditure and benchmarked cost data demonstrating that accommodation-based services provide value for money.

Since 2012 the average length of stay in temporary accommodation has been reducing

3.36 In September 2016 the average length of stay in temporary accommodation was 39 weeks; a reduction from 46 weeks in 2012⁵⁶. The average length of stay in single private lets and NIHE hostels has steadily increased over the past three years to just over 55 weeks and 24 weeks respectively, whereas there has been a small decrease in the length of stays in DIME accommodation (see **Figure 12**).

We asked NIHE to take a snapshot on 15 August 2017 showing the total length of time households had spent in the different types of temporary accommodation (see Figure 13). This showed that 710 households had been in temporary accommodation for over one year. The majority of these households were in private single lets (502) but 166 households had been living in a third sector hostel for over one year. A paper⁵⁷ to the NIHE Board in November 2015 indicated that at that time there were 36 households living in temporary accommodation in excess of five years. This suggests that there is a lack of suitable move-on options.

Figure 12: Average number of weeks spent in temporary accommodation between 2014 and 2016

3.37

Period	B&B/hotel	Third sector hostels	NIHE hostels	DIME	Private single lets	All sectors
01/10/13 to 30/09/14	4.1	31.6	16.9	15.3	50.1	36.9
01/10/14 to 30/09/15	6.1	38.2	21.2	13.4	49.7	37.0
01/10/15 to 30/09/16	4.1	34.6	24.0	13.5	55.7	38.8

Note 1: Statistics only available from October 2013 when NIHE's TABBS system was migrated to the Housing Management System

Source: NIHE

⁵⁶ As per the NIHE Homelessness Strategy 2012-17.

⁵⁷ Update on the Re-prioritised Homelessness Strategy 2012-17, NIHE Board Paper, 25 November 2015.

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Figure 13: Length of time households have spent in temporary accommodation: a snapshot on 15 August 2017



Source: NIHE

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Part Four:

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- 4.1 For some households provision of a home does not fully address their homelessness and other support needs. In such cases, homelessness may be linked to mental health problems, drug and alcohol dependencies, street lifestyles and institutional experiences, including prison and the care system (see Figure 1).
- 4.2 Housing legislation in Northern Ireland recognises that dealing with homelessness is not restricted to those with responsibility for housing. NIHE is empowered to provide grants assistance to voluntary organisations. A number of different government departments and public sector organisations are required to take the homelessness strategy into account when exercising their functions (see **Appendix 10**).

The inter-agency Homelessness Strategy Steering Group provides guidance and direction on the implementation of the Homelessness Strategy

4.3 The Department previously had a strategic oversight role in respect of homelessness through the cross-departmental Promoting Social Inclusion Partnership⁵⁸. In 2014, following an internal NIHE review, an inter-agency Homelessness Strategy Steering Group (HSSG), chaired by the Department, was established to provide guidance and direction on the implementation of the Strategy. This Group, which includes third sector representation, has met every six months since October 2014.

4.4 Our discussions with various stakeholders and a review of HSSG minutes, suggest that departmental representatives did not always have sufficient seniority, with the ability to influence and make timely strategic decisions. We consider that the role of the HSSG set out in its terms of reference was too narrow and meetings on a six monthly basis were not regular enough to respond to emerging risks and crisis situations. It is acknowledged that an urgent meeting was held in March 2016 to discuss street deaths linked to homelessness. The Steering Group operates as a sounding board, hearing about developments and progress. From the evidence we have seen the Group is provided with limited financial information to inform its strategic oversight role. The Group should reposition itself to ensure it provides strategic leadership and works with Government to effect positive change.

An integrated cross-departmental strategy is needed

In 2014, the Northern Ireland
Executive commissioned a review⁵⁹
of its public sector reform agenda.
Amongst the recommendations was
the importance of promoting joined-up
working ("horizontal co-operation across
departments and public agencies to
break down institutional silos") and the
need to communicate the benefits of
inter-departmental co-operation. This is
echoed in a recent House of Common's
Inquiry into Homelessness in England
and Wales which concluded that the
scale of homelessness was such that a

⁵⁸ This Group was established in 2004 to promote the social inclusion of people who are homeless.

⁵⁹ Northern Ireland (United Kingdom): Implementing Joined-up Governance for a Common Purpose, Organisation for Economic Cooperation and Development, 2016.

renewed cross-departmental Government strategy is needed⁶⁰.

- 4.6 In our view, the strategic approach to homelessness in Northern Ireland must also shift towards a cross-departmental strategy with those involved committing to a common goal. Until homelessness is a strategic priority for all the relevant departments and agencies in Northern Ireland it will continue to be viewed mainly as a housing issue and suffer because of conflicting priorities. For example, welfare reforms to housing benefit are likely to lead to spending pressures elsewhere in dealing with homelessness.
- 4.7 Where services are delivered by several organisations it is important that accountability arrangements are clear, and supported by data that allows effective evaluation and scrutiny. The new approach to the Programme for Government provides a framework designed to ensure clearer links between policies and programmes and the outcomes they are designed to support. The decision by the Northern Ireland Civil Service to adopt an outcomes based accountability methodology across all departments should allow for a clearer focus on the impact of interventions. The Executive Office and the Department of Finance are well placed to support and embed these approaches via the Programme for Government, the Budget process and the wider public sector reform programme.
- 4.8 At an operational level, achievement of the aims and objectives set out by NIHE

"NIHE cannot solve the myriad of issues which contribute to homelessness on its own. Without a firm commitment from Health, Justice, Education and all other Departments homelessness or the causes of it will not be dealt with effectively".

A third sector view

are clearly dependent on the actions of partners and stakeholders (both public sector and third sector), and its influence over these organisations is key to successful delivery. The Department's recent review (see footnote 38) of Supporting People recommended that relationships and funding responsibilities of the various statutory partners should be clarified to ensure costs and risks are shared appropriately.

Recommendation 7

We recommend that the framework for addressing homelessness is developed in an integrated way with an emphasis on outcomes rather than existing departmental structures. This may lead to a widening of the scope of the Homelessness Strategy Steering Group.

An Inter-Departmental Homelessness Action Plan is under development

4.9 Following the Tri-Ministerial Action Plan in response to the deaths of rough sleepers in Belfast in 2016 (see paragraph 4.30) the Department focused its efforts on the need to improve collaborative working across government, and between

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statutory and third sector agencies. The Department has developed a draft Inter-Departmental Homelessness Action Plan (August 2017) to complement the NIHE Homelessness Strategy 2017-22. The Department told us that the Action Plan focuses on addressing gaps in those non-accommodation services that have the most impact, or have the potential to more positively impact, on the lives and life chances of people who are homeless and those who are most at risk of homelessness.

- 4.10 Engagement with service providers, service users, departments and statutory partners has resulted in the identification of five priority areas for action:
 - health and wellbeing, including mental health and substance misuse;
 - education and awareness raising children, young people, schools and providers;
 - support for those leaving places of care, including institutional care, children's residential and foster care, prisons, hospitals and mental health facilities;
 - support for families (including support for those experiencing domestic violence), and community support mechanisms; and
 - employability, financial capability and access to benefits.

The development of the Action Plan will be an evolving process over the lifetime of the new Homelessness Strategy. The HSSG will have overall responsibility for monitoring and reporting on the implementation of the Action Plan.

People who are homeless face barriers in accessing health and social care services

- 4.11 Recent preliminary research by the Patient and Client Council⁶¹ found that people who are homeless in Northern Ireland experience some of the poorest levels of health among the general population and face barriers in accessing services. For example, it can be difficult to obtain access to a General Practitioner (GP) as those who are homeless frequently do not have proof of identity or a permanent address nor does their chaotic lifestyle necessarily suit appointment-based care.
- 4.12 People who are homeless tend to use GP services less and use Accident and Emergency services as their primary care facility. A report⁶² in 2010 found that homeless people in England attend Accident and Emergency services five times as often as the general population and are admitted to hospital four times as often, where they tend to stay three times longer. This equated to an estimate of £85 million of healthcare spend on the homeless in England which was four times the level of the general population (with inpatient costs being eight times higher).

⁶¹ Issues faced by people who are homeless in accessing health and social care services, Patient and Client Council, March 2015.

⁶² Healthcare for single homeless people, Department of Health, 2010.

4.13 Both the third sector and the Patient and Client Council agree that, in supporting the homeless to access health and social care services, the key improvements needed are: education of front-line health professionals; collaboration between different organisations, a homeless coordinator for each health and social care trust; the provision of quicker access to services and access to services in the community, that is, at point of contact.

There is overlap between homelessness and other support needs

Health and homelessness

- 4.14 A series of studies⁶³ in 2011 referred to the strong overlap between experiences of homelessness and other support needs. Service users reported experience of institutional care, substance misuse and street activities (such as begging). People with complex needs were more at risk of falling through the gaps in provision.
- 4.15 In March 2013 the Council for the Homeless NI conducted a census⁶⁴ of residents within temporary accommodation. This census showed that one in three third sector residents (nearly 450 people) had a mental health issue and one in four had an alcohol or drugs issue.
- 4.16 Witnesses representing the third sector gave evidence to the Assembly's

"Service provision has not changed to meet the change in needs. It's not just about accommodation needs but increasingly complex needs such as mental health, drug and alcohol addiction and intensive wrap around support".

"There is a need for specialist health services at the point of contact i.e. street outreach, drop in centres, hostels".

Third sector views

Committee for Communities⁶⁵ in March and June 2016. In their opinion access to mental health and addiction services in Northern Ireland is not straightforward and the formal assessment process is lengthy and complicated. The witnesses also stated that there is a shortage of detoxification facilities in Northern Ireland.

- 4.17 Third sector providers told us that, when addicts who are resident in their hostels decide to give up alcohol or drugs, frequently the opportunity is lost as it can take four to six weeks to get accepted into a detoxification or substitute prescription programme. Often support is only provided in extreme circumstances where individuals are detained under the Mental Health Act. They also told us that there are only two professional dual diagnosis⁶⁶ assessors in Northern Ireland.
- 4.18 Third sector service providers also told us that they are dealing with an increasing number of individuals with complex needs (not just housing needs). In the

⁶³ Tackling homelessness and exclusion: Understanding complex lives, Joseph Rowntree Foundation, September 2011.

⁶⁴ Temporary Accommodation Census – summary, Council for the Homeless (Northern Ireland), March 2013.

⁶⁵ Homelessness Briefing, Committee for Communities, 3 March and 23 June 2016.

⁶⁶ An individual may have a mental health illness and an addiction at the same time.

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third sector's view there is a need for increased commitment, collaboration and targeted intervention from the Health sector.

- 4.19 The Department of Health told us that its service provision is based on the clinical need of the entire population. The Department for Communities has advised that the Inter-Departmental Action Plan is in draft form however the Department of Health has agreed to lead on an action: 'to identify barriers faced by people who are homeless in accessing health and social care services, with a view to improving access to those services'. The Department of Health told us that the first stage of this work will involve consideration of the findings from the Patient and Client Council report (see footnote 61), Public Health Agency research and the homeless sector needs analysis, including dual diagnosis as it has been identified as an issue within this research. The Department of Health has also confirmed that it will consider the findings from the forthcoming Independent Review of Regional Children's and Young People's Facilities.
- 4.20 The relevant Departments and NIHE must consider how to be more proactive and innovative in preventing or ending homelessness for the rising number of homeless applicants with multiple and complex needs. Failure to deal effectively with this leads to continued hardship for individuals and higher costs to the public purse.

Recommendation 8

We recommend that an in-depth crossdepartmental review is jointly commissioned to identify and quantify health-related support needs for homelessness service providers and homeless households across Northern Ireland.

Supporting victims of domestic violence

In 2015-16⁶⁷ Women's Aid provided 4.21 738 women and 520 children with refuge accommodation, and over 6,200 women and 7,300 children accessed their community-based outreach support allowing them to stay in their own homes. The Departments of Health and Justice and NIHE jointly fund a 24-hour domestic and sexual violence helpline which managed 25,935 calls in 2015-16. This included calls from 726 male victims of abuse. In 2015-16, there were 649 households (829 in 2014-15) accepted as statutory homeless due to domestic violence (see Case Example

Supporting ex-offenders

- 4.22 Research⁶⁸ indicates that two thirds of ex-prisoners re-offend within two years of release from institutions. Providing targeted help with accommodation impacts positively on re-offending rates and getting ex-prisoners into stable homes could reduce re-offending by as much as a fifth
- 4.23 Housing Rights has been providing casework advice services to prisoners

⁶⁷ Women's Aid, Annual Report 2015-16.

Accommodation, homelessness and re-offending of prisoners: Results from the Surveying Prisoner Crime Reduction (SPCR) Survey, Ministry of Justice, March 2012.

Case Example 6: Women's Aid

Helen and her children were referred to a Women's Aid refuge by an outreach worker. Helen's needs were assessed and a support plan drawn up with a family worker. She was assisted while applying for income support, child tax credits and child benefit; registering with a GP; and enrolling her son in school and her daughter in nursery. Helen was accompanied to meetings with social services and supported in all her dealings with her social worker, solicitor and other agencies.

During her time in the refuge she had the opportunity to talk regularly on a one to one basis and gradually opened up about her experience of domestic violence. After three months she decided to move into a private rental, her needs were assessed and various floating support services were put in place to help her in the transition to independent living. A referral was made to a family support charity for added support with the children.

Helen attended the aftercare group on a weekly basis for emotional support and received support for a further 11 months. Helen was allocated a permanent NIHE tenancy.

Source: Women's Aid

Case Example 7: Beyond the Gate

R is 33 years old, and suffers from alcoholism and mental health issues. Over the past five years he has been in and out of prison regularly, has no family contact and historically has generally only coped for a few days post discharge before being returned to custody. His initial contact was with a housing advisor working in HMP Maghaberry (where he was serving a custodial sentence) who liaised with NIHE on his behalf to secure tenancy accommodation for him on discharge. R was then referred to the Beyond the Gate team. The assigned worker met R while he was still in prison and arranged to meet him at the prison gate on the morning of his release, and thereafter take him to the NIHE office to collect the keys for a new flat. She accompanied him to the local social security office and to a prearranged GP appointment.

The flat, like all social sector tenancies, was unfurnished and R had no other belongings except the bag of possessions he had been released with. His worker got him a starter pack and a colleague found a blow up mattress that he could use until he had enough money to buy his own. R has since been referred to a floating support service, and a counselling agency for his alcohol addiction. He has also been actively engaging with community mental health services. He's been out of prison for the longest period since his problems began.

Source: Beyond the Gate

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in Northern Ireland since 2006. A new initiative, "Beyond the Gate", which commenced in July 2015 provides support to released prisoners with a housing need, and has been funded until 31 March 2018 (see Case Example **7**). An evaluation, completed in early 2016, reported that over 20 per cent of the service users sampled had sustained the tenancy for more than six months. It is difficult to judge the effectiveness of this initiative at such an early stage. However, given that it costs around $£57,600^{69}$ per year to maintain a prisoner in custody, it is cost effective to provide housing advice and explore prerelease accommodation solutions with prisoners.

In addition to the human cost of homelessness there are significant financial costs across the public sector

4.24 In addition to the human cost of homelessness, there are significant

financial costs through the provision of various measures discussed in Part Three, the chaotic use of the health service and repeat interaction with the criminal justice system.

4.25 A recent study⁷⁰ which investigated problems faced by adults in England involved in homelessness, substance misuse and criminal justice systems, estimated the annual public sector spend on a homeless individual with severe and multiple disadvantages to be £14,000⁷¹. The study compares this figure with an estimated UK benchmark of £4,600 per adult per year for public spending.

4.26 Another report⁷² in 2015 discusses the potential for generating significant savings in public expenditure from reducing the prevalence and duration of single homelessness in the UK. The report presents four scenarios (see **Figure 14**) which show the nature and extent of the additional costs of single homelessness

Figure 14: Estimated additional costs of homelessness prevention and failure to prevent homelessness at 12 months

	Successful prevention £	Homelessness persists for 12 months
Young homeless women	1,600	11,700
Rough sleeper	1,400	20,000
Person with learning difficulty	4,700	12,800
Women escaping domestic violence	1,500	4,700

Source: Centre for Housing Policy, University of York

⁶⁹ NI Prison Service Annual Report and Accounts 2015-16.

⁷⁰ Hard Edges: Mapping Severe and Multiple Disadvantage, LankellyChase Foundation 2015.

⁷¹ This increased to £21,000 for individuals who were homeless, involved in substance abuse and were offenders.

At what cost? An estimation of the financial costs of single homelessness in the UK, Crisis (Nicholas Pleace, Centre for Housing Policy, University of York), July 2015. Similar research "The Costs of Homelessness in Europe" was published by the European Observatory on Homelessness in December 2013.

to the public sector. The report concludes that preventing, and quickly resolving, homelessness costs less public money than allowing homelessness to become sustained or repeated. The report does acknowledge limitations in the quality of evidence on the costs of homelessness both in the UK and in comparable European countries.

4 28

Rough sleeping is the most visible form of homelessness

- 4.27 Rough sleeping is the most visible form of homelessness, tending to be more prevalent in urban areas. Many people who sleep rough suffer from multiple health conditions, such as mental health problems and drug misuse. In recent years the increase in "street activity"73 in Belfast city centre has led to the perception that rough sleeping was increasing. However, a 2016 Audit,74 commissioned by NIHE and conducted over a 12 week period from May to July 2015, found that on average six people sleep rough in Belfast each night. The main reasons for these individuals not accessing crisis accommodation were:
 - lack of available crisis beds;
 - exclusion as a result of previous challenging behaviour, fighting and criminal history;
 - exclusion due to access criteria, for example, presenting as inebriated; and

- affordability (linked to addiction) and/ or previous service charge arrears.
- The Street Needs Audit concluded that "in addition to the entrenched rough sleeper group who require case management from a housing perspective, there was a larger group engaged primarily in begging and to a lesser extent street drinking activities. A multi-agency approach is required to address this issue". A similar exercise in Derry/Londonderry in 2008 found an average of eight rough sleepers a night. Counts have not been carried out elsewhere in Northern Ireland, nor have they been regularly repeated in Belfast or Derry/Londonderry. Interviews with the third sector indicated that there may be problems with people sleeping rough in other areas of Northern Ireland. NIHE told us that it will continue to work with all other relevant agencies to tackle issues associated with rough sleeping. In addition, the Homelessness Strategy 2017-22 includes actions to review and implement a Belfast and Londonderry Rough Sleepers Strategy and to identify chronic homeless need outside Belfast and Londonderry and devise an appropriate action plan to tackle any issues.
- 4.29 Based on the limited information available the scale of rough sleeping does not appear to be as significant in Northern Ireland as it is elsewhere in the United Kingdom or Dublin. Street counts and estimates across England recorded that there were 4,134

⁷³ This term is used to describe street activities like rough sleeping, street begging and street drinking.

Paul and Belfast Street Needs Audit, NIHE, The Welcome Organisation, DePaul and Belfast City Centre Management, January 2016.

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Homelessness is more than a housing issue

people⁷⁵ sleeping rough each night. Scottish Statistics⁷⁶ recorded that four per cent of homelessness applicants (1,352) slept rough the night before applying for assistance. A one night snapshot count of rough sleepers carried out across Wales observed 82 people⁷⁷ sleeping rough and a similar count in Dublin recorded 102 people⁷⁸ sleeping rough.

4.30 In March 2016 following the death of four rough sleepers in Belfast a Tri-Ministerial Group (comprising the Ministers for Communities, Health and Justice) was established to further explore the issues of street homelessness in Belfast and identify what more needed to be done. The Group agreed to increase inter-departmental collaboration and a short term action plan (to March 2017) for homelessness services in Belfast.

in hours of funded street outreach and additional crisis bed facilities in Belfast.

The third sector provides a range of services which are aimed at vulnerable people at risk from homelessness (including rough sleepers). Direct grants from NIHE and funding from the Supporting People Programme support services such as temporary crisis beds, street outreach services, drop-in facilities and other specialist assessment services. The utilisation rates for these facilities are shown at Figure 15. While average utilisation rates are high, especially in Belfast, interviews with the third sector indicated that, in their view, there are still not enough beds available per night for individuals with multiple and complex needs ("low threshold crisis beds"). NIHE told us that there are beds available where required and this ensures it

Figure 15: Utilisation Rates for Crisis Beds in Northern Ireland

Service	Beds	2011-12	2012-13	2013-14	2014-15	2015-16	
	available	%					
Centenary House Night Shelter, Belfast	9	Comme	enced in Marc	ch 2013	97	96	
Divis Crash/Anne's Gate, Belfast	4	93	93	95	90	96	
Damian House, Derry	12	81	81	81	81	83	
Ramona House, Omagh	8	98	68	66	67	72	

4.31

Note 1: The number of crisis beds increased from 13 to 25 in Belfast in June 2016

Source: NIHE

⁷⁵ Rough Sleeping Statistics Autumn 2016, Department for Communities and Local Government, 25 January 2017 – provides national summary information on rough sleeping counts and estimates carried out by local authorities between 1 October and 30 November 2016.

⁷⁶ Homelessness in Scotland: 2015-16, The Scottish Government, 23 February 2017.

⁷⁷ Statistics for Wales, Statistical First Release, 24 August 2016.

⁷⁸ Dublin Region Spring Count on Rough Sleeping, Dublin Region Homeless Executive, 24 April 2016.

complies with its statutory duty.

Recommendation 9

We recommend that NIHE, in partnership with other service providers, develops improved systems for regularly monitoring and measuring the extent of rough sleeping throughout Northern Ireland to determine if action currently being taken is adequate.

Challenges ahead

- 4.32 The role of social housing has changed over the last thirty years. As owner occupation and the private rented sector have grown, social housing has increasingly provided homes for unemployed and low income households. This is clearly demonstrated by the fact that almost 80 per cent of all current social housing tenants receive housing benefit⁷⁹.
- 4.33 Most of the welfare reforms underway in Great Britain have been, or are due to be, introduced in Northern Ireland. However, an agreement was reached with the UK government for additional budget to support the implementation of a range of mitigation measures until March 2020. A 2013 study⁸⁰ on the impact of welfare reforms in Northern Ireland estimated that reductions in Housing Benefit would result in a loss to the Northern Ireland economy of around £75 million each year, and that around 87.000 households would be affected which may lead to an increase in the

number of homeless presenters.

- Authorities indicated that two thirds considered that the 2010-15 welfare reforms increased homelessness in their area. The National Audit Office has recently reported⁸² that ending of private sector tenancies is now the biggest single driver of statutory homelessness in England. In addition, it appears likely that the decrease in affordability of properties in the private rented sector, of which welfare reforms are an element, have driven this increase in homelessness.
- 4.35 Constrained public finances, the growing number of older households, increasing demand for social housing and welfare reform present significant challenges for both the Department and NIHE in dealing with homelessness.

"The full impact of Welfare Reform is unclear although we do know that changes will have a significant negative impact which is likely to see an increase in homelessness".

A third sector view

⁷⁹ Facing the Future, Consultation on Northern Ireland Housing Strategy 2012-2017, Department for Social Development, 2012

⁸⁰ The Impact of Welfare Reform on Northern Ireland, Northern Ireland Council for Voluntary Action, October 2013.

⁸¹ The Homelessness Monitor: England 2016, Crisis, January 2016.

⁸² Homelessness, National Audit Office, HC 308, 13 September 2017.





Appendix 1: Methodology

Our approach included:

- 1. A literature review to better understand the nature and causes of homelessness and identify good practice in dealing with homelessness.
- 2. A postal survey of a small number of third sector organisations working with people who are homeless or threatened with homelessness. We asked them to provide their views on the effectiveness of the Homelessness Strategy and partnership working with government agencies and other third sector organisations.
- 3. Visits to a number of temporary accommodation hostels and other support service organisations to gain a better understanding of services provided to people who are homeless and the difficulties encountered by both providers and users.
- 4. Meetings with officials from NIHE, the Department for Communities, Department of Health and Department of Justice. We discussed the effectiveness of the strategic approach, governance arrangements, performance monitoring, partnership and joined-up working, good practice and examples of initiatives that are making an impact.
- 5. Analysis of official statistics on homelessness published by the Department for Communities and additional statistical data provided by NIHE to inform our report.
- 6. Requesting collation of data by the Department for Communities and NIHE on the extent of financial resources allocated to homelessness services across the public sector in Northern Ireland.

Annual Expenditure on Homelessness 2012-13 to 2016-17

Year	Supporting People	Housing Benefit	NIHE miscellaneous	Public sector	Grants to		Contracted	d Services	Other funding	Total (Note
	funding (Note 1)	(Note 2, 3, 4, 5)	accommodation costs (Note 6)	staff costs (Note 7)	NIHE	Others (Note 8) £'m	NIHE (Note 9) £'m	Public Health Agency	(Note 10)	11)
	£′m	£′m	£′m	£′m	£′m			£′m ´	£′m	£′m
2012-13	24.4	1.6	4.7	0.1	2.1	2.3	1.8	_	0.7	37.7
2013-14	25.6	8.9	4.6	0.1	2.7	2.3	1.7	0.1	0.7	46.7
2014-15	28.0	13.3	5.5	6.3	2.1	2.4	2.0	0.1	0.7	60.4
2015-16	27.4	12.8	5.2	6.4	2.2	1.8	2.3	1.0	0.7	59.8
2016-17	29.1	6.0	5.1	6.1	2.3	1.8	2.5	1.0	0.6	54.5
Total	134.5	42.6	25.1	19.0	11.4	10.6	10.3	2.2	3.4	259.1
NIAO estimate		22.0 Notes 2, 3		10.0 Note 7						32.0
Total including NIAO estimate	134.5	64.6	25.1	29.0	11.4	10.6	10.3	2.2	3.4	291.1

Source: Department for Communities and NIHE

Notes:

- 1. Supporting People is administered by NIHE and includes funding for temporary accommodation services and floating support services.
- 2. NIHE was unable to provide Housing Benefit expenditure for placements to voluntary sector hostels for 2012-13 and 2016-17. We consider it reasonable to assume that Housing Benefit expenditure was around £7 million for each of these years (£14 million in total).
- 3. Housing Benefit expenditure for placements to private single lets (individual private sector properties) was not available for 2012-13 and 2013-14. We consider it reasonable to assume that Housing Benefit expenditure was around £4 million for each of these years (£8 million in total).
- 4. Housing Benefit payments in many instances would have been payable whether claimants were statutory homeless or not. We have included Housing Benefit as it is a cost to the public purse and it is an important source of income to the third sector.
- 5. We estimate that Housing Benefit expenditure over the five years was around £65 million.
- 6. This expenditure includes NIHE Top Up payments for private single lets, NIHE hostel costs and expenditure on Bed and Breakfast/hotels placements.
- 7. Prior to 2014-15 NIHE staff costs were not split between Housing and Homelessness functions. We consider it reasonable to assume that NIHE Homelessness staff expenditure was around £5 million per year for 2012-13 and 2013-14 (£10 million in total).
- 8. Includes grant funding from the Department for Communities, Department for the Economy, NI Legal Services

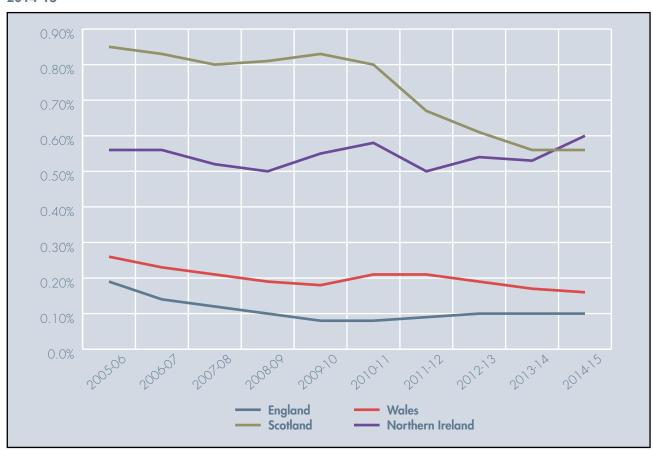
Annual Expenditure on Homelessness 2012-13 to 2016-17

Commission, the Public Health Agency, the Health and Social Care Board and the Belfast Health and Social Care Trust

- 9. Furniture storage contract, Dispersed Intensively Managed Emergency (DIME) Accommodation contract and from 2014-15 the Private Rented Sector Access Scheme contract.
- 10. Includes Health and Social Care Board funding for accommodation projects for young people, Western Health and Social Care Trust funding for Housing First pilot projects and Department of Justice funding.
- 11. We estimate that the total cost to the public purse is likely to be closer to £291 million over this period this includes the estimated Housing Benefit of £22 million (Notes 2 and 3) and NIHE staff costs of £10 million (Note 7) for 2012-13 and 2013-14.

Homelessness Trends in the United Kingdom

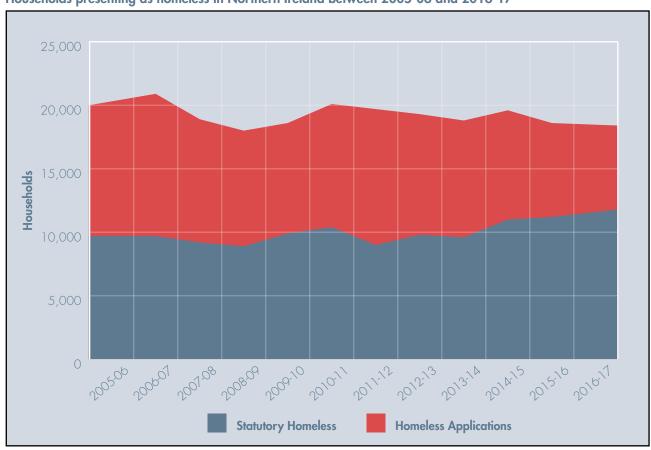
A comparison of statutory homeless acceptances across the UK as a percentage of population from 2005-06 to 2014-15



Source: Office for National Statistics, Department for Communities and Local Government, NIHE, Scottish and Welsh Government

Homelessness Trends in the United Kingdom

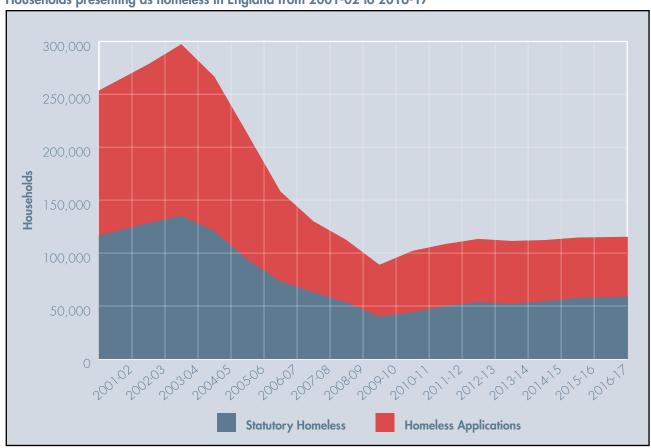
Households presenting as homeless in Northern Ireland between 2005-06 and 2016-17



Source: Department for Communities and NIHE

Homelessness Trends in the United Kingdom

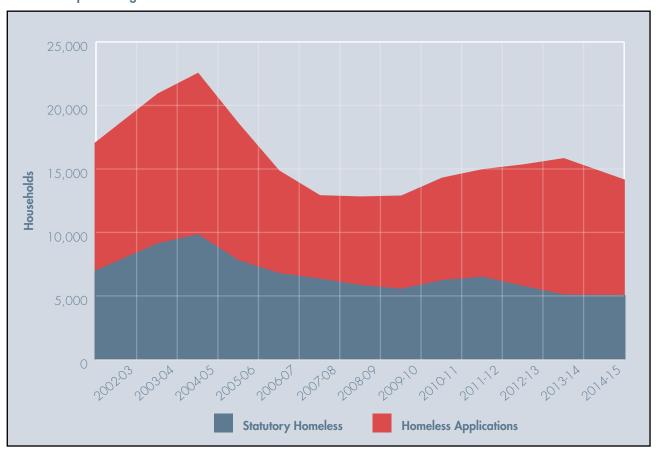




Source: Department for Communities and Local Government

Homelessness Trends in the United Kingdom

Households presenting as homeless in Wales from 2002-03 to 2014-15⁸³

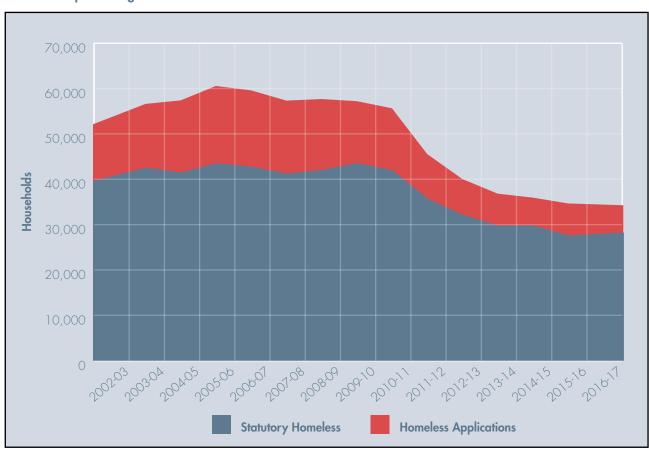


Source: Welsh Government

The Housing Act (Wales) 2014 included a number of changes to statutory homelessness legislation which were introduced in April 2015. It is not possible to directly compare the information collected under the current and previous legislation due to differences in the way cases of homelessness are assessed and recorded.

Homelessness Trends in the United Kingdom

Households presenting as homeless in Scotland from 2002-03 to 2016-17



Source: Scottish Government

Appendix 4: Homelessness KPIs set by NIHE 2012-13 to 2016-17

2012-13	2013-14	2014-15	2015-16	2016-17
KPI 8 – To implement the Homelessness Strategy with an emphasis on: • A revised Homelessness Strategy by May 2012; • Develop an associated Homelessness Action Plan by August 2012; • Complete a revised Belfast Rough Sleepers Strategy by February 2013; • Complete a fundamental review of temporary accommodation needs by November 2012; • Produce a revised template for Area Homelessness Action Plans by November 2012; • Produces at least 95% of homeless applications within 33 days.	KPI 8 – Implement the Homelessness Strategy: • Implement the Action Plan developed from the Strategy; • Monitor and quality assure Regional Action Plans; and • Process at least 95% of homeless applications within 33 days.	KPI 12 – Deliver the Homelessness Strategy Action Plan	KPI 4.2 – Deliver the Homelessness Strategy as reprioritised in July 2014. KPI 4.3 – Reduce the number of homeless presenters. KPI 4.4 Reduce the average length of time in temporary accommodation.	KPI 4.2 – Deliver the existing Homelessness Strategy as reprioritised in July 2014. KPI 4.3 – Reduce the number of Homelessness Presenters (Statutory Article 6A Housing) from end of March 2016 outturn figure. KPI 4.4 – Reduce the average length of time in temporary accommodation – from the end of March 2016 outturn figure. KPI 4.6 – Draft and have ready for publication a new Homelessness Strategy 2017-2022 – as per statutory requirement by March 2017. KPI 4.7 – Set baselines and proposed future targets for measuring the effectiveness of the Homelessness services in reducing homeless presenters and the amount of time full duty applicants spend in temporary accommodation.

Strategic Objective	Sub-Theme	Action	Status
To place homelessness	Early Intervention	1 – Collect and analyse data for all the ETHOS ⁸⁴ homeless categories by 2012/13.	Completed
prevention at the forefront of service delivery		2 – Measure the extent of hidden homelessness by 2012/13.	Not yet completed
		3 – Prevent repeat homelessness through Multi Agency Intervention. To be initiated by 2012/13 and fully operational by 2014/15.	Completed
	Pre-Crisis Intervention	4 – Produce an assessment framework to provide holistic assessment services outside of Belfast by Health and Social Services, to be in place and rolled out across all areas by 2014/15.	In progress
		5 – Produce an assessment framework to provide holistic assessment services outside of Belfast by Health and Social Services, to be in place and rolled out across all areas by 2014/15.	Completed
		6 – Provide pre-release housing advice, including tenancy sustainment to all prisoners, to be fully available by 2013/14 at all prisons/ detention centres.	Completed
		7 – Enhance partnership working among the core agencies in relation to young people leaving the juvenile justice system, to be in place by 2013/14.	Completed

Strategic Objective	Sub-Theme	Action	Status
To place homelessness prevention at the	Preventing Repeat Homelessness	8 – Introduce Tenancy Support Assessments to help Housing Executive tenants to sustain their tenancies, to be in place by 2013/14.	Completed
forefront of service delivery		9 – Develop peer support networks that can provide support to Housing Executive tenants to help them sustain their tenancies, to be in place by 2013/14.	Completed
		10 – Develop a referral mechanism to enable the provision of floating support services to vulnerable individuals in the private rented sector, to be in place by 2013/14.	Completed
		11 – Examine family mediation/family intervention programmes as a means to help young people sustain Housing Executive tenancies, to be completed by 2014/15.	Completed
To reduce the length of time households and individuals experience	Temporary Accommodation	12 – Develop "Pathway Models" to enable appropriate homeless households to move from temporary accommodation to longer term housing, to be in place by 2013/14.	In progress
homelessness by improving access to affordable housing		13 – Undertake a fundamental review of the current temporary accommodation portfolio with regards to its strategic relevance, financial viability and access criteria, to be completed by 2015/16.	Not yet complete
		14 – Examine the "Housing Led" model to consider its applicability to Northern Ireland, to be completed by 2015/16.	Completed
		15 – Reduce the average length of time in temporary accommodation from 46 weeks to 40 weeks over the life span of the strategy.	Completed

Strategic Objective	Sub-Theme	Action	Status
To reduce the length of time households and individuals	Permanent Accommodation	16 – Examine how Welfare Reform impacts on homelessness, to be undertaken by 2012/13.	Completed
experience homelessness by improving access to affordable housing		17 – Introduce a Northern Ireland wide Private Rented Sector Access Scheme, to be in place by 2014/15.	Completed
To remove the need to rough sleep	Rough Sleepers	18 – Evaluate existing services and information sharing arrangements in relation to the needs of those with alcohol addictions, to be completed by 2013/14.	Not yet complete
		19 – Agree service changes to ensure effective interventions, to be in place by 2013/14.	Completed
		20 – Consider a "Housing Led" model as an alternative to one providing a continuum of services, to be undertaken by 2013/14.	Completed
		21 – Produce a new Belfast Rough Sleepers Strategy to be available by 2014/15.	Completed
	Addiction Services	22 – Develop a mechanism which will enable all agencies to refer their clients to addiction services, to be introduced by 2014/2015.	In progress
To improve services to vulnerable homeless households and individuals	Domestic Violence	23 – Continue to provide support for the domestic and sexual violence helpline service.	Completed
		24 – Support the MARAC process through the provision of accommodation and advice services. (Multi-Agency Risk Assessment Conference)	Completed
		25 – Roll out of the Sanctuary Scheme as a MARAC option across Northern Ireland, to be in place by 2013/14.	Completed
		26 – Review refuge provision by 2014/15.	Completed

Strategic Objective	Sub-Theme	Action	Status
To improve services to vulnerable homeless households and individuals	Sexual and violent offenders	27 – Seek the contribution of all appropriate agencies to the pre and post release risk management process, to be agreed and in place by 2015/16. (Sexual/violent offenders)	Completed
		28 – Introduce a case management approach for agencies to enable those deemed appropriate to make the transition to permanent accommodation taking account of risk assessment and management, to be in place by 2015/16. (Sexual/violent offenders)	Completed
		29 – Developing appropriate accommodation solutions for high risk offenders, to be in place by 2015/16.	Completed
	Migrant workers/ persons from abroad	30 – Undertaking research and an analysis of the need for a bespoke accommodation facility for women offenders, to be completed by 2012/13.	Completed
		31 – Assist PBNI in the implementation of their Accommodation Strategy for exoffenders.	Completed
		32 – Identify the specific needs, including the housing needs of the black and minority ethnic communities (BME) and consider options for improvements to existing services by 2013/14.	Completed
	Rural homeless	33 – Produce Homeless Action Plans setting out how homelessness services to rural communities can be improved, to be implemented from 2012/13.	Completed
		34 – Measure the extent of rural homelessness including the number of households and individuals presenting as homeless in rural locations, to be initiated by 2014/15.	Completed

Strategic Objective	Sub-Theme	Action	Status
To improve services to vulnerable homeless households and individuals	Youth homelessness	35 – Relevant agencies will set out their contribution to the development of preventative programmes that aim to reduce homelessness for youth client group, to be undertaken by 2012/13.	Completed
		36 – Review investment in current prevention programmes and initiatives and ensure resources are targeted at those young people most at risk and demonstrate improved outcomes, to be undertaken by 2014/15.	Completed
		37 – Review existing joint working arrangements, with particular reference to the delivery of information, assessment and support services, to be undertaken 2014/15.	Completed
		38 – Relevant agencies will set out their contribution to the development of a continuum of suitable supported accommodation services, which support clear and flexible pathways to independence, to be undertaken by 2014/15.	Completed

Westminster PAC Recommendations 2003-0485

The extent of homelessness and the effectiveness of measures to prevent it

- NIHE's homelessness strategy should include firm, measurable targets for reducing homelessness overall, and for meeting the particular needs of homeless presenters, especially very vulnerable groups.
- 2. We expect the Department's control framework for NIHE to include specific performance targets to underpin the £24 million it allocates annually to NIHE to provide homelessness services, and the additional £28 million that will be required to implement the homelessness strategy.
- 3. When it is finally produced, we will expect the new strategy to include wide-ranging and imaginative measures to tackle potential causes of homelessness at source. Given that numbers presenting as homeless have risen by almost 50 per cent in the last three years, it should include challenging targets for achieving reductions in this rate of increase.
- 4. In order to ensure that the impetus for improvement is maintained over time, it is crucial that NIHE continues to work closely with the Office of the Deputy Prime Minister on homelessness matters. It is also essential that NIHE benchmarks its performance in all of its housing services, including homelessness, against that of other UK housing authorities, on a regular basis. Any relevant good practice that has been developed must be applied as quickly as possible in Northern Ireland.

The quality and cost of temporary accommodation provided

- 5. NIHE did not carry out economic appraisals in accordance with Departmental guidance before undertaking three of its capital investments. We expect Departments to ensure that proper economic appraisals are carried out, in accordance with current guidance, for all relevant investments.
- 6. The unsuitability and high cost of B&B accommodation are widely acknowledged. The Committee considers that NIHE's aim to stop using B&B accommodation as quickly as possible is more likely to be achieved if NIHE sets specific targets for gradual reduction, in addition to the overall target for discontinuing its use altogether.
- 7. Until such time as B&B use is eradicated for all but emergency use, we urge NIHE to make strenuous efforts to ensure that the rents it pays are as close as possible to the Housing Benefit limit, consistent with ensuring an adequate standard of accommodation for its clients.

Westminster PAC Recommendations 2003-0485

The extent to which homeless clients' needs are met

- 8. We welcome NIHE's assurance that it now processes over 95% of its homeless applications within its 33-day target and expect this level of performance to be maintained, or bettered, as a result of implementing the homelessness strategy.
- 9. It is essential that the programme of inspections of private sector temporary housing, established by NIHE in September 2003, is comprehensive and that its results are documented fully. We will expect swift and effective remedial action to be taken in cases where serious concerns are raised.
- 10. The letting of the contract for the storage of homeless persons' furniture exhibited a number of shortcomings including the fact that it was not advertised in accordance with EU procurement requirements. We expect NIHE to ensure that all procurement exercises comply fully with these requirements.
- 11. We would like all public bodies in Northern Ireland to be reminded that we always expect clear evidence that contracts have been awarded in line with established procedures.

NIHE's performance in minimising length of stay in temporary accommodation

- 12. NIHE clients are currently spending 97 days in B&Bs, on average. NIHE's target date of eliminating the use of B&Bs for families with children by April 2004 should be regarded as the latest acceptable date.
- 13. We urge the Department to review its projections for new building requirements, and to assess whether the annual £75 million it grants annually to Housing Associations, supplemented by £25 million from their own funds, and is adequate to provide enough new homes, in the right places.
- 14. It is unsatisfactory that the Department did not take action sooner to obtain sufficient management information to enable it to exercise proper control over NIHE's activities. We therefore regard the introduction, in September 2003, of NIHE's new homeless management information system as an important step forward. We will expect the Department and NIHE to make full use of the data produced to monitor and evaluate the implementation of measures contained in the homelessness strategy, and to target resources to where they are needed most. We also expect the data produced to contribute to improvements in NIHE's service to its clients and to much more rigorous monitoring of NIHE's performance by the Department.

NIHE Update on the Key Themes of the Re-Prioritised Strategy – January 2017

Explore a Housing Options approach

NIHE's pilot Housing Solutions & Support approach is currently operational in Belfast, Causeway and South Down Area offices and NIHE plans to introduce the approach across all its Areas by March 2018.

Introduce a Common Assessment Framework

This initiative would provide a standardised system to all service providers for assessing and identifying the support needs of all homeless applicants regardless of where they present for assistance. NIHE expected to have a system specification by March 2015.

In January 2015 a workshop with service providers identified the core components of a Common Assessment Framework which NIHE introduced to its front line offices. A final version was introduced within NIHE in February 2017 and will be monitored as Housing Solutions and Support is expanded across NIHE. The framework will be introduced across the homelessness sector during the lifetime of the Homelessness Strategy 2017-22.

Introduce a Central Access Point

A Central Access Point provides remote access to a single point of contact with information on current availability of accommodation and support services. NIHE expected to have a system specification by March 2015.

In January 2015 a workshop with service providers identified a variety of potential models ranging from high specification web based services to low technology contract information only services. A live time vacancy system will be delivered by March 2017 and operational within the lifetime of the Homeless Strategy 2017-22.

Housing First Approach

The Housing First approach provides hard-to-reach homeless with wrap-around support and other services in their own independent accommodation rather than in a hostel. NIHE aimed to independently evaluate an existing pilot scheme by March 2015.

An evaluation completed in June 2016 resulted in funding being made available for a Belfast Housing First service in 2016-17. It is hoped that additional funding will be approved for further similar services throughout Northern Ireland.

NIHE Update on the Key Themes of the Re-Prioritised Strategy – January 2017

Sustaining Tenancies Programme

This includes a range of measures which provide tenants with support to help maintain their tenancy, or to prevent their tenancy breaking down. Work carried out by NIHE includes:

- Training of staff in Area offices to identify any vulnerabilities or floating support needs of tenants;
- Provision of Floating Support Services funded by Supporting People;
- Introducing a Private Rented Sector Access scheme which includes tenancy sustainment obligations; and
- Introducing a Starter Pack scheme for new tenants.

Appendix 8: Annual Expenditure on Temporary Accommodation 2012-13 to 2016-17

Year	Supporting People	Housing Benefit	NIHE miscellaneous accommodation costs	Contracted services	Total
	£′m	£′m	£′m	£′m	£′m
2012-13	19.9	1.6	4.7	1.8	28.0
2013-14	20.1	8.9	4.6	1.7	35.3
2014-15	21.6	13.3	5.5	2.0	42.4
2015-16	21.0	12.8	5.2	2.3	41.3
2016-17	23.3	6.0	5.1	2.5	36.9
Total	105.9	42.6	25.1	10.3	183.9
NIAO estimate (see Appendix 2)		22.0			22.0
Total including NIAO estimate	105.9	64.6	25.1	10.3	205.9

Appendix 9: Funding arrangements for Temporary Accommodation

NIHE hostels	Funded through Housing Benefit and an associated eligible service charge. Supporting People funds support staff and other support related costs. If residents are not entitled to Housing Benefit the costs are paid through the household's personal contribution. Any shortfalls in the running costs for these hostels are met by NIHE.
Third sector hostels	Funded in a similar way to NIHE hostels with residents' rent and service charges eligible for Housing Benefit. Supporting People funds support staff and other support related costs. Occasionally voluntary sector hostels apply a service charge to residents that are not eligible for Housing Benefit and so payable by the residents directly.
Private single lets	NIHE Area offices advertise for single lets depending on demand for accommodation in their areas. Private landlords enter into an agreement with NIHE to place their accommodation on a register (the Bed Bureau) and a rate is struck for the weekly cost which is generally \$20-\$30 above the Local Housing Allowance (i.e. the maximum amount of Housing Benefit) for a particular household. NIHE pays landlords this Discretionary Housing Payment ('top-up') with the remaining cost being met through Housing Benefit or the tenant's own personal contributions.
Bed and Breakfasts and Hotels	Costs range from £45 to £90 per night (in peak periods). The rate for each room is agreed by NIHE Area offices at the time of placement for an agreed amount of days. These placements are eligible for Housing Benefit payments at a reduced level compared to hostels and private sector lets.
Dispersed Intensively Managed Emergency hostels	A $\pounds 4$ million four year contract is currently in place to provide 70 units of accommodation for homeless singles in the Belfast area. NIHE receives rental income on these units (in the form of Housing Benefit) of $\pounds 300,000$ to $\pounds 350,000$ per year and this is offset against the contract cost. Supporting People funds support services within the DIME accommodation.

Appendix 10:

Bodies required to take the Homelessness Strategy into account when exercising their functions

- Health and Social Care Board
- Public Health Agency
- Health and Social Care Trusts
- Education and Library Boards (now the Education Authority)
- Registered Housing Associations
- District Councils
- The Secretary of State (in relation to any function exercisable in connection with prisons in Northern Ireland)
- The Probation Board for Northern Ireland
- The Department of Education
- The Department of Health, Social Services and Public Safety (now the Department of Health)
- The Department for Social Development (now the Department for Communities)
- The Department for Employment and Learning

NIAO Reports 2016 and 2017

Title	Date Published
2016	
Governance of Land and Property in the NI Housing Executive	07 January 2016
Continuous Improvement Arrangements in Policing	08 March 2016
Local Government Code of Audit Practice	31 March 2016
Managing Legal Aid	21 June 2016
Contracted Training Programmes	28 June 2016
Renewable Heat Incentive Scheme	05 July 2016
The National Fraud Initiative: Northern Ireland	07 July 2016
The Rivers Agency: Flood Prevention and Management	13 September 2016
Local Government Auditor's Report 2016	20 September 2016
Northern Ireland Public Sector Voluntary Exit Schemes	11 October 2016
Managing Emergency Hospital Admissions	08 November 2016
Financial Auditing and Reporting: General Report by the Comptroller and Auditor General for Northern Ireland – 2016	06 December 2016
2017	
Continuous Improvement Arrangements in Policing	04 April 201 <i>7</i>
Management of the Transforming Your Care Reform Programme	11 April 201 <i>7</i>
Special Educational Needs	27 June 2017
Local Government Auditor's Report	05 July 2017
Managing children who offend	06 July 201 <i>7</i>
Access to finance for small and medium-sized enterprises (SME's) in Northern Ireland	26 September 201 <i>7</i>





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