

# Homelessness Strategy 2014-2018

Preventing homelessness and making every contact count

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## 1.1 EXECUTIVE SUMMARY

House prices and private rents in Bath and North East Somerset have stayed high despite a national trend for a housing market slowdown. It is an area of high demand for social housing and contains some of the least affordable areas of the country for housing. The local area covers around 20kms of countryside from west to east and is serviced from the city of Bath and the principal towns of Keynsham and Midsomer Norton and Radstock.

The overall stock of social housing has remained broadly the same for the last 10 years and is now around 14% of all housing. It has been estimated that 3,400 new affordable homes are needed between now and 2031 in Bath and North East Somerset to meet the needs of people who can't afford market housing. Our housing delivery programme expects to achieve significant new provision within the next five years; however we cannot rely solely on the delivery and distribution of new housing to resolve the needs of all homeless people.

Demand for private rented accommodation, particularly amongst single people who are homeless or at risk of becoming homeless, greatly outstrips supply. Reforms mean that single people aged 35 or younger will only be entitled to shared accommodation rates of housing benefit so we are anticipating an increased demand for shared housing. Although levels of homelessness have not changed substantially since 2008 when the previous strategy was published there are considerable new challenges for the Council in tackling homelessness.

Areas of south west Bath where the predominant tenure is social housing, rank amongst the most deprived 20% of the country. Domestic abuse is a common cause of homelessness and accounts for the greatest cost to the health care services, making up 22% of the total cost (£3.7 million). Rates of domestic abuse are strongly correlated with socio-economic inequality in Bath and North East Somerset.

National evidence<sup>1</sup> suggests that 8 in 10 single homeless people have one or more physical health condition and 7 in 10 single homeless people have one or more mental health condition. Some of the causes of poor health are more prevalent in the single homeless population: for example, 77% of single homeless people smoke compared to 21% of the general population. As a result of their complex needs, single homeless people disproportionately use acute local health services at a cost four times more than the general population.

In developing this Strategy we consulted with the public, our partners and local stakeholders many of whom have been actively involved in our local Homelessness Partnership, to listen to their views and

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<sup>1</sup> 'Improving The Health Of The Poorest, Fastest': Including Single Homeless People In Your JSNA

concerns and we identified local issues from evidence based information. This has helped us to put together a delivery plan to support the Homelessness Strategy and respond to local needs.

There have been a significant number of achievements since the last Homelessness Strategy. However, with continuing demands and challenging circumstances, much more remains to be done and we are planning ahead and will work in partnership with others who can help deliver solutions. We have prioritised the government's 'Gold Standard' for homelessness prevention and aim to achieve it within the next five years, building on our past success and responding to the impacts of changing housing markets and social and welfare reform.

Our major challenges include:

- Demand for affordable housing currently significantly outstrips supply
- High housing costs both for rent or purchase
- Increased pressures on household incomes
- Meeting the needs of all residents across the whole geographical area
- Meeting the needs of households with complex needs
- Increasing problems in accessing private rented accommodation
- Developing solutions to future funding constraints
- Improving communications, knowledge and managing expectations

During the next five years we plan to strengthen our corporate commitment to prevent homelessness through the influence and scrutiny of the Health and Wellbeing Board. We will work with extended partnerships to tackle the underlying causes of homelessness such as low income and worklessness which affect the most disadvantaged people in our communities. An Equalities Impact Assessment demonstrates that this strategy has the potential to improve the health and wellbeing of vulnerable residents. In particular it is likely to have a positive impact on equalities groups such as women, disabled people, young people and older single homeless people, socio-economically disadvantaged and rural communities.

We plan to build on our successful approach to homelessness prevention, improve pathways into settled accommodation and make a big difference to the health and wellbeing of homeless people.

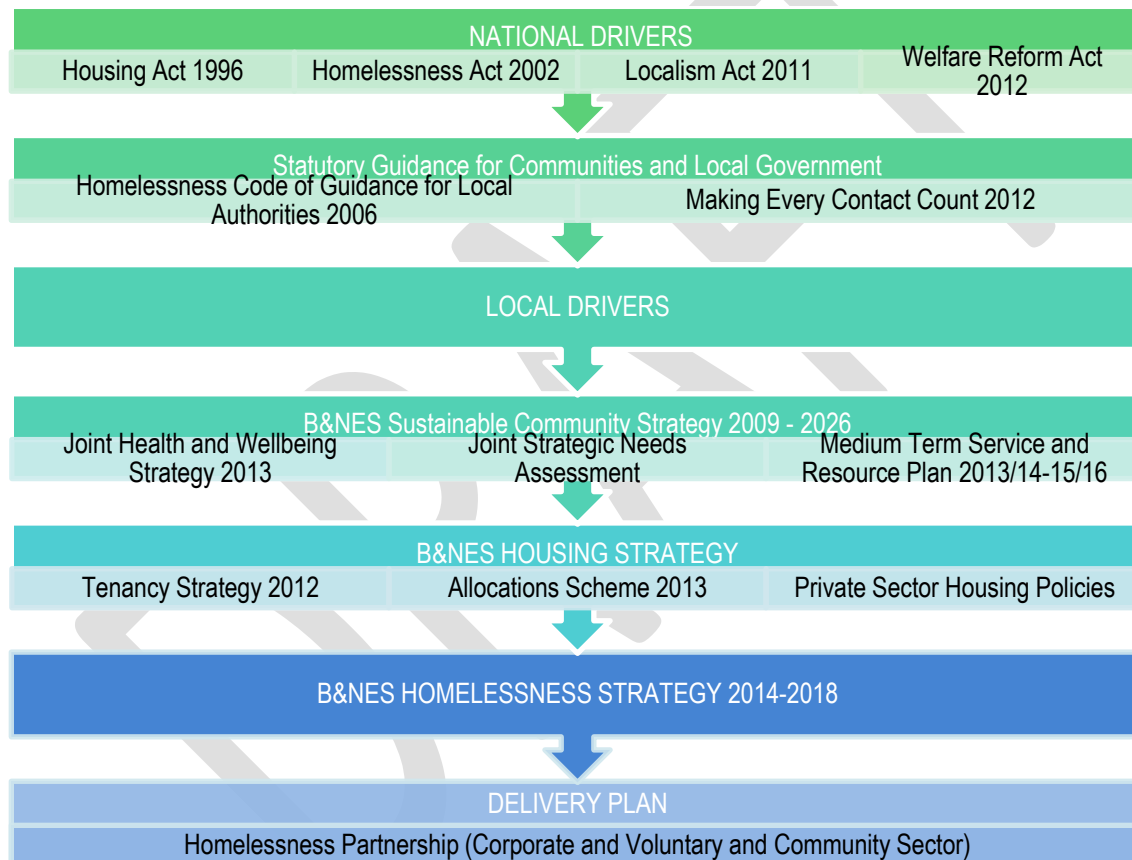
Cabinet Member for Wellbeing

[Date]

## 2 SHARED AIMS AND OBJECTIVES

### 2.1 THE BIG PICTURE

This Homelessness Strategy responds and relates to the Acts of Parliament and statutory guidance that set out the government's intentions for protecting homeless people, preventing homelessness and managing welfare benefits and support. The following diagram shows the main national and local strategies and plans taken into account by this Homelessness Strategy leading to a Delivery Plan that is implemented and monitored by the Homelessness Partnership:



### 2.2 NATIONAL DRIVERS

Since the **Homelessness Act 2002** the Council must have a Homelessness Strategy in place that sets out how it plans to prevent homelessness and make sure that there is sufficient accommodation and support for homeless people or anyone who is at risk of becoming homeless. The Council also has a range of duties to people who are homeless, and this includes advice and assistance and the provision of temporary accommodation. The main housing duty is to accommodate those who are unintentionally homeless and in priority need.

**The Homelessness Code of Guidance** explains how the Act should be implemented. In practice it is a guide that tells the Council how to review the effectiveness of its homelessness provisions and produce a new strategy every five years. It states the requirement that all organisations, within all sectors, whose work can help to prevent homelessness and/or meet the needs of homeless people in their district must be involved in the development of the strategy.

**Making Every Contact Count 2012** is the government's most recent report on preventing homelessness. It expresses how the government expects all local services to work together locally to make every contact with a homeless person count and to target funding and resources on early intervention initiatives for groups most at risk of homelessness. It contains five cross cutting themes and introduces an accreditation for council homelessness services called the Gold Standard which underpin the Delivery Plan for this Homelessness Strategy.

The government's vision statement:

*‘There is no place for homelessness in the 21st Century. The key to delivering that vision is prevention - agencies working together to support those at risk of homelessness.’*

Cross cutting themes:

- Agencies working together to target those at risk of homelessness
- Identifying and tackling the underlying causes of homelessness as part of housing needs assessments by referral to appropriate support
- Local authorities coordinating access to services for vulnerable people; multi agency action, case work, agencies responding flexibly
- Increasing access to the private sector; supporting people to remain in private sector tenancies
- A focus on youth homelessness.

**The Localism Act 2011** includes measures for ensuring that social housing is made available to people with greatest housing need by enabling flexible tenancies for social housing and changes to securing accommodation for homeless people. It meant that local authorities had to consider increasing mobility within the social housing sector by introducing these new flexibilities within their local context and formulate a Tenancy Strategy as a framework for registered providers of social housing in the area.

**The Welfare Reform Act 2012** is the governments' legislative framework for the biggest change to the welfare system for over 60 years. The intention of the Act is to give people on benefit increased personal responsibility for money management and improved incentives to work. Changes include Universal Credit which is a new single payment for people who are looking for work or on a low income and changes to rates of Housing Benefit such as a shared accommodation rates for single people aged 34 and under and cuts for working age social housing tenants with spare bedrooms.

## 2.3 LOCAL DRIVERS

**The B&NES Joint Strategic Needs Assessment** is the Council's live research and evidence base for local facts and intelligence for the area and includes data from the 2013 review of homelessness. It helps elected members, council officers and service providers understand and identify local priorities and to target services and understand how decisions impact on different communities in different ways. It establishes evidence that the prevention of homelessness through a raft of early interventions will reduce the risks of a wide range of negative health outcomes that are commonly experienced by homeless people and families.

**The B&NES Health and Wellbeing Strategy 2013** provides the big picture about current and future health and wellbeing needs of residents of Bath and North East Somerset. The **Health and Wellbeing Board** connects work with schools, local commissioners, including the Police and Clinical Commissioning Group and local delivery partners. Its objective is to narrow the health and inequalities gap between different geographical areas, communities, social and economic groups in the local population by improving the lives of those worst affected and champion the priority themes:

- Helping people to stay healthy
- Improving the quality of people's lives
- Creating fairer life chances

**The B&NES Medium Term Service and Resource Plan (MTRSP) 2013/14-15/16** includes savings from the Supporting People and Communities budget, which incorporates work on homelessness. In the short term the Council's reserves and commercial sources of income, together with its long term financial plans and efficiencies, put it in a relatively strong position. There are also key demographic changes, with a projected 40% increase in the older population by 2026 creating a significant additional financial pressure and an increase of the entire population of 12% by the same date.

In this context, the Council is faced with meeting increasing levels of need with shrinking resources. This means the focus of the money available will be on the most vulnerable groups of people to support their independence and wellbeing and delaying or eliminating the need for more acute, higher cost services. Services commissioned from community and independent sector organisations will reflect this principle, with higher access thresholds being applied. Since planning to meet the requirements of the MTRSP, Central Government has published its Spending Review for 2015/16, the full implications of which are yet to be fully assessed by the Council.

**Supporting People and Communities (SP&C)** has implemented theme-based sector reviews with the intention of finding the required savings through a strategic approach rather than a top-slicing exercise, minimising wherever possible the impact on service users. Commissioned services were looked at within the following groupings:

- Advice, Information & Advocacy

- Housing related support
- Community Services
- Day Services

Using data on performance, utilisation and demand, feedback from providers and stakeholders (including service users) and intelligence on duplication of provision, the reviews have informed the development of commissioning plans for 2014/15 onwards [Sector Review Outcomes](#). SP&C will continue to focus on prevention and early intervention as the cost benefit of this approach has been clearly evidenced ( '[The Cost Benefit of Housing Related Support in Bath and North East Somerset. Sitra 2011](#)'). Services commissioned will provide quality and choice, they will work in partnership, be person centred, outcome focused, accessible, and promote independence. They will, necessarily, be targeted at the most vulnerable groups of people.

## 2.4 LOCAL HOUSING STRATEGY

**The B&NES Housing and Wellbeing Strategy 2010-2015** aims to improve the supply, distribution and access to affordable housing and is structured around these three themes: more housing, better housing and healthy lives. It sets out priorities that include working in partnership with selected social housing providers to maximise opportunity for building new affordable homes and supporting private sector landlords to bring empty homes back into use and protect housing standards and conditions particularly in houses in multiple occupation.

**The B&NES Tenancy Strategy 2012** was developed from an evidence base that demonstrated the high demand for social housing in this area and how supply could be improved by encouraging the new flexibilities. The framework explains why and under which circumstances private sector tenancies may be used to accommodate homeless households and social sector tenancies will be allocated for fixed term rather than as a home for life. As a result, most local social housing for non-retirement age households is now let on one year introductory or starter tenancy followed by a minimum five year fixed term tenancy. Landlords will be able to review the tenant's housing need at the end of a fixed term period and decide whether or not to continue the tenancy depending on the circumstances of the tenant and housing demand at that time.

**The B&NES Allocation Scheme 2013** is the way that social housing is allocated within the area. The Scheme was reviewed in the light of recent government guidance and now restricts access to local social housing to means tested households that pass a residency test about their local connection with Bath and North East Somerset area. Housing applicants, including current social housing tenants wanting to move house, must actively search and bid for properties. The scheme gives priority to applicants depending on their housing needs and medical and welfare requirements. Priority is given to homeless households, those leaving the armed forces and social housing tenants who need to downsize.



**The B&NES Homelessness Partnership** is a group of agencies that contribute to the development and delivery of Bath and North East Somerset Council's Homelessness Strategy. Membership includes the Council's Housing Services, registered providers, commissioned homelessness and advice service providers, police and voluntary and community sector agencies. The Partnership holds networking events, champions homelessness initiatives and monitors the Delivery Plan which is set out at the end of this Homelessness Strategy.

## 2.5 CONSULTATION

Consultation has been extensive and includes strategy development meetings with the wide range of organisations that form the Homelessness Partnership, a consultation event held in March 2013 that enabled key stakeholders to consider local challenges and contribute to forming local priorities and an open public consultation on these priorities.

### Welfare Reform Conference

At the consultation event we were asked for practical solutions to support people to manage with less money, better communications and 'smarter' provision of services. There was a desire to join up to share consistent messages and resources and to develop a more strategic approach linking up all stakeholders.

### Open Public Consultation

The online consultation asked for responses to the draft version of the Homelessness Strategy. All respondents agreed that the strategy and delivery plan were clear and the majority of respondents agreed with the local priorities. Additional comments and responses have helped to refine the strategy:

*"I have concerns about the mental and physical ill health of homeless people."*

The Health and Wellbeing Board oversees how health services are provided in Bath and North East Somerset. It has agreed to champion this homelessness strategy which will help to ensure that the health needs of the whole community including homeless people are always carefully considered.

*"Look at what empty properties and land you have to provide cheap housing for homeless"*

Owners of long term empty properties are directly approached with help, support and sanctions to encourage them to bring empty homes back into use and we have a dedicated website [No Use Empty](#). Through our partnership with social enterprises, Clean Slate Training and Employment and Developing Health and Independence Charity, homeless people have gained employment experience and helped renovate empty properties.

*“I think you should prioritise the needs of local people leaving military service, have practical help for older people to downsize... and have a policy to help troubled families get rehoused locally whenever possible.”*

Our Allocation Scheme sets out how social housing is fairly distributed and how housing applications are assessed and prioritised. Priority can be given on grounds of medical, welfare or hardship and special arrangements are in place for people leaving the armed forces and to assist downsizers.

*“We need more rural outreach the strategy should take into account the needs of people in rural areas, considering how difficult for them is to access services in Bath.”*

We recognise that this is an area for improvement and have identified it as a local priority. Homelessness can happen wherever you live and it is very important that everyone has access to good advice and prevention services.

*“We need council and third sector resources to hold families with teenagers together, and more help with substance abuse as alcohol and ketamine cause many young people to become temporarily homeless.”*

There are many interventions such as a Family Mediation Scheme, emergency ‘Crash Pads’ and supported lodgings already in place for young people. Reducing substance misuse is a priority theme within the Children and Young People Plan and will contribute to the prevention of youth homelessness.

*“There appear to be a growing number of beggars on the streets of Bath - some clearly have addiction/mental Health issues.”*

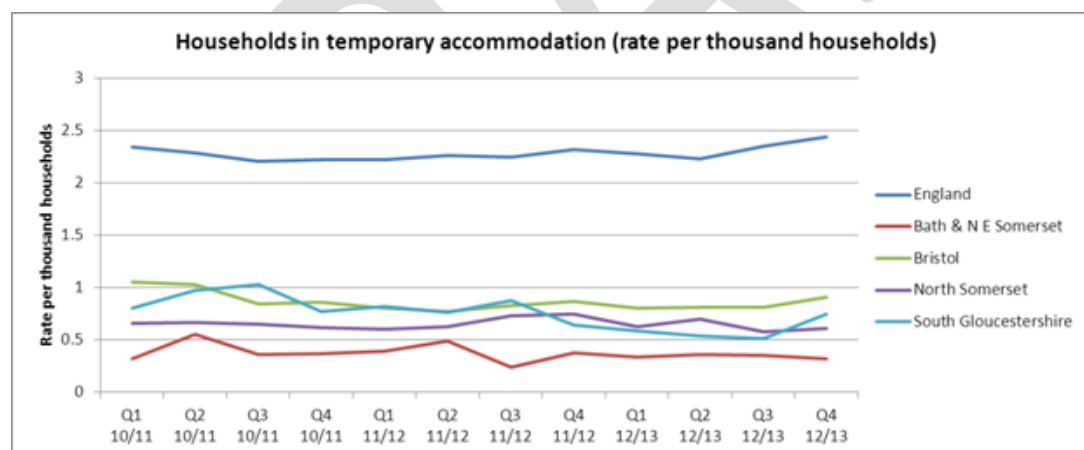
We know that the numbers of rough sleepers is increasing and we have identified that finding out more about how to meet the needs of men and women who are street homeless as a local priority. Service providers are already meeting with the council to tackle the causes of rough sleeping and forming plans to reduce begging and be even more pro-active about getting people into settled and sustainable lives.

## 3.1 MAKING A DIFFERENCE 2008-2013

The Homelessness Strategy 2008-2013 set out strategic priorities to improve information and understand housing need better, for partnerships to prevent homelessness more efficiently and to broaden the range of housing options for homeless people. During the five years that the strategy was implemented there were some significant changes and achievements in the way homelessness services responded to the needs of service users:

**Improving information.** Housing and Mental Health Commissioners pooled resources to fund a specialist mental health worker to provide housing advice. The Housing Support Gateway has improved access to supported housing by facilitating a single application approach and improving partnerships. Julian House created a reporting line and website so that local residents can ask them to make contact with and provide support for rough sleepers throughout the district.

**Preventing homelessness.** The number of homeless applications from 2007 to 2011 decreased by 52% and more than half (60%) of homelessness enquires to the Council were resolved by housing advice that prevented homelessness. The rate of homeless households in temporary accommodation was halved in 2010 and is currently lower in Bath and North East Somerset than in the three other West of England housing authorities and nationally:

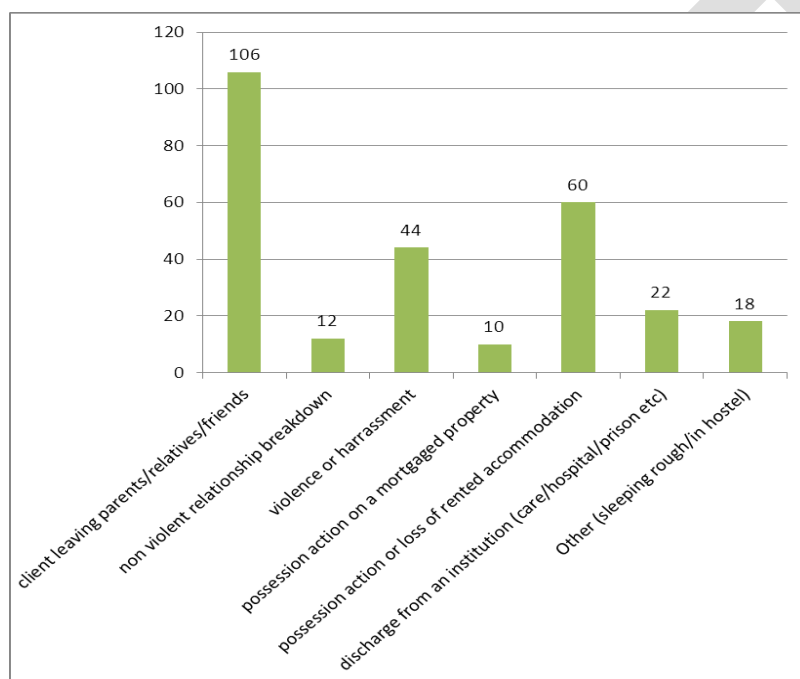


**Housing options.** Since 2008 our private rented sector access scheme, Homefinder, and the Supported Lodgings Scheme prevented around 300 families, young people and care leavers from being homeless. A new family mediation service was commissioned to support families and young people to find safe and practical housing options and plan pathways to independence. The innovative Supported Lodgings Scheme means that young people and care leavers can live in a supportive home until they are ready to move on into other housing options.

### 3.2 LOOKING AHEAD TO 2014-2018

Homelessness services and support were reviewed in 2013 and findings were fed into the Council's Joint Strategic Needs Assessment (JSNA) which is a 'live' document on the Council's website. In the three years from 2010 - 2013, 272 families and single people were homeless and entitled to a 'main housing duty' which means that the Council had to make sure that they were provided with settled housing. These households became homeless for a variety of reasons, the main three are leaving the home of parents/relatives or friends, loss of a rented accommodation and violence or harassment.

#### Main reasons for Homelessness April 2010 – April 2013



Only homeless people with a 'priority need' are entitled to the 'main housing duty'. The three main reasons for having priority need amongst those entitled to the main housing duty were having dependent children or being pregnant, having a mental or physical disability and being a young person aged 16 or 17 or a care leaver.

The Joint Strategic Needs Assessment also includes an impact assessment of welfare reform [JSNA Welfare Reform](#). It indicates that the number of people affected could include around 11000 Council Tax Support recipients and 770 under occupying Housing Benefit recipients. Associated risks for this group include worsening health outcomes, particularly mental ill health, domestic abuse, family breakdown, fuel poverty, debt and homelessness. Ten local priorities have been identified for the next five years of the Homelessness Strategy emerging from the review and JSNA.

## PRIORITY 1 IDENTIFY PEOPLE MOST AT RISK OF DOMESTIC VIOLENCE AND PREVENT HOMELESSNESS

Domestic violence is the third most common reason for women with children becoming homeless.

**Southside** is a charity that works with children and families with multiple and complex difficulties in Bath and North East Somerset, to help them get the care and support they need. 90% of victims of domestic violence reported to Southside are social housing tenants and reported incidence of domestic violence is increasing. (From July 2009 to June 2012 the number of referrals to Southside have increased by 41%).

[JSNA Domestic Abuse](#)

## PRIORITY 2 IMPROVE HOUSING ADVICE AND SUPPORT FOR PEOPLE LIVING IN RURAL AREAS

Around 14% of Bath and North East Somerset residents live in dispersed rural areas. The cost and difficulties of accessing centralised services is a particular problem for older people, families with young children and young people. Between 8-18% of low income households live in areas outside of the market towns and Bath city and it is likely that these populations will experience similar risks to those living in larger, more deprived communities. [JSNA Rural Areas](#)

## PRIORITY 3 TARGET MORTGAGE RESCUE ADVICE AND ASSISTANCE AT LOW INCOME HOUSEHOLDS

32% of the resident population own their homes with mortgages or shared ownership. We are seeing gradual increases in rates of mortgage repossession locally and risks are greatest for owner occupiers with lower incomes and with less employment security. Typically, these mortgagors will have less or no capital resources and will risk becoming homeless without good advice and assistance that helps them to keep their home. [JSNA House Prices and Tenure](#)

## PRIORITY 4 TARGET WELFARE ADVICE AT LOW INCOME HOUSEHOLDS LIVING IN SOCIAL HOUSING

Bath and North East Somerset is a popular place to live and most people who live here enjoy a good standard of living. Within the area, however, are distinct geographical locations where high densities of social housing correspond with multiple deprivations ranking amongst the worst 20% in the country. Two in every three social housing tenants are in receipt of either full or part Housing Benefit. Under welfare reforms, Housing Benefit payments will be rolled into a single Universal Credit payment for recipients to manage. [JSNA Socio-Economic Inequality](#)

## **PRIORITY 5 PREVENT EVICTIONS OF SOCIAL HOUSING TENANTS IN THE FIRST YEAR OF NEW TENANCIES**

44 households have been evicted from Curo tenancies in the previous 3 years (April 2010-March 2013). Last year, the rate of evictions from Curo tenancies doubled (22). Social housing is let intensively to those with greatest housing needs. New working age tenants have less security of tenure as the pattern is for them to have an initial one year starter tenancy followed by a fixed term tenancy reviewed at the end of 5 years. There are signs that the impact of these changes could increase the number of failing social housing tenancies and 'revolving door' homelessness. [JSNA Homelessness](#)

## **PRIORITY 6 REVIEW THE DISTRIBUTION AND TENANT PROFILE OF FAMILY SIZED SOCIAL HOUSING**

The resident population in B&NES is getting older and, since 2001 the greatest increases in the ageing population are within the very old (23% increase in age 85+). The age profile of social housing tenants is significantly older than nationally (50% of social rented sector tenants are retirement age compared to 31% nationally). However the demand for social housing is greatest from working age population (90% of households on the Housing Register). The supply of family sized social rented housing is not meeting demand (61% of average annual lettings are 2+ bed homes). We must have a good understanding of how to meet the housing aspirations of older social housing residents so that they can live safely, well and with independence and to free up family sized social housing. [JSNA Aging Population](#)

## **PRIORITY 7 PROTECT HOUSING STANDARDS AND CONDITIONS IN LOW COST PRIVATE RENTED HOUSING**

There has been no significant expansion in the provision of social housing locally and the number of private rented sector tenancies has been increasing and is now 18% of all housing in the area. 9.5% of private residential buildings in Bath & North East Somerset are Houses in Multiple Occupation. The allocation of social housing is targeted at those with greatest statutory housing need, including people to whom there is a 'main housing duty'. We can expect that the demand for lower cost private rented housing might increase amongst those with non-statutory housing needs and that people with lower incomes will be seeking lower cost housing in lower cost areas where landlords are willing to let to Housing Benefit recipients. 34% of private sector tenants are considered to be vulnerable households in 'non decent homes'. [JSNA House Conditions](#)

## **PRIORITY 8 DEVELOP ACCESS TO SHARED RENTED HOUSING FOR SINGLE PEOPLE AGED UNDER 35**

Young people are at particular risk of homelessness and 50% of homelessness applications in Bath and North East Somerset are from people aged under 25. Young people are newly independent and relatively inexperienced at managing household expenses or finding and keeping a roof over their heads. Changes to Housing Benefit mean that most young people will only be entitled to shared housing rates until the age of 35. Failure to find and keep shared housing may increase the number of homeless young people. [JSNA Children and Young People](#)

## **PRIORITY 9 PROVIDE SUITABLE TEMPORARY ACCOMMODATION AND STOP USING BED & BREAKFAST**

The combination of early and effective homelessness prevention services and provision of a range of good quality suitable temporary accommodation means that we have only placed 16 households, of which 4 are young people in B&B each year since 2010 (annual average 2010 -2013) Although we try to avoid the use of B&B it can sometimes be used for people with complex needs. 13 households (2 families, 3 young people and 8 singles aged 25+) have spent longer than 6 weeks in B&B. We accept that living in B&B is not a good option for families with children, young people or those with a mental or physical disability. [JSNA Homelessness](#)

## **PRIORITY 10 REVIEW ROUGH SLEEPER SERVICES AND ADAPT TO MEET CHANGES IN DIVERSITY**

Demand for the Nightshelter and associated services for rough sleepers are high. The total number of people using B&NES Nightshelter is increasing every year and doubled from 2011/12 (75) to 2012/13 (146). Only a small proportion of service users are women however the number of women using the service trebled from 2011/12 (9) to 2012/13 (27). Around 60 % of service users are aged 36 or older. More than half of new service users come from other areas and the percentage of out of area service users is increasing every year. [JSNA Homelessness](#)

The Delivery Plan is focused on making an impact on the ten local priorities and working towards achieving the [Gold Standard administered by the National Practitioner Support Service](#).

Gold Standard Objectives:

1. To adopt a corporate commitment to prevent homelessness which has buy in across all local authority services
2. To actively work in partnership with voluntary sector and other local partners to address support, education, employment and training needs
3. To offer a Housing Options prevention service to all clients including written advice
4. To adopt a No Second Night Out model or an effective local alternative
5. To have housing pathways agreed or in development with each key partner and client group that include appropriate accommodation and support
6. To develop a suitable private rented sector offer for all client groups, including advice and support to both client and landlord
7. To actively engage in preventing mortgage repossessions including through the Mortgage Rescue Scheme
8. To have a homelessness strategy which sets out a proactive approach to preventing homelessness, reviewed annually to be responsive to emerging needs
9. To not place any young person aged 16 or 17 in Bed and Breakfast accommodation
10. To not place any families in Bed and Breakfast accommodation unless in an emergency and for no longer than 6 weeks



| PRIORITY   | Gold Standard Measure     | Who will do it  | Outcome  |
|--|---------------------------|---|--|
| <b>Priority 1 Identify people most at risk of domestic violence and prevent homelessness</b>     | 1 Corporate               | Health and Wellbeing Board<br>Homelessness Partnership  | Victims of domestic violence have access to advice and homelessness interventions.   |
| <b>Priority 2 Improve housing advice and support for people living in rural areas</b>            | 2 SEET needs<br>3 Options | Economic and Community Development Policy<br>Development and Scrutiny Panel<br>Homelessness Partnership<br>JCP/ VCS Training and Education Providers<br>Registered Social Landlords | Low income and workless have access to good quality education, volunteering and employment opportunities and needs are included in corporate Economic Strategy.<br><br>People with mental or physical difficulty get positive message about getting into work.   |
| <b>Priority 3 Target mortgage rescue advice and assistance at low income households</b>          | 7 MR Scheme               | Supporting People and Communities   | Low income mortgagors have access to advice and interventions.   |
| <b>Priority 4 Target welfare advice at low income households living in social housing</b>        | 2 SEET needs              | Supporting People and Communities<br>Homelessness Partnership<br><br>Housing Services   | Low income social housing tenants have access to advice and interventions.<br><br>Single people as well as families in need are given a comprehensive prevention service, steps to improve the service through Peer-led Practitioner Prevention Partnership developed by the National Homelessness Advice Service. |
| <b>Priority 5 Prevent evictions of social housing tenants in the first year of new tenancies</b> | 2 SEET needs              | Registered Providers (Curo)<br>Housing Services   | New social housing tenants have access to first year tenancy advice and interventions.<br>Pre-eviction protocols reviewed.<br>Homeseach applicants have access to Enhanced Housing Options Services  |

|   |                              |   |   |
|---|------------------------------|---|---|
| <b>Priority 6 Review the distribution and tenant profile of family sized social housing</b>   | 5 Pathways                   | Registered Providers (Curo)<br>Housing Services   | Family sized and retirement social housing mapped and gapped. Older people's housing aspirations understood.  |
| <b>Priority 7 Protect housing standards and conditions in low cost private rented housing</b> | 5 Pathways<br>6 PRS Offer    | Housing Services<br>Private rented sector landlords and lettings agencies   | Private rented housing is well managed and incentives are in place to encourage landlords to let to low income households.  |
| <b>Priority 8 Develop access to shared rented housing for single people aged under 35</b>     | 5 Pathways<br>6 PRS Offer    | Housing Services<br>Supporting People and Communities<br>Private rented sector landlords and lettings agencies  | Young people aged under 35 have access to good quality shared housing.  |
| <b>Priority 9 Provide suitable temporary accommodation and stop using Bed &amp; Breakfast</b> | 9 B&B young people<br>10 B&B | Lead agencies for delivering local initiatives and accommodation pathways in relation to young people, ex-offenders and people with drug, alcohol mental health needs | Accommodation needs of locally targeted offenders met by having clear processes in place (using the published Integrated Offender Management key principles to set out the advantages of a wide partnership involvement).<br><br>Accommodation needs of homeless people met by improving hospital admission and discharge (Improving Hospital Admissions and Discharge for People who are Homeless 2012, a joint report from Homeless Link and St Mungos. Commissioned by the Department of Health) |
| <b>Priority 10 Review rough sleeper services and adapt to meet changes in diversity</b>       | 4 NSNO model                 | Local Authority and VCS Senior Managers managing services that come into contact with homeless<br>Homelessness Partnership  | Rough sleepers are sign posted to services and all services make every contact count.<br><br>Diversity (particularly of women and older homeless) and out of area needs mapped and gapped.  |