

Introduction

1. Over the past decade, Scotland has seen significant changes in its approach to tackling homelessness. World leading legislation, based on the principle of extending rights to housing for homeless households, have provided the context for developing new and innovative approaches to prevention.
2. However, the establishment of the Homelessness and Rough Sleeping Action Group in September 2017 with objectives including the ending of rough sleeping, marked a recognition that more needs to be done as rough sleeping is set to increase again, and homelessness is projected to increase unless a different approach is developed.
3. The Group has agreed that the aim for ending rough sleeping must be to get to zero, and to go on to sustain this position through shifts to effective prevention, identifying prevention as one of six workstreams. Although the Group's work is divided between ending rough sleeping (Question 2), transforming temporary accommodation (Question 3) and ending homelessness (Question 4), it should be noted that measures for preventing rough sleeping also impact on the need for temporary accommodation and prevention of homelessness more broadly.

Background

4. Against the background of extending housing rights and the phasing out of 'priority need' in Scotland in 2012, approaches to preventing homelessness have shifted significantly since 2010 with the adoption of 'housing options' by local authorities and their partners.
5. The focus on person centered, individual approaches to dealing with housing crisis on the 'front line' have been supplemented by the development of five local authority led Housing Options Hubs to share practice at a strategic level . The approach has led to falling homelessness applications in Scotland and a Housing Options Training Toolkit is being developed for launch in 2018.
6. Despite this, it has become evident in recent years that simple rights to housing will not address the issue of homelessness for many, particularly those with more complex needs who are at high risk of rough sleeping.
7. It is also evident that despite progress in relation to actions on prevention due to housing options when individuals approach local authorities, a continuing level of 34,100 applications a year in Scotland (2016/17) and a rise in both recorded and visible rough sleeping in recent statistics indicates a need for a national shift in ensuring early intervention and prevention of homelessness are embedded across public bodies in Scotland.
8. The current framework for prevention is significant for Action Group considerations on what should happen next in Scotland. It provides a foundation of existing activity and structures to utilise and, as importantly, indicates the shift in thinking and culture in recent

years towards a recognition that preventing homelessness is not just the responsibility of housing services.

9. Statutory Guidance on the Prevention of Homelessness was published by the Scottish Government in 2009, which highlighted this key principle that remains significant to outlining our proposed next steps:

‘Our ambitions are universal - we want to reduce inequalities in a variety of policy areas, to have the same outcomes for all and for all to have the same opportunities.’

10. The cost of not preventing and responding effectively to rough sleeping is high, in human, societal and monetary terms. In the context of significant budgetary constraint for public services in Scotland, there is a compelling economic case for prioritising evidence based, effective preventative spend initiatives to end rough sleeping.

11. This will require a cross sector, cross policy multi agency response, backed by resource, utilising person centred approaches, existing evidence and legislative powers with the common national objective of ending rough sleeping in Scotland.

HARSAG DISCUSSIONS ON PREVENTION

MAIN POINTS

12. The objective of ending rough sleeping is the second objective to be considered by HARSAG members. The Action Group has discussed the need to understand the profile of rough sleepers in Scotland, and their personalised and often complex needs, to better target prevention activity.

13. It has also agreed that more engagement and information sharing was needed with front-line support partners (police, NHS workers, prison staff, social care professionals and others) so that they can play an increased role in adopting a targeted pathways approach to homelessness prevention.

14. The Action Group has agreed that this was an important but underutilised resource for homelessness prevention, particularly for people leaving institutions such as prison, care, armed forces or hospital, as well as victims of discrimination and/or abuse.

15. There was agreement on the need for an Equality Impact Assessment (EQIA) be taken on any HARSAG recommendations to ensure that people with characteristics protected under equalities legislation are not disadvantaged or discriminated against. This would include consulting with specialist groups including Scottish Women’s Aid and LGBT Youth Scotland.

16. The Action Group agreed to develop a clear ‘prevention map’ which identified people at particular risk of rough sleeping and set out what was already in place (previous reports or existing frameworks), to inform the Action Group’s recommendations.

17. The purpose would be to identify existing recommendations, processes and pathways (e.g. Sustainable Housing on Release for Everyone (SHORE) standards), which the Group could reinforce, to ensure there are similar pathways for people leaving every public system

or institution and to identify issues and gaps where it would be necessary for the Group to make fresh recommendations.

18. A mapping exercise was identified as important to highlight that the time of leaving a public institution is not the only point at which people with experience of institutions become homeless or at risk of homelessness.

19. The Action Group also discussed how to build on the success of Housing Options, by ensuring timely assessments and assistance are carried out by the most appropriate agency. The Action Group agreed that interventions should be hardwired into the system in order to provide pathways to support people into stable housing with the support they need.

PREDICTABLE HOMELESSNESS - PATHWAYS FOR LEAVING INSTITUTIONS

20. Some groups of people are overrepresented within rough sleeper numbers in Scotland. 6% of homelessness applications came from people leaving institutions such as prison, care or hospital in 2016/17.

21. We know that transitions from institutions carry a high risk of homelessness and rough sleeping and ending discharge into homelessness will be an essential action if the objective of ending rough sleeping is to be achieved. However, it is not just at the point of leaving or immediate transition from the institution where a higher risk of homelessness is found, but at a later stage in people's journey.

22. These same risks of homelessness are found in other processes, such as the journey of those evicted from social housing. Homelessness in this context may also include the risks which precipitate people's entry into institutions rather than just the act of transition in and of itself. Institutions may address singular issues, eg prison, and not address the need that caused the entry into institutional care, so subsequent homelessness is not related to transition but failure to address need.

23. An analysis of statistics indicates a pattern of reduced numbers of people leaving institutions to make a direct homelessness application, but rising numbers at a later date. This indicates a strong message that pathways need to be developed early in the process of leaving institutions, but that support needs to be flexible enough to be available over a longer and ongoing period.

24. The policy landscape in Scotland offers a number of opportunities and drivers for influencing and making change through the establishment of clear, agreed pathways across a range of policy areas.

Care leavers and people who have been in care

25. Homelessness statistics for those leaving care reveal a picture of relatively small numbers applying as homeless directly from care (44 in 2016/17) but higher numbers applying as homeless at a later date (627 less than 5 years from leaving and 720 over 5 years). Who Cares Scotland cite Scottish Government figures showing that at least 21% of care leavers become homeless within five years of leaving care¹.

<https://www.whocaresscotland.org/who-we-are/media-centre/statistics/>

26. The Children and Young People (Scotland) Act 2014 extended rights to those leaving care, allowing them to draw on local authority support for longer. In preparation for this, the Scottish Government issued Guidance to Corporate Parents on developing Housing Options Protocols in 2013

27. Alongside the Housing Options Protocols Guidance, Staying Put Guidance was issued in anticipation of the 2014 Act. The consistent adoption by all of Scotland's local authorities of the "Staying Put" approach was highlighted by the Group as essential. This is key to enabling young people enjoy a transition from care to adult interdependence that more closely resembles that which is experienced by other young people.

28. End-of-care planning decisions should be based on meeting the needs of the individual, rather than age or legal status. By embedding the principles and values outlined in this guidance, corporate parents will help to achieve that, creating the conditions for improved practice and positive outcomes.

29. In 2017, the Minister for Local Government and Housing wrote to local authorities about their arrangements for preventing homelessness for those leaving care, with responses shared with the Local Government and Communities Committee as part of their inquiry into homelessness.

30. Significantly, most local authorities in Scotland indicated that they have existing corporate protocols to ensure care leavers do not leave into homelessness, with a number highlighting the role of 'Champions Boards' in addressing this issue.

31. More broadly, the Getting It Right For Every Child approach focusses on improving outcomes and supporting the wellbeing of our children and young people, putting the child or young person at the centre of those that support them. For those leaving care, the Centre for Excellence for Looked After Children in Scotland (CELCIS) was created in 2007 and has been central to the development of the Scottish Care Leavers Covenant which supports corporate parents to improve outcomes for those leaving care.

32. Perhaps most significantly, the current Independent Care Review offers an opportunity to inform approaches to preventing homelessness. The Review is currently in its Discovery phase; a fact finding and evidence gathering exercise primarily driven by the voices and experiences of children and young people with experience of care. The conclusions from the Discovery phase will inform and guide the next stages of the Review; Journey and Destination.

Leaving Prison

33. Against the background of falling numbers of repeat homelessness in Scotland in recent years, the numbers of those with experience of prison making repeat applications has remained relatively high.

34. Addressing homelessness amongst prison leavers has been recognised at a national level and was an important theme for the Ministerial Group on Offender Reintegration (MGOR). The MGOR instructed that an improvement project be developed to test practical changes in pre and post liberation practice to secure the best possible housing outcomes for offenders and to address the revolving nature of offending and homelessness.

35. Since then, the Scottish Prison Service has worked with partners to develop the Sustainable Housing On Release for Everyone (SHORE) Standards, launched in December 2017. They outline minimum standards for housing advice, information and support for people on remand to ensure that the housing needs of individuals are handled in a consistent way across Scotland.

36. The Standards aim to provide a mutually agreed housing protocol which will detail the multi-agency integration required to secure sustainable housing outcomes. It sets out good practice in the coordination between the SPS and housing providers, and the planning of offenders' housing needs within custody, so that when offenders are liberated from prison, actions will be taken in a planned manner, reducing the instances of emergency homelessness wherever possible.

37. Work is underway in Glasgow on a community custodial unit focusing on the prevention of later homelessness and an ongoing connection between women in the custodial unit and housing providers. This is an opportunity to look at connections at the point of entry into institutions rather than just at the point of transition. This is a potentially significant development as it embeds from prevention from the start as the population envisaged for the units would not be the already statutory thorough care cohort.

38. Another significant issue is that of engagement. Recent years have seen a recognition across various sectors that, a particularly for people with more complex needs the concept of 'non engagement' as a reason not to assist needs to be reviewed and the same may apply to 'securing engagement'.

39. The Scottish Prison Service's Throughcare Support Officers achieve positive outcomes – but only engage just over 20% of the total prison population. The Action Group agreed that the inclusion of Peer Mentors can be transformative with regard to securing engagement, from Core Screen onwards, as a key aspect of securing a planned approach to Housing Options and homelessness prevention for prison leavers.

Veterans of the Armed Forces

40. In a parallel with homelessness statistics for care leavers, numbers leaving the armed forces into homelessness are relatively small (46 in 2016/17) but rise some time afterwards (211 less than 5 years from leaving and 588 more than 5 years leaving in 2016/17).

41. In 2015, the Veterans Commissioner produced reports on Transition in Scotland and Provision of Information on Housing for Service Leavers and Veterans in Scotland, highlighting the issues experienced by some veterans who struggled to find out about the housing options available to them and their families. As a result, the Scottish Government have provided funding to Housing Options Scotland to support their Military Matters project, including revised guidance and improved information.

42. In 2010, a change was made to legislation in Scotland to allow veterans to establish a local connection in making a homelessness application to the area in which they had been based, previously was not regarded as forming a local connection.

43. Organisation such as Helping Heroes have taken a multi agency approach including housing providers in their team to offer a service to veterans. However, while transitions both

directly and longer term from institutions such as the armed forces are key issues in preventing homelessness, any pre existing vulnerabilities (such as addiction) before entering an institution can also be crucial, indicating the importance of engaging at a much earlier stage.

Leaving Hospitals - Health and Mental Health

44. There have been significant developments in building links between health and homelessness policy in Scotland in recent years. Significantly, 2018 will see the publication of data linking health and homelessness presentations, which presents the opportunity to evidence the need for a shift in the role of health services in preventing homelessness. Earlier evidence from Fife suggested a higher use of health services by homeless people than the general population.

45. In 2015, the Scottish Public Health Network produced a paper “Restoring the public health response to homelessness”², which identified preventing homelessness and the risk of homelessness through much earlier intervention and prevention activity as an area where the NHS can and should play a much greater role.

46. The establishment of a national cross sector Health and Homelessness Group facilitated by NHS Health Scotland and the appointment of a Director of Public Health as a ‘homelessness champion’ have served to strengthen these links further in the wake of the report.

47. Shelter Scotland is also delivering a pilot project jointly with Fife Council and NHS Fife to work with people presenting at the emergency department of Victoria Hospital in Kirkcaldy who are homeless. The project ensures that dedicated support staff based in the emergency department work with people who are admitted and are homeless to develop a holistic and person centred plan, with multi-agency support.

48. A ‘Healthcare in Custody ‘ service exists in Scotland to identify links with the number of people in police custody who report “no fixed abode”, and the problems this can cause NHS staff trying to process referrals to follow-up care. This offers opportunities between points of contact between the NHS and the police to trigger follow-up care as the current system does not always enable that.

49. The Scottish Government published its Mental Health Strategy 2017-2027 last year. It recognises the clear link between poor mental health and people experiencing housing problems and homelessness. By focussing on prevention and early intervention and providing joined up accessible services we can create a nation where mental healthcare is person-centred and recognises the life-changing benefits of fast, effective treatment.

50. Within the context of the national Mental Health strategy, Health and Social Care Partnerships (HSCP) are being asked to develop their own 5 year strategy. For example, in the NHS Greater Glasgow and Clyde Board area, across the six HSCPs the draft Mental Health strategy has a clear link to Adverse Childhood Experiences (ACEs), which have a strong link to increased risk of later homelessness as well as a range of other vulnerabilities. This has raised questions about the potential for a shift in resource to this kind of approach

which will begin to much more effectively address the vulnerabilities which increase greater risk of homelessness.

51. Additionally, there is emerging thinking around the use of a housing options approach for people leaving mental health hospitals and there is evidence of the positive input that a housing options approach can have in preventing hospitalisation of older people, and accelerating discharge from hospital back to community rather than institutional care. This approach is in place in Glasgow HSCP and will be externally evaluated over the next few months and learning should be disseminated across Scotland.

PEOPLE AT RISK OF HOMELESSNESS - PATHWAYS TO PREVENTION

52. While people leaving institutions offers the potential for particular forms of early intervention and prevention, we also know that certain other groups of people will be at particular risk of homelessness.

This means that we can anticipate potential risk areas and establish pathways to address what may not be 'predictable', but can be 'expected'. While 'particular groups' are identified below, we should avoid assumptions that people at risk of homelessness will fall into one particular group or can be defined by one particular issue.

Women who have experienced domestic abuse

53. Equally Safe, the Scottish Government strategy for preventing and eradicating violence against women and girls, was updated in 2016. For women and their families who are fleeing domestic violence, it sets out a key priority that interventions are early and effective, preventing violence and maximising the safety and wellbeing of women, children and young people. It highlights the importance of health, education, justice, social work and housing all working together to respond effectively to violence.

54. Scottish housing legislation currently offers the framework for different approaches, including the transfer of tenancy from a domestic violence perpetrator and a pathway for the perpetrator to alternative equivalent accommodation.

People who have experienced childhood poverty and/or childhood trauma or adverse experiences

55. The potential impact of Adverse Childhood Experiences (ACES) has been increasingly identified in recent years for its role in experiencing later homelessness and developing more complex needs. This indicates not only the importance of preventing homelessness amongst households with children wherever possible, but of the importance of embedding psychologically informed approaches within services.

56. Childhood poverty will be an indicator of homelessness later in life. The Child Poverty Act, legislating to introduce statutory child poverty targets, has been introduced in Scotland, establishing a Poverty and Inequality Commission, and committing £50 million to the Tackling Child Poverty Fund.

Young People

57. Young people continue to make up approximately a third of homelessness applications in Scotland, despite falls in applications in recent years. Most of these applications are the result of relationship breakdown or being asked to leave. The development of housing options approaches to prevention has led to increased use of mediation and mentoring services in recent years where this can play a role, with the Scottish Government supporting the Scottish Centre for Conflict Resolution at a national level.

58. A clear message from feedback of those that have experienced homelessness is the potential for poor outcomes for young people provided with temporary accommodation which is not suitable for their needs including B&Bs and a lack of options beyond settled accommodation e.g. short term respite. We also know that young LGBT people will experience particular risks of homelessness.

Alcohol and Drugs

59. The Scottish Government published the Road to Recovery in 2008 which focussed on ensuring that people with a history of drug and alcohol problems were able to move towards becoming active and contributing members of society.

60. The Road to Recovery is currently undergoing a refresh in recognition of the fact that the drug problem is changing and that we need to adapt services to provide better outcomes for those most at risk, who face complex social and medical issues. In its Programme for Government announced in September 2017, the Scottish Government highlighted that an extra £20 million would be made available to addiction services from 2018/19.

Homeless people with 'no recourse to public funds'

61. The issue of people with no recourse to public funds offers particular challenges to both legislators and service providers in Scotland due to reserved powers on immigration. The measures in the 2014 and 2016 Immigration Acts, (not currently in force) including penalties on landlords who let out a property to a migrant without a 'right to rent'; have been identified by the Scottish Government as further marginalising vulnerable families, creating additional pressure on front line homelessness services and consequently imposing additional pressures on the finances of local authorities in Scotland.

62. The New Scots Refugee Integration Strategy sets out a vision for a welcoming Scotland where refugees and asylum seekers are able to rebuild their lives from the day they arrive. It sets out a range of actions designed to support refugees to enable them to settle in to their new home, and as a result are able to settle and integrate successfully.

People who have experienced relationship breakdown

63. Most homelessness applications in Scotland are from those experiencing non violent relationship breakdown. While it may have previously have been regarded as a 'personal' rather than public policy issue, the anticipation and knowledge of this being such a driver of homelessness each year provides an opportunity to consider options for how homelessness can either be prevented or resolved as quickly as possible. Considering further options for

conflict resolution and, crucially, breaking down social isolation, to prevent homelessness could be an essential step in any national package of prevention measures

EVICTIONS AND RENT ARREARS

64. Statistical analysis published by Shelter Scotland in March 2017 identified that the majority (95%) of all evictions in the social sector are undertaken in response to rent arrears. This analysis also highlighted that evictions are on the increase – there has been a 24% increase in evictions in the social rented sector in the last two years.

65. This is despite the introduction through the Housing (Scotland) Act 2010 of Pre-Action Requirements. It is anticipated that this is a situation that is set to get worse, particularly with regard to the rollout of Universal Credit. For example, when there was been a full rollout of Universal Credit in East Lothian, there was a 13% increase in homelessness in that year. The private rented sector also continues to be a significant and growing source of homelessness in Scotland, with nearly 20% of homeless applicants living in the private rented sector immediately before applying as homeless, compared to 15% in 2011-12.

66. Specifically with regard to the social rented sector, the Action Group highlighted the need to see more consistent adoption of best practice with regard to the management of rent arrears: which would include :

- :The development of ‘early warning systems’ to identify vulnerable tenants. East Dunbartonshire Council use a web-based diagnostic tool to help identify vulnerable tenants and offer preventative assistance, which has reduced the volume of notices of proceedings issued, eviction decrees granted and actual evictions.

- A shift towards early intervention and increased engagement with tenants. Glasgow Housing Association (GHA) changed its emphasis from legal action to early intervention, increasing its direct engagement with tenants, with a focus on pre-tenancy support, early support for tenants falling into arrears and widening the rent payment options. It also improved its collaboration with the benefits team at GCC. This led to an almost 20% reduction in evictions and a 27% decrease in rent arrears.

HOUSING OPTIONS AND PREVENTION PATHWAYS

67. Any future Prevention pathways or recommendations for change in Scotland must consider how they can link to, benefit from, and strengthen, current housing options approaches to homelessness prevention in Scotland. Strong frameworks and innovative practice developed by local authorities and their partners, appropriate to local circumstances have been developed.

68. Housing Options Hubs provide a framework for sharing practice and the Housing Options Training Toolkit currently being developed offers an opportunity to focus on specific groups and particular risks in providing a comprehensive training resource. Housing Options Guidance was published in the wake of the Scottish Housing Regulator report on the issue in 2014.

69. Recommendations on prevention pathways and housing options raise this issue of whether a legal duty to prevent homelessness, similar to Wales and latterly England should be created. This raises important questions for the future delivery of housing options approaches to prevention.

70. In looking at delivery models in the rest of the UK, we have to consider the potential differences in approach to this duty against the background of stronger housing rights for homeless households that exist in Scotland. Operationally, it could be argued that Scotland already has a prevention duty, under the 2001 Act, local authorities have a duty to take homelessness applications from people threatened with homelessness, as well as from people who are homeless.

71. However, it makes sense to acknowledge that where there are identified tensions between the delivery of housing options approaches and legislative duties in providing settled accommodation, continued uncertainty as to whether housing options is the 'right thing to do' in individual cases is unlikely to benefit service providers or those facing homelessness and requires a strong message on prevention activity.

72. Potential legislative change is not only about the establishment of a prevention duty. In the context of considering how to achieve the best possible outcomes, particularly for those with the most complex needs, both intentionality and local connection provisions within Scottish homelessness legislation raise the issue of potential barriers within the system at the same time as more 'psychologically informed' approaches are being adopted on prevention.

CONCLUSIONS

73. Any actions on prevention of rough sleeping and homelessness needs to address a wide range of public services, including the current and future social security systems in Scotland and the housing safety net they deliver, as well as health, social work, criminal and community justice.

74. Prevention approaches also need to be in place for those affected by welfare reform (and implications of rent arrears, potential evictions etc) and people who have left the social housing system.

75. On the basis of the range of areas covered in this paper we would ask the Action Group to agree to the following conclusions:

When homelessness is predictable, we should prevent it:

- Public bodies (care, prison, mental health, armed forces) – not to discharge into homelessness AND identify and respond to risk of becoming homeless at a later stage:
- Housing, and
- Connection to community, support networks, health & wellbeing, structure and purpose
- Specific responses to prevent homelessness, multiple exclusion and disadvantage for groups such as women experiencing domestic abuse, LGBT young people, people experiencing relationship breakdown, and people migrating from outside or within Scotland

- Longer term measures to reduce child poverty, and the impact of adverse childhood experiences and trauma

When people are at risk of rough sleeping, we should prevent it:

- Housing Options to prevent homelessness by acting when and where the risk of homelessness occurs
- Prevention is about stopping homelessness happening; it is not enough simply to discharge into temporary accommodation – mediation and support to re-house should be applied to stop homelessness happening in the first place
- Create a ‘no wrong door’ approach where front-line public services act on behalf of or in concert with Housing Options, and the flexibility to delegate to commissioned services and voluntary sector where appropriate
- National training programme and ongoing accreditation to ensure needs of specific groups are addressed, and trauma-informed approaches adopted
- Housing Options have to have settled and secure housing options available with necessary support (Housing First where applicable), backed up by high quality low threshold emergency accommodation options where needed to protect mental health or security.

RECOMMENDATIONS

We propose the following recommendations to HARSAG members and that the following changes be implemented, using existing frameworks where they exist or through new legislative powers where these are required:

- Homelessness assessments should be made at a range of locations which have been identified as being points of regular contact with those that are homeless or are at risk of homelessness (e.g. health services), to ensure timely preventative interventions, that fit with the lives and schedules of those that require support.
- There should be 'no wrong door' for homelessness assessments to maximise opportunities to prevent homelessness.
- Allow the delegation of assessments to support Local Authorities in discharging their statutory function on assessment through partnership with wider public sector and third sector
- Utilise the purpose, culture and skills of Housing Options to focus on preventing people from becoming homeless .Ensure that secure, appropriate and sustainable housing with support where required is at the heart of housing options.
- Ensure an easily understood and clear national training programme and ongoing accreditation to ensure needs of specific groups are addressed, and psychologically informed approaches adopted including more informed approaches on so called 'non engagement'. – to be delivered to front line staff and made mandatory to staff in key roles
- Scottish Government should clearly articulate the pathways and interventions needed for particular groups (e.g. SHORE standards for prisoners,, housing options protocols for corporate parents) and ensure that these are consistently followed for people we know are at high risk of homelessness including:-
 - Leaving public institutions such as prison, mental health services, care, armed forces
 - Previous experience of public institutions such as prison, mental health services, care, armed forces
 - Groups with particular needs such as women who have experienced domestic violence, migrants, asylum seekers, refugees, people experiencing relationship breakdown, LGBT groups
 - People who have or are experiencing poverty and/or adverse childhood experiences
 - Those facing potential eviction from the social rented sector including particular approaches on rent arrears.