Review of jointly commissioned supported accommodation projects for young people

September 2023

HSC Health and Social Care

supporting**people**
supporting independence

Housing Executive

KEY MESSAGES FROM YOUNG PEOPLE

For now, this is my home, not your project

If I know you, and you know me, life will be better

Recognise my maturity and independence, while supporting my growth

I need help and support, even if I don't know I need it

Money is tight, and sometimes I need reminded to prioritise

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ACKNOWLEDGEMENTS

And finally, the contribution of the following members of the Project Advisory Group for support, guidance and oversight during the course of the review process is much appreciated.

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1.   EXECUTIVE SUMMARY

Key messages emanating from the review are outlined below under the four key themes of the Terms of Reference underpinning the Review.

Theme 1

1.1   Determine the strategic relevance of jointly commissioned supported accommodation projects and to better inform commissioners, funders and providers about future planning and service development in the housing and support continuum for young people.

A brief summary of the strategic background to the Review of jointly commissioned supported accommodation projects (JCSA) is set out in Section 4. The respective policy and strategic contexts of both Health and Social Care and Housing recognise the housing and support needs of vulnerable young people. Emphasis is placed within Housing policy on giving priority to prevention and to ensuring that a range of housing and support services are developed and in place that prevent homelessness and deliver responsive services. Growing attention is also being directed under the Programme for Government and Children's Strategy to improving outcomes and for cross Departmental cooperation and collaboration in achieving better outcomes for all children, including the most vulnerable.

The DoH / DE strategy "A Life Deserved" places emphasis on achieving stability in post care life for children in care and to achieve this, recognises the need for further development of a suitable continuum of accommodation and support that will best assist young people transitioning from care. Furthermore there is increased understanding of the needs of vulnerable young people and associated complexities and the corresponding need to ensure a trauma informed response and approach to meeting the therapeutic needs of young people transitioning to adulthood.

Key Messages

1.1.1.   The demand and requirement for accommodation and support for vulnerable young people aged 16 – 21+ was clearly evident during this Review. Across the 16 JCSA projects occupancy rates were found to be consistently high across the majority of the projects. However as the Review revealed there was a high

reliance on the projects, in the absence of alternative options, to be the first or only solution to meeting the needs of young people who required an accommodation and support intervention to meet their needs. Other factors such as delayed move on due to the limited availability of social housing or affordable private rented properties also impacted on occupancy and the ability to expedite timely move on or step down from JCSA projects.

1.1.2.   Based on an analysis of current and projected demand across both children in care and young homeless populations it is evident that the range of accommodation and support models of provision will require to expand and diversify in order to effectively meet increasing demand. The number of young people in care has risen by around 40% since 2011 and is projected to rise by 20% over the next 5 years from 3530 to 4251. Inevitably a significant cohort of these children as they age through care, will require access to a range of suitable accommodation and support to meet their needs. Given the complexity of need of a substantial proportion of those already residing in JCSA projects as profiled by this Review, there will be a continued requirement for the provision of 24/7 supported accommodation models.

1.1.3.   For the period 2018 – 2020 there were 3,496 young people aged 18-21 years who presented as homeless to the Housing Executive. It is anticipated that this figure will continue to rise and young people age 18-21 now represent 18% of all homeless presenters. Equally the Supporting People Strategic Needs Analysis evidenced that the need for young people's accommodation services is currently 3% higher than supply, and is predicted to increase to 13% by 2024 and 15% by 2030

1.1.4.   JCSA projects range in size from 4-25 units and nearly half of all projects provided ten or more units of accommodation. The Review identified concerns about the size of some of the larger projects and their capacity to deliver an integrated model of supported accommodation for the young people placed. Given the increasingly complex needs and associated risks of the young people referred to and living in projects, the size and occupancy of some of the larger scale projects warrants further examination. Particular consideration needs to be given to defining the model and scale of provision that will realistically deliver safe quality housing and social care support to young people with medium to high housing and social care support needs.

1.1.5.   The Review confirmed that the needs of those placed in JCSA projects, and in particular care experienced young people, are increasingly multi-faceted and complex. Young people are presenting more frequently with high and complex needs including the co-occurrence of mental ill-health and substance misuse related to multiple adverse childhood experiences. The Review affirmed the need for jointly commissioned integrated models of supported accommodation that deliver on site 24/7 staff support. Existing projects appear to be stretched and

challenged in their ability and capacity to effectively meet the multiple and complex support needs of looked after children and care leavers and the young homeless population. There was a high number of unplanned exits from some projects which were often attributed to the risks and challenges presented by the young people placed.

1.1.6. Together, factors including the size and scale of some of the projects, the staffing model and the high and complex needs of the young people placed, posed questions about the expectations placed on providers and their ability to achieve best / improved outcomes for the young people.

1.1.7. The Review analysis identified significant variation in joint commissioning arrangements and provision of a 24/7 model of supported accommodation across Trust localities. Current projects comprise of a blend of legacy and more recently commissioned projects which has influenced the operational arrangements governing projects, including access/ referral criteria. Some projects have eligibility criteria exclusively for care experienced young people 16-21 years old; some are dual purpose serving the needs of care experienced and 18+ homeless young people (non-care experienced); others have wider referral criteria providing emergency access to homeless 16/17 year olds, care experienced young people and 18+ homeless referred by NIHE.

1.1.8. Projects with dual or wider criteria and where the referral source included both NIHE and Trusts experienced a higher referral rate and throughput than projects commissioned exclusively for care experienced young people. In projects for both care experienced young people and 18+ homeless the referral route and process differed depending on the young person's age, legal status and referring agency. The Review found that in the main these referral routes and processes operated in isolation from each other. The primary referral agencies therefore did not have collective oversight of overall project occupancy and effectiveness or a shared knowledge or understanding of operational issues and challenges. In effect, although the projects are jointly commissioned and co-funded, a joint approach was not adopted across projects in relation to gatekeeping and monitoring young people's outcomes or pathways into and out of JCSA projects.

1.1.9. Projects with dual or wider access criteria tended to have a higher level of emergency and unplanned referrals and a higher turnover of young people which challenged the capacity of project staff to deliver planned support to individual young people on a one-to-one and/or group basis. Equally this impacted on the quality of the young people's experience of being in the project, the nature of their exit from the project and their onward destination and outcomes.

1.1.10. Pathways into projects and the support available to young people varied depending on the whether the young person was care experienced or 18+ homeless. Care experienced young people, by virtue of the Trust's continuing

responsibilities as the corporate parent, have an ongoing needs assessment, a pathway plan and continuity of additional support from a social worker and / or a personal adviser. Such support can also include financial support, for example, incentives to promote and sustain engagement in ETE, setting up a new home and other practical supports. Notably this contrasts with 18+ homeless who, following admission to the project, are solely reliant upon staff to undertake and complete needs / risk assessment and to exclusively deliver day to day support and ensure ongoing planning and transitions out of projects.

1.1.11. Divergent views were evident amongst key stakeholders about the future purpose and function of jointly commissioned supported accommodation and its fit within the continuum of provision for young people aged 16+ who are vulnerable to homelessness. Specifically, it has given rise to some debate about whether JCSA projects should provide an exclusive pathway for young people with a care background only with separate / distinct provision for 18+ homeless young people who do not have a care background.

1.1.12. Consideration of the financial investment in JCSA projects undertaken as part of the Review showed divergence in the overall funding envelope and apportionment of funding across individual projects. A preliminary analysis of individual project costs, unit costs and funding contributions evidenced significant variance; whilst some of this could be attributed to economies of scale it does not singularly explain the differential. A costed model, underpinned by a business case, was agreed across the lead funders for more recently established JCSA projects with the apportionment of funding based on the age of the young person i.e., Trusts pay for the number of beds commissioned for 16/17 year olds for whom they hold statutory responsibilities; SP grant funding contribution pays for the provision of housing related support services. In some legacy JCSA projects Trust funding contribution also includes a payment towards those aged 18+ with a care background. The financial analysis has raised some fundamental questions about which agency/agencies should be responsible for funding service aspects of the JCSA model, irrespective of age of the young person. The cost of integrated models of supported living, what constitutes housing support and social care and apportionment of cost elements is linked to wider cross Departmental strategic discussion of joint commissioned supported accommodation. Planning, service improvement and development of JCSA projects will require to be in the context of these strategic deliberations and furthermore must take place within a clearer and shared view about the purpose and nature of JCSA models of provision, the intended user group and outcomes, costed model and apportionment of funding.

1.1.13. The Review findings corroborated the need for greater specificity about the component parts of an integrated model of housing support and social care for vulnerable young people who are assessed as having high level and complex needs. Such specificity needs to clearly define referral and eligibility criteria, pathways in and out, project size and capacity, expected outcomes, staffing

requirements and skill set; housing and social care support tasks; and embed a trauma/psychologically informed practice approach, service user consultation, co-production, service improvement, monitoring, reporting and governance arrangements.

1.1.14. Six projects operated assessment beds which are intended for usage by the NIHE where a 16/17 year old presents as homeless to the NIHE. When used in this way a referral is triggered to the relevant Trust who is responsible for completion of an assessment within a 10 day period. The review noted variation by Trusts in the social work response to homelessness prevention and in the continuum of provision and range of accommodation and support options available within and across Trusts. These factors have led to an overreliance in some Trust localities on the use of assessment beds in JCSA projects when responding to emergency admissions to care and unplanned placement moves. It is also clear that some referrals to projects were resource led rather than needs led. A greater focus on homelessness prevention is needed across HSC Trusts in respect of 16/17 year old young people who present as homeless alongside a more conjoined approach with local NIHE offices to ensure effective responses and interventions are delivered from the point of homelessness crisis. It was also evident from the Review that homeless prevention needs to be paralleled with the development and expansion of a broader range of care, accommodation and support options particularly for late entrants to care and those with high and complex needs.

1.1.15. The Housing Adviser stakeholder group shared that the referral to a supported accommodation project for homeless young people can be driven by a need for housing rather than based on an assessed support need that indicates a requirement for an admission to a 24/7 integrated model of supported accommodation (as was also evident in the Strategic Review of Temporary Accommodation, NIHE 2020). Housing Advisers also reported difficulties in accessing suitable supported accommodation for young 18+ homeless presenters who required support, which resulted in them being placed in unsuitable accommodation including generic homeless hostels and / or nonstandard accommodation such as a bed and breakfast or hotel. The lack of emergency, temporary and permanent housing options for all homeless young people aged 18+ was a recurrent theme throughout the Review.

1.1.16. JCSA projects as they are currently configured are not a suitable placement for some care experienced young people with high and complex needs. It was also evident that the lack of suitable supported accommodation options led to some young people having to move to projects which were a considerable distance from family, friends and their support network.

1.1.17. The risk of JCSA projects being used at times as a panacea to meet the accommodation needs of homeless young people was highlighted during this Review. Going forward it is essential that there is appropriate usage of JCSA

projects, aligned to assessed needs and the delivery of purposeful support which is focused on preventing homelessness, achieving best outcomes and timely move on to suitable stable housing.

Recommendation 1

The delivery of current and future jointly funded / commissioned projects must be underpinned by a shared and mutually agreed strategic direction owned by policy makers, commissioners and funders which will set out their purpose, the intended user group, future investment and apportionment of funding.

Recommendation 2

A service specification should be jointly developed by the lead commissioners/ funders in consultation with relevant stakeholders and young people which will be used to consolidate current provision and inform potential future development of JCSA projects.

Recommendation 3

Service specifications must be fully costed and ensure value for money, specifying funding sources with an agreed and explicit basis for the apportionment of funding contributions.

Recommendation 4

Establish a multi-agency group in each Trust locality with representation from the HSC Trust, Supporting People, Housing Executive and other key partner agencies to ensure local ownership and oversight of the continuum of housing and support services in place and to monitor effectiveness, continued relevance and the outcomes achieved for young people. This group will also identify service gaps and unmet need, and serve to provide a connection between local and the existing wider young people's planning and commissioning regional structures.

Theme 2

1.2   Examine young people's pathways into projects and capture some of the current issues and challenges faced by services in responding to their needs.

The shared responsibilities of both statutory agencies towards meeting the accommodation needs of 16 and 17 year olds is set out in legislation and outlined within the NIHE/ HSC Regional Good Practice Guidance on Meeting the Accommodation and Support Needs of Young People aged 16-21[1]. There were significant gaps identified in the implementation of this guidance across some Trust areas and Housing Executive offices. In order to ensure optimum use of this finite supported accommodation resource, a much more joined up and coordinated response to homelessness is needed across these two lead agencies.

There are 12 assessment beds across four Trusts to provide emergency accommodation for 16 & 17 year olds presenting as homeless to NIHE. This provision should allow for a time of purposeful assessment and planning. The Review found that a high number (97) of homeless/children in need aged 16 and 17 entered the supported accommodation pathway in an emergency or unplanned way. Around two thirds of young people outstayed the 10 day period of assessment and feedback from providers indicated this was often due to there being no agreed planned pathway out of the project. The majority of young people did move on from the project within one month and 28% returned to live with a parent. There was little evidence of preventative work or family mediation during the 10 day period of assessment, or that a placement in an assessment bed typically resulted in a positive pathway experience for young people into, through and out of JCSA assessment beds with 18% moving to bed and breakfast or hotel accommodation and 14% homeless and going to stay with friends or relatives.   More needs to be done to prevent young people aged 16 and 17 experiencing family breakdown and entering an unplanned pathway into supported accommodation.

Key Messages

1.2.1.   Review data showed that around 14% of those placed in assessment beds were children in need, currently known to Trusts who were assessed as being on the edge of care / to require immediate accommodation. It is estimated a further 30% of young people placed in assessment beds were looked after children who moved into projects in an unplanned manner in the absence of a suitable care placement

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[1] Meeting the Accommodation and Support Needs of 16-21 Year olds, Regional Good Practice Guidance NIHE/ HSC Trusts (2014)

or planned pathway into a JCSA project. The Review found that the utilisation of assessment beds is not in keeping with the intent of the regional good practice guidance and pointed to the insufficient availability of appropriate provision to meet the accommodation needs of 16 and 17 year old looked after children and late entrants to care.

1.2.2. There was a strong correlation between the appropriate deployment of the dedicated social workers (for 16/17 year olds who present as homeless) within Trusts to support families and young people on the edge of care or homeless and a reduced need for emergency, crisis accommodation. This was particularly evident within the Southern Trust where there is no assessment bed provision within jointly commissioned projects and referrals into these projects are made only on a planned basis. These social workers were deployed within the Trust adolescent service to support the families and young people aged 16 and 17 on the edge of care from the point of initial referral. This allowed for a more robust, responsive and whole systems approach to preventing family breakdown and youth homelessness and critically, to supporting planned admissions of 16/17 year olds to care where necessary.

1.2.3. It was evident during the Review that all stakeholders have developed knowledge and experience about the needs of young homeless however there was no strong evidence of a routinely joined up approach to sharing information to support a seamless and supported transition for young homeless 16/17 year olds throughout their pathway. A stronger focus on a multi-agency approach to homeless prevention is needed to ensure that young people are only referred to supported accommodation where it is clearly determined that family breakdown *cannot* be prevented and that this placement will best support a positive pathway for young people. The homeless prevention social work resource specifically for 16/17 year olds is essential to ensuring that young people who present as on the edge of care are supported in the first instance to remain living with family where at all possible and safe.

1.2.4. The Review identified potential safeguarding issues relating to emergency homeless referrals from NIHE for young adults aged 18+ into projects accommodating 16/17 year old looked after children. This related to the sometimes limited information available at the point of referral due to the emergency or unplanned nature of these referrals. It is often only after a period of living in a JCSA project that support needs and associated risks emerge and become known. NIHE referrals are made directly to the projects and there is no jointly agreed protocol or process in place between the Housing Executive, Trusts and Providers for the placement of 18+ homeless into a JCSA project. Across most projects NIHE referrals for homeless 18+ are not presented to a supported accommodation panel in the same way as they are for most care experienced young people.

1.2.5. The Review found that for one fifth of young homeless aged 18 + the primary support need identified was independent living skills and no secondary presenting need. Unless the assessed needs of these young people indicated a requirement for a placement in a medium to high supported accommodation project there may be some uncertainty about the appropriateness or necessity of all such admissions to JCSA projects. The development of a wider range of options would allow for young people to be appropriately accommodated in provision which best meets their assessed need at the point of referral. This would ensure optimum use of 24/7 integrated social care and housing support models and prevent an over reliance on JCSA projects to primarily meet the housing needs of homeless young people.

1.2.6. Young people who have experienced neglect, abuse and trauma have more complex social, emotional and behavioural needs and typically they will have endured multiple care placements. Some young people experienced compressed and accelerated transitions from care and felt unprepared for making the transition to supported living. There is a need for stronger collaboration and connectedness between all professionals and the provider sector for those young people transitioning from residential care and secure settings where a significant number of admissions to the JCSA projects were found to originate from.

1.2.7. There was evidence of care experienced young people being referred and matched to projects in a planned way on the basis of assessed need. There was however also evidence of referrals being driven by placement availability rather than placement choice. Where this was evident, the level of support needed and degree of risk presenting by care experienced young people were together more likely to be beyond the capacity of the provider. Trusts identified that the needs of some care experienced young people would be better met in a more specialist and better resourced model of accommodation with intensive wraparound support.

1.2.8. Whilst thresholds of need and risk must be considered within the context of how projects are resourced and the staffing model and skills mix in place, it was evident that thresholds differed across projects and providers which influenced and determined the outcome of the referrals and the accessibility of supported accommodation for some young people.

1.2.9. The Review received mixed responses regarding provider insight and expectations of a young person's preparedness when moving from residential care to a project. When discussing a young person's readiness for making the transition to supported accommodation, some projects adopted a more trauma informed, person-centred approach to supporting planned transitions at the young person's pace. The ethos and practice within some projects afforded a better understanding of the developmental stage and needs of the young person which enabled them to gradually acquire the personal, life and social skills needed to

prepare for adulthood and progress to more independent living with reduced levels of support.

1.2.10. The placement of young people in a project is available on a temporary basis for up to a maximum of two years in line with the Department for Communities policy for SP grant funded temporary accommodation. Provider data showed that very few young people reside in projects beyond the two year period and there was evidence that some young people had moved out of a project because they had reached the two year period rather than the move being as a result of their assessed readiness to live more independently and having secured suitable housing. An extension to the two year period was agreed in some circumstances between SP, the Provider and where appropriate, with the responsible Trust and the Housing Executive. A maximum period of two years residence in JCSA may not be sufficient or appropriate for the younger cohort particularly those aged 16 who may require an extended period in supported accommodation before they are ready for next steps.

1.2.11. Timely access to suitable move on accommodation was a notable issue throughout the Review. This was found to have had an adverse impact on best usage of JCSA projects, delayed exits from projects when young people were ready to move on and the nature and appropriateness of the move on accommodation as experienced by the young person. The current housing allocation system does not give priority status to young people living in JCSA projects. Young people on the social housing waiting list were cited as waiting too long to secure suitable, affordable housing and often do not acquire the level of housing points needed to secure social housing. Issues were highlighted about the process and timing of housing applications, the timely allocation of housing points for care experienced young people and the support available to them in navigating this process which negatively impacted on assisting young people to positively exit from projects.

1.2.12. Stakeholders cited housing clinics as an area of good practice that should be extended to all localities. These clinics are organised and attended by housing advisers and ensure good communication between the Housing Executive, Provider, HSC Trust and the young person with regard to the young person's housing application, housing points and offers of housing.

1.2.13. There was evidence of local innovation and the development of both the shared tenancy model and step down accommodation were seen as positive housing and support solutions for young people moving on from projects. There is a need to extend and embed such options to ensure regional availability.

1.2.14. The majority of projects have established good connections with housing Floating Support services particularly where these were delivered by the same provider organisation. Floating support is a valuable component within the continuum of

support for young people with low level housing support needs and can be an important connected service to supporting young people's step down from JCSA provision. Stakeholders however reported they were unable to refer young people moving on from projects due to lack of provision in their locality and waiting lists. This was particular to the Northern area where there was no dedicated floating support provision for young people and in Belfast area which has a low supply of housing floating support.

Recommendation 5
A regional accommodation and support pathway framework should be developed in partnership with, and embedded by HSC Trusts, Housing Executive, SP and other key partner agencies. The pathway framework is to ensure effective practice and interventions, timely responses to young people to prevent homelessness where possible, a more seamless pathway to accommodation and support and improved outcomes for young people.

Recommendation 6
HSC Trusts, Supporting People and the Housing Executive should agree the purpose and function, location and number of the assessment beds currently in place for the provision of an emergency response to homeless 16 and 17 year olds to determine how this resource can be best utilised and delivered to establish a positive pathway for the young person from the point of presenting as homeless and in crisis.

Recommendation 7
A review of the referral criteria, assessment and pathway for emergency and unplanned admissions of 18+ homeless into supported accommodation projects needs to be undertaken to ensure safe, quality services in line with strategic need and underpinned by effective governance arrangements.

Recommendation 8
HSC Trusts should ensure that dedicated social workers are in place to provide seamless interventions specifically for young people aged 16/17 on the edge of care/ homeless. The function and role of these social workers is integral to the delivery of a regional accommodation and support pathway framework which seeks in the first instance to prevent family breakdown/ homelessness and where this cannot be achieved, to ensure positive pathways to accommodation and support.

Recommendation 9
The Housing Executive should explore the provision of a dedicated young people's housing adviser within Housing Solutions teams to replicate the Belfast model on a regional basis.

Recommendation 10

The Fundamental Review of Allocations within the Housing Executive should give due consideration to awarding a greater priority to all homeless young people and care experienced young people to ensure timely move on to a stable home within the community.

Recommendation 11

A clear decision making process and structure should be in place within each HSC Trust locality to act as a single gateway to assessing and matching young people's needs to the range of accommodation and support services. This will include access to the JCSA, Supported Lodgings, and other support services.

Recommendation 12

The social housing sector should ensure there is an adequate supply of suitable and affordable accommodation for young people aged 18+ to enable timely move on from JCSA projects when they are ready to take up a tenancy.

Theme 3

1.3 Consider the extent to which JCSA projects are supporting young people to develop the life skills to transition when they are ready, to safe, suitable and affordable housing.

The provision of supported accommodation is a vital stepping stone to affording vulnerable young people an opportunity to be better prepared as they transition to adulthood and independence. The move into the supported accommodation projects is potentially one of the most significant moves a young person will have to make and will take a period of adjustment to enable a successful transition. A truly integrated model of housing support and social care within a safe, secure and nurturing environment is vital to allow a seamless transition throughout their pathway to independence and beyond to a stable home of their own in the community. The best outcomes can be achieved where young people, based on their assessed needs, are provided with a seamless transition from their originating environment and supported through this journey to achieve a positive outcome and stability in the community.

Models of supported accommodation need to be aligned to the young person's age and stage of development and there is a mismatch within the current continuum of provision. Within the care system there has been a shift towards a trauma informed model of therapeutic care. This thinking and approach needs to reach beyond the care system to extend into models of supported accommodation to ensure that vulnerable young people continue to have psychologically informed interventions that will support their emotional development as they progress into adulthood. A substantial number of young people residing in the projects presented with behaviours and coping patterns that are symptomatic of underlying trauma and attachment related difficulties. Rather than such behaviours being a trigger that ignites untimely exits from projects and potentially into a pathway of homelessness, projects set up to cater for young people with complex needs should be adequately equipped, skilled and resilient to effectively manage the challenges faced and essentially be supported to deliver trauma informed / therapeutic integrated models of housing and social care support.

Key Messages

1.3.1. Young people who participated in the Review valued feeling safe, cared about and supported by project staff that are confident and possess the skills to provide the type and level of support they need. It was clear from the Review that project staff were supporting many young people with co-occurring mental health and substance misuse difficulties and managing high levels of need and risk which was beyond project capacity and in the absence of any specialist support.

1.3.2. It was evident from the Review that the staffing ratio in some projects was insufficient to deliver the level of support and staff presence required. Young people provided feedback about a lack of staff presence impacting on the level of support they received on an individual and group basis, for example, organised communal activities/interventions. Where particular projects also received emergency and unplanned admissions some staff reported difficulties in responding to the support needs of all young people living in the projects. The Review found that lone working practices operated in three projects Monday to Friday and in half of all projects during weekends, including one project accommodating 18 young people. The ability of projects to deliver responsive and individualised housing support and social care to young people with medium to high levels of need within such staffing arrangements is, at a minimum, questionable. Taking account of occupancy levels, complexity of need and the mixed age and profiles of the young people significant onus is placed on providers to assure of the adequacy and robustness of the safeguarding arrangements in place.

1.3.3. During the Review HSC Trusts reported on providing additional funding to cover the cost of additional staff on both an ad hoc and non-recurrent basis where providers and Trusts identified deficits in project capacity to meet the needs of particular care experienced young people referred to, and living in the project. Such deficits related to staffing levels and the skills and expertise of staff to respond to the needs of particular young people with high support needs. On occasion, Trust leaving and after care staff were also required to provide additional direct support to some young people. This included administration of medication, transport to appointments, support with emotional and mental health needs and diversionary activities to reduce risk-taking and maladaptive behaviours such as substance misuse. Whilst it is important that the team around the young person works collaboratively and flexibly to meet individual need, concerns arose about the long-term sustainability of such arrangements, whether specific young people with particularly high and complex needs were appropriately placed in this model of provision and the fitness for purpose of current JCSA models in meeting the ever challenging and changing needs of the client group for whom they are intended.

1.3.4. The Review found that meeting the mental health needs of young people as they transition into projects and adult mental health services was of particular concern. Stakeholders advised that the team of professionals and specialist supports around looked after children and care leavers frequently falls away or diminishes following their move to supported accommodation. Stakeholders were unanimous in their views of the need to develop a psychologically and trauma informed approach to providing care and housing support to all young people living in supported accommodation projects. Providers highlighted the significant challenges experienced in coordinating services for care leavers and all providers

said their staff needed more specialist mental health advice and support. The role of a primary mental health worker based in TTLAAC[2] services who had a continued role with young people during and following their transition, evident in two Trusts, was acknowledged to be of particular value to young people and project staff. A building block of the NI Framework for Integrated Therapeutic Care for all children in care is the delivery of continued therapeutic planning and support to young people leaving care and into post care life. Whilst in early stages of implementation it is expected that as it progresses it will address this noted deficit by assuring continuity of therapeutic plans and interventions for care experienced young people.

1.3.5.   Project staff should be supported to develop the skills, attitudes and resilience to cope with and respond to the complex needs of young people living in supported accommodation. Whilst project staff who participated in the online survey reported in the main that they felt supported to fulfil their role, they stated they would benefit from additional training, particularly with regard to young people's emotional and mental wellbeing and substance misuse. The review found that specific areas for training and development included trauma informed practice; attachment styles and behaviours; safety planning, managing conflict, aggression and risk. Project staff are working as part of a wider system with professionals based in leaving and aftercare, housing and other relevant services to support positive outcomes for young people and to enable them to sustain living in a home of their own. The training programme for staff should therefore also include multi-agency/ disciplinary training to harness and build workforce resilience and capability to better enable project staff to work effectively within projects to support young people and collaboratively across organisational boundaries.

1.3.6.   The levels of unplanned move on differed significantly across projects and was an area of concern, particularly for those young people who were given notice to quit or their licence was immediately terminated (106 young people - 27 of whom were 16/17 year old). The reasons for termination often mirrored presenting needs including substance misuse, mental health and verbal and physical aggression. The policies and procedures submitted by providers as part of the Review showed that in many projects there was an unbalanced focus on termination of the licence agreement as opposed to an emphasis being placed on facilitating the move on in a more positive and planned way. The Review found that over a quarter of the young people who moved on from the projects moved to accommodation which was not suitable for their needs whilst others moved on only to enter the homelessness cycle.

1.3.7.   Providers should ensure policy and procedures have a focus on planned and facilitated transitions. For unplanned exits from projects there should be explicit arrangements in place which set out how young people will be supported to

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[2] Therapeutic Team for Looked After and Adopted Children.

access independent advocacy, advice and support. Supported accommodation project staff have an important role in ensuring that young people are not only aware of and informed about their rights and entitlements but also that young people are provided with the means to exercise them. There was however a lack of evidence of young people being supported to access independent advocacy and support. It is accepted that there are circumstances that give rise to unplanned departures from projects. How such decisions are reached, how plans are put in place to facilitate an exit in these circumstances; and how a suitable alternative is identified requires the inclusion, voice and views of the young person.

1.3.8.   The Review found evidence of some projects being resourceful and employing creative solutions and approaches to providing intensive support and to enhancing the resources available to the project. These included, for example, the development of housing clinics facilitated by Housing Advisers in some localities. These were considered an effective mechanism for keeping housing applications under review and helping to secure suitable social housing. Some projects had developed close links with training providers to encourage and promote learning and employment and to support the implementation of effective and supportive approaches to challenging behaviour including positive reinforcement and supportive sanctions. Based on discussions with providers and external stakeholders the Review found that the involvement of other agencies that could potentially either directly support young people and / or support project staff to meet the holistic needs of the young people was not uniform across projects.

1.3.9.   There is untapped potential for enriching project delivery through closer collaborative working with external agencies across, for example, the Careers Service, PHA funded young people's drug and alcohol services and youth services. There is therefore a need for statutory agencies and the community and voluntary sector to work together to optimise in-reach support for young people and the staff supporting them. The enjoining of these services would also serve to create positive networks and relationships for young people that would support them through transitions from projects and promote their integration and stabilisation within the community.

Recommendation 13
Providers of supported accommodation projects should adopt a trauma informed approach to the care and housing support provided to young people. Provider organisations should ensure the provision of training, support and leadership to staff to equip them to implement and integrate trauma informed practice and interventions with young people.

Recommendation 14

HSC Trusts should ensure continuity of therapeutic planning and support for care experienced young people transitioning to adulthood through supported accommodation which is aligned to the implementation of the regional Framework for Integrated Therapeutic Care. This should be done through the continued involvement of therapeutic services for looked after children and other specialist services to support a more seamless and positive transition from care and into / through supported accommodation.

Recommendation 15

Wider consideration should be given by providers to optimising the contribution of external agencies in the delivery of in reach and connected services that will better support staff in meeting the holistic needs of young people and promote positive social networks and young people's future integration into communities.

Recommendation 16

Young people should be fully informed of their rights and entitlements and supported by project staff and other key professionals to access independent advocacy services as and when needed and at key transition points in their accommodation and support pathway.

Recommendation 17

Providers should ensure they have in place a programme of training for staff working with care experienced and homeless young people with multiple and complex needs. This should be informed by a training needs analysis to develop knowledge, expertise and skills. Areas could include the regional good practice guidance, psychologically and trauma informed care and support, mental health and substance misuse, managing finances, housing options, housing rights, welfare rights, housing supply and affordability and homelessness prevention.

Theme 4

1.4   Help commissioners and providers make decisions about service improvements or remodelling which will improve outcomes, inform best use and distribution of finite funding and deliver value for money

The Review in keeping with the Terms of Reference sought to analyse available information on the effectiveness of the current JCSA projects as a basis for informing service improvement, current and future service planning and investment and commissioning of services. A shared understanding of measures to determine effectiveness and expected outcomes, alongside robust governance and monitoring arrangements at local and regional strategic level by commissioners and co-funders, is fundamental to defining and capturing effectiveness. Determining effectiveness and value for money needs to be founded in a partnership approach based on a shared language and common agreed approach and process. Such is the foundation whereby joint commissioners and co-funders of services can then assess effectiveness, monitor the performance of provision, identify areas for improvement and make decisions about value for money, service improvements, service remodelling and future commissioning.

In a climate of increasing demand and constrained financial resources commissioners and co-funders also need to be assured that the resource invested in provision is optimised and represents value for money; that services are being delivered efficiently; and that expected outcomes from the investment are being achieved to the mutual satisfaction of the lead funders. Based on current investment across JCSA provision, an examination and comparative analysis of funding across the 16 projects, the apportionment of funding and its application in the delivery of the projects was undertaken.

Key Messages

1.4.1.   The Quality Assurance Guidance provides strong and clear framework that sets out the respective roles and responsibilities of all agencies and demonstrates a commitment by the lead agencies to ensuring effective governance which was largely evident in practice. Whilst there are good governance and monitoring arrangements in place these are undertaken by HSC Trusts, SP and RQIA largely in isolation of each other.

1.4.2.   Quarterly monitoring visits were carried out in four of the five HSC Trusts. There were differing views from providers on the effectiveness of the monitoring arrangements in place by Trusts but were generally welcomed by providers and viewed as a mechanism for addressing the support needs of young people and to agree any additional training needs which could be facilitated by the Trust.

1.4.3. RQIA inspections and feedback arrangements have cemented a more collaborative approach by all stakeholders particularly on areas for improvement however the composite inspection report is not automatically shared with SP and HSC on a consistent basis.

1.4.4. SP undertake annual contract meetings and Quality Monitoring Visits (SP Quality Monitoring Tool) to projects which are completed anywhere between 2-3 years or sooner if required. Fifteen of the sixteen projects have had a quality monitoring visit completed to date and all projects have met the required standards. The providers found inspection of projects to be a positive experience albeit there was some duplication within these arrangements and overlap in the schedule of RQIA inspections and SP quality monitoring visits.

1.4.5. There is a need to streamline performance monitoring processes to avoid duplication and reduce bureaucracy in reporting systems by providers to the respective co-funders and lead agencies. Monitoring performance and outcomes is mainly undertaken in isolation by the two funders with information not shared on a regular and coordinated basis. Providers would benefit from a stronger partnership approach to monitoring service performance and outcomes for young people by SP, HSC Trusts and RQIA to strengthen governance arrangements which better assure safe and effective service delivery.

1.4.6. Information was sought from providers on referral activity to individual projects, on the number of referrals received, accepted and declined, waiting lists and unmet need. The Review found that there is no systematic data collation tool or process to inform an analysis of capacity, demand and unmet need within projects and across Trust localities.

1.4.7. The Review found the absence of a localised collaborative structure that would provide systematic monitoring and performance oversight and governance of each area's projects has contributed to the limited availability of information about referral trends, demand, and unmet need. Similarly, there was no evidence of local oversight of project specific outcomes and project impact on the delivery of positive pathways for young people moving on from the projects. This has also resulted in a lack of connectivity to the wider regional and strategic partnership structures in place that have a vested interest and remit for assurances that projects remain effective, strategically relevant, fit for purpose and to provide an important conduit to escalate in a timely way capacity / demand issues that require strategic direction and decision making.

1.4.8. All providers utilise a system to record outcomes as part of the young people's support planning process however there is no one tool implemented by all providers. One provider organisation demonstrated that they used this information at project level to identify trends, training needs and areas for service improvement.

1.4.9. The existing Outcomes Framework designed by and reported solely to SP evidenced some positive outcomes for young people, however the data profile information collated as part of this Review highlighted discrepancies and gaps between the data sets. The current monitoring arrangements and outcomes framework do not fully capture an accurate picture of the pathways for young people into, through and out of the JCSA projects or how well outcomes have been achieved, particularly in the medium to longer term.

1.4.10. Projects are funded through two revenue streams which are paid on an annual recurrent basis. SP grant funding contribution is paid on an annual block gross basis through a Funding Agreement which sets out the legislative basis for provision of housing support and HSC revenue funding is a commissioned annual contract. The SP funding has remained largely static, with some HSC Trusts, as part of their annual contract arrangements, providing an annual uplift in line with cost of living increases.

1.4.11. The current financial arrangements for the 170 units are based on the application of a "bed split" by Trusts and SP based on respective and joint legislative responsibilities. The "bed split" is determined primarily by age with 16/17 year olds being the financial responsibility of HSC Trusts and are commonly referred to as a "Trust beds" and similarly SP in the main funds 18+ beds which are commonly referred to "SP beds". SP fund the 12 assessment beds provided within six of the projects for the purposes of 16/17 year olds who present as homeless and who require time limited emergency / assessment supported accommodation. The labelling of beds is not conducive to the delivery of integrated housing support and social care and is largely aligned to which agency is paying for which beds which in turn influences how beds are used and operate.

1.4.12. The review of the financial aspects of the projects provided an analysis of the funding and illustrated variation in the unit rate and annual SP and HSC funding streams from one project to another within and between Trust localities. There is no existing uniform funding formula applied either within SP or HSC Trusts or jointly which has made meaningful comparison difficult and has potentially contributed to anomalies in the funding of projects. Equally there is an absence of a recognised benchmark unit cost rate for projects of this nature.

1.4.13. The necessity of HSC Trusts to provide additional ad hoc funding to meet the particular needs of specific young people placed in projects reaffirms the need for enhanced models of JCSA projects. Additional ad hoc funding arrangements may not be sustainable in the longer term however do reflect the efforts of both providers and Trusts to flex support arrangements in their endeavours to jointly provide required support arrangements to best meet the needs of individual young people. Where this occurs it is normally in the absence of any other suitable alternative.

1.4.14. The increasingly complex needs of young people, the expectation of what is to be delivered and the outcomes to be achieved are out of sync with staff skills, experience and knowledge and the remuneration package in place. The financial analysis has raised the need for a more forensic analysis of current funding streams and budget management within individual projects, including the apportionment of funding to staffing and frontline service delivery.

1.4.15. A short benchmarking exercise was completed and whilst not fully met within the scope of the review, it highlighted the need to address this further through a more extensive assessment of the short, medium and long term effectiveness of the financial modelling underpinning the JCSA projects.

Recommendation 18
HSC Trusts and SP should develop an integrated approach to monitoring service performance and contract management. This will include ensuring effective mechanisms are in place for reviewing whether co-funded services have achieved expected outcomes and to assess the actual effectiveness of investment.

Recommendation 19
SP and RQIA should adopt a more joined up approach to the quality monitoring and inspection regime to reduce potential duplication and the administrative burden on providers, and to share their respective areas of expertise and knowledge in the quality assurance of these integrated models of service provision.

Recommendation 20
A single outcomes framework should be developed by SP, HSCB/Trusts and other key stakeholders to closely monitor outcomes and measure the impact/ difference that living in a supported accommodation project has made to the young person's life.

Recommendation 21
SP and HSC Trusts should undertake a deeper forensic analysis of the application of funding by providers across projects.

Recommendation 22

SP and HSC Trusts should further examine their respective funding streams across each project to ensure appropriate and proportionate alignment with usage, need and responsibilities.

Recommendation 23

SP and HSC should undertake a wider benchmarking and value for money exercise to help inform future development and commissioning of projects.

2.   INTRODUCTION

2.1.   Supported accommodation is a vital stepping stone to providing a safe, stable and nurturing place for some vulnerable young people to live and is fundamental to supporting their emotional health and mental wellbeing and ultimately to enabling young people to achieve safety and stability in adult life in the community. Living in a secure and positive environment that supports their progression into adulthood is key to ensuring that young people experience the best possible opportunities to living the life they deserve.

2.2.   The Strategic Review of Joint Commissioned Supported Accommodation (JCSA) projects for young people aged 16-21 has been undertaken jointly by the two lead agencies, the Health and Social Care Board and the Housing Executive, Supporting People. The two agencies adopted a partnership approach to developing and establishing sustainable supported accommodation projects to meet the needs of vulnerable young people and young adults. Both agencies hold respective statutory responsibilities for providing accommodation and support and the jointly commissioned projects subject to this review, were established and underpinned by the concept of integrated planning and commissioning.

2.3.   The two lead agencies recognised the need to undertake this Review which was endorsed through the Supporting People Regional Thematic Group. Drivers for the Review included growing pressures across statutory services and service providers. This was evident in increasing demand across both children's services and housing services, increasing complexity of need and limited supply of suitable and affordable accommodation.

2.4.   The projects that fall within the scope of this review are those which have been jointly commissioned and funded by Supporting People and HSC Trusts to meet the complex needs of young people leaving care and young homeless aged 16-21. All projects are funded to provide staffing on-site on a 24/7 basis. The projects aim to meet the needs of young people who are assessed as in the medium to high level categories of need and who require time and opportunities to prepare for and progress towards more independent living arrangements.

2.5.   The current landscape of projects comprises of 16 projects across the five HSC Trusts, delivered by seven provider organisations. A number of these are legacy services developed prior to the implementation of the Children Leaving Care (NI) Act 2002. Following review they were brought under the Supporting People Programme as part of the development of accommodation and support services

following the introduction of the leaving care legislation. The remaining services were subsequently developed and jointly commissioned and funded through a joint HSCB/ NIHE Five Year Commissioning Plan.

2.6.   The JSCA sector is relatively small with a total of seven Independent Provider organisations from the Community and Voluntary Sector currently contracted and funded to deliver these services. These projects, in compliance with DoH Standards for Young Adults Supported Accommodation Projects in Northern Ireland (2012) are underpinned by a raft of operational policies and procedures including, for example, statements of purpose, referral criteria and pathways, support planning and review requirements, occupancy levels and staff support and supervision arrangements.

2.7.   The Terms of Reference (Appendix I) specify the rationale for undertaking the review in the context of a changing financial, policy and strategic landscape, significant variance in funding split across services, increased demand for services and the capacity of providers to respond to and meet the complex needs of children and young people. The aim and scope of the review was to provide the lead agencies with an evidence base to:
- Determine the strategic relevance of jointly commissioned supported accommodation projects and to better inform commissioners, funders and providers about future planning and service development in the housing and support continuum for young people.
- Examine young people's pathways into and out of the projects and capture some of the current issues and challenges faced by services in responding to their needs.
- Consider the extent to which JCSA projects are meeting the needs of young people and helping them to develop the life skills to transition when they are ready, to safe, suitable and affordable housing.
- Help commissioners and providers make decisions about service improvements or remodelling which will improve outcomes, inform best use and distribution of finite funding and deliver value for money.

2.8.   The Review commenced in September 2020 and concluded in December 2021 and has been overseen by a multi-agency Project Advisory Group (PAG) comprising of representation from the Youth Justice Agency, Public Health Agency, Voice of Young People in Care (VOYPIC), Probation Board NI, NIHE, HSCB and the Regulation and Quality Improvement Authority (RQIA). The PAG has provided guidance, advice and oversight to the review and critique on draft versions of this report.

2.9.   The Review has been undertaken during the Covid-19 pandemic and therefore at a time when independent sector providers have had to ensure service continuity in an uncertain, unsettled and ambiguous environment. The JCSA sector has worked closely and flexibly with key partner agencies to address the challenges

presented in an effort to ensure continuity of safe, effective services for some of the most vulnerable children and young people. The methodology for undertaking the review took account of Covid-19 restrictions and was informed by public health guidance. All stakeholder engagement was therefore undertaken remotely.

2.10.   During the Covid-19 period working groups were established which resulted in collaboration between key agencies and government departments. Weekly meetings were held by HSCB and SP/ NIHE and attended by PHA, providers and other CVS organisations to support delivery partners through the pandemic. These meetings worked to ensure "everyone home" approach to end homelessness and street sleeping. There were innovative services developed with all agencies contributing strategically and financially. SP provided funding to ensure providers were not negatively impacted financially to provide additional staff cover and PPE. HSCB provided finance to support the provision of extra staff, diversionary activities and interventions to provide enhanced support to young people during the pandemic.

3. METHODOLOGY

3.1.   In line with the Terms of Reference for the Review the methodology applied an analysis of both quantitative and qualitative primary information. The approach also sourced and drew upon secondary data already available to HSC Trusts and NIHE.

3.2.   The Review methodology is detailed below:
- A data collection tool was designed to extract a range of data from all JSCA providers on all admissions to and exits from the respective projects for the period 1 April 2018 – 31 March 2020. This tool captured client specific information relating to profiles, pathways into and out of projects, presenting need, project activity and outcomes. This informed how projects met the needs of young people leaving care and young people who experience homelessness with a focus on their pathway into, through and out of supported accommodation;
- Collation of project specific information based on an agreed project profile;
- Remote tours of each project were undertaken to assist the reviewers in visualising projects and ascertaining the quality of the living environment;
- Theme specific meetings with managers of each project to examine staffing models, training and development, service accessibility, service demand, housing and social care support, occupancy and throughput;
- Focus groups facilitated with key partner and referral agencies namely HSC Trusts, NIHE and provider organisations; and with other key stakeholders including Youth Justice Agency, Probation Board NI, Children's Law Centre to share views and experiences of supported accommodation services commissioned and delivered for care experienced and young homeless aged 16-21. Participant responses focused on
  - ➢ their understanding of the needs of young people living in projects;
  - ➢ the challenges faced by young people throughout the pathway into and out of the accommodation;
  - ➢ their role in working with other agencies to assess and respond to the needs of care leavers and young homeless
  - ➢ examples of good practice and innovation which support effective transition planning and good outcomes for young people;
  - ➢ gaps in service provision and how they considered services could be strengthened and improved.
- Guided discussions with young people (current and former residents) to ascertain their views and lived experience of projects with particular emphasis on young people's experiences of moving into, living in, and moving on from the services. VOYPIC was commissioned to undertake this

aspect of the Review and 41 young people participated (27 current and 14 former residents);

- Online provider staff survey to capture the views and experiences of frontline staff working in projects to explore the key themes relating to planned pathways and transitions into and out of supported accommodation, the type and level of support provided to young people, working with other agencies and training and support to them in their role;
- Review of relevant research and literature on accommodation and support models of provision for young people alongside examination of current policy and strategic review documents relating to housing, looked after children and care leavers;
- Review of existing/secondary quantitative and qualitative information sourced from NIHE, HSC Trusts and RQIA.

Stakeholder engagement formed the basis of a SWOT analysis (Appendix II) completed to identify the strengths and limitations of current service provision and opportunities for further service development and remodelling;

3.3. The review has considered how JCSA projects meet the needs of young people leaving care and young people who experience homelessness, with a focus on the pathway of young people who move into, through and move on from supported accommodation.

3.4. The collation of information provided a rich and comprehensive resource which has been used to inform the analysis of findings captured in Section 6 of the Review report.

3.5. Much of the profile data collated for the purposes of the Review was collated retrospectively by providers from existing information systems and young people's records. Whilst this data has provided a good insight into service activity, pathways and performance, some limitations are noted. The data sought is not systematically gathered or available across projects nor is there a common agreed reporting framework in place to comprehensively capture information across agreed domains that could serve agreed reporting or monitoring functions. As the data was not systematically available, it needed to be collated retrospectively and therefore captures the young person's living arrangement only immediately prior to and following their move on from the supported accommodation service.

4. STRATEGIC CONTEXT

4.1. The review of JCSA projects sits within a wider legislative and strategic context that straddles children's services, housing and Supporting People. Inevitably aspects of these wider strategic drivers will impact on and influence the future design and provision of services to vulnerable young people, those leaving care and those who present as homeless. A short synopsis of the strategic context is provided below.

4.2. There is a commitment from the **Programme for Government** to improve the wellbeing of all children and young people in NI. The need for cross departmental collaboration to achieve better outcomes is also enshrined in the **Children's Services Co-operation Act (NI) 2015** which compels Government departments and services for children to cooperate with each other to improve wellbeing. The **Children and Young People's Strategy 2019-29** is being delivered by all nine government departments. It identifies eight outcomes to be achieved for all children and young people in Northern Ireland, specifically that they experience equality of opportunity, are physically and mentally healthy, enjoy play and leisure; learn and achieve; live in safety and stability; experience economic and environmental wellbeing; make a positive contribution to society and live in a society which respects their rights. Achieving the desired outcomes for young people will therefore require departments, agencies and sectors to work together collaboratively.

4.3. The Strategy for looked after children, "**A Life Deserved: "Caring for Children and Young People in Northern Ireland** jointly issued by the Department of Health and Department of Education seeks to improve the outcomes for children in care, on the edge of care and care leavers and to help them achieve their full potential by improving in-care and post-care support and service provision. The forthcoming **Adoption and Children's Bill** provides the legislative framework for strengthened and enhanced support to young people leaving care with the statutory duty to support young people extending to the age of 25. There has been significant regional investment from HSC to strengthen existing provision and to develop new models and approaches of accommodation and support provision for children in care and care leavers, including the development of a regional model of supported lodgings and investment in piloting the Housing First for Youth model.

4.4. A **Review of Regional Facilities for Children and Young People** was commissioned in January 2017 and has made recommendations for the Establishment of a Regional Care and Justice Campus. The proposals are underpinned by international and domestic legal and policy framework relating to the rights of children, their care and protection and the responsibilities of relevant authorities in relation to those rights. The proposals represent a significant change and will require cross departmental collaboration in supporting those children and young people who require time within a secure environment and their reintegration back into the community. It is proposed that each child exiting secure care will have a comprehensive plan to access integrated and co-ordinated service provision in the community. This Satellite provision could also include designated supported accommodation for 16 and 17 year olds, either as an alternative to entry to the Secure Care Centre or to provide suitable supported living arrangements following discharge.

4.5. The current implementation of the **Northern Ireland Framework for Integrated Therapeutic Care** is a trauma informed approach to meeting the physical, emotional and social needs of looked after children and young people. The Framework is comprised of organisational commitments and specific practice delivery approaches with the aim of supporting a child's development and recovery by building a sense of understanding, mutual trust and empowerment. It provides the building blocks to support young people and their carers to engage in a wide range of activities that support healthy development, community integration and trauma recovery. One such building block relates to ensuring a trauma informed response and approach to meeting the therapeutic needs of young people transitioning to adulthood.

4.6. The **Strategic Review of Temporary Accommodation** (2020) commissioned by the Housing Executive identified that the demand for social housing and temporary accommodation exceeds supply in all council areas and recommended the development of new approaches to the procurement of temporary accommodation. This review recommended further development of homelessness prevention services and a more strategic approach to referral and access to Supporting People funded services to ensure that those with medium to high and complex support needs could access the appropriate housing support services. The review highlighted a lack of suitable and affordable housing options, geographical factors relating to access in urban and rural areas and the associated impact on the throughput of accommodation services and referrals to floating support services. Housing services are piloting several initiatives as part of the ongoing review of temporary accommodation such as shared tenancies and long-term block leasing which may help address the issues of lack of move on options and also assist the Housing Executive in meeting its duty to provide accommodation to homeless young people.

4.7.   The **Supporting People Strategic Needs Assessment (SNA) 2020** shows the need for young people's accommodation services is currently 3% higher than supply, and is predicted to increase to 13% by 2024 and 15% by 2030. The Draft Supporting People Strategy 2021-24 highlights that in terms of achieving stability for young people, there is a broad consensus among stakeholders and delivery partners that one of the key challenges faced by young people is securing more permanent and suitable accommodation.

4.8.   The **Supporting People Draft 3 Year Strategic Plan 2021 – 2024** outlines areas for focus on Covid 19 recovery including the impact on young people experiencing homelessness coupled with the impact of the increased complexity in the support needs of these service users. The Draft SP Plan, through development and delivery will seek to ensure strong alignment across a number of relevant and associated strategies, including those for young people and homelessness. Through the Strategy the Housing Executive will collaborate closely with a wide range of partners to contribute to the wider goals of prevention, inclusiveness and anti-poverty. One of the key priorities will be to strengthen relationships across health, criminal justice and housing with the aim of generating greater value from public funds. The Strategy outlines 4 key priority objectives:

- Drive Recovery from Covid-19;
- Work towards closing the gap between need for services and supply;
- Collaborate with providers to invest in service innovation to achieve greater outcomes;
- Strengthen relationships across health, criminal justice and housing with the aim of generating greater value from public funds.

4.9.   The **Draft Homelessness Strategy 2022-27** has a focus on prevention and following the recommendations of the Strategic Review of Temporary Accommodation has sought to have better alignment with the SP Strategy. The overall aim is:-

"Wherever possible homelessness should be prevented, if homelessness cannot be prevented it should be rare, brief and non-recurring";

The three main objectives which reflect the customer journey are to:
- Prevent homelessness from happening in the first place
- Address homelessness by ensuring customers receive accommodation and support at point of need
- Support customers exiting homelessness into settled accommodation

5.   OVERVIEW OF ACCOMMODATION AND SUPPORT PROVISION

5.1.   There are 16 JCSA projects with capacity to accommodate 170 young people which were developed through the SP Programme and supported by HSC Trust funding. Several have existed for over 20 years and transferred to the SP programme when it was introduced in 2003. The most recent project was established in 2017. In 2011/2012 there was an agreed five year commissioning plan, specifying accommodation based proposals to meet assessed need across Trusts and the Housing Executive. This plan was endorsed by the lead funders and informed the priorities for funding across HSC Family and Childcare and the Housing Executive/ Supporting People Programme. A funding split was agreed within each of the projects based on respective statutory responsibilities and levels of need for 16/17 year olds and young people aged 18+ years. These are now commonly referred to as "Trust bed" or "SP bed" respectively.

5.2.   Appendix provides a summary of the 16 JCSA projects operating across the five Trust localities. Of the 170 units of accommodation, 58 are designated for young people aged 16/17 who are leaving care; 100 units for young people aged 18-21/25 years who are care experienced or homeless; and 12 units are for assessment purposes specifically for 16/17 homeless presenters for a period of up to 10 days to undertake a UNOCINI assessment. In line with the original funding and commissioning arrangements, the purpose of projects and referral criteria are defined in each project's statement of purpose and aligned to the specific local arrangements agreed between Trusts and NIHE.

5.3.   There is significant variation in joint commissioning arrangements and provision of a 24/7 model of supported accommodation across Trust localities. Current projects comprise of a blend of legacy and more recently commissioned projects which has influenced the operational arrangements governing projects, including access/referral criteria. Some projects are exclusively for care experienced young people 16-21 years old; some are dual purpose serving the needs of care experienced and homeless non-care experienced young people aged 18+; others are multi-purpose providing access to homeless 16/17 year olds, care experienced young people and 18+ homeless referred by NIHE.

5.4.   Eight of the 16 projects are currently being used exclusively by Trusts to meet the accommodation and support needs of 16 and17 year olds transitioning from care and care leavers aged 18+. Six of the 16 projects have assessment beds for the emergency placement of 16/17 year olds who present as homeless to the NIHE. Eight projects currently provide for direct allocations of young people aged 18+ who present to the NIHE as homeless as well as 16 and 17 year olds transitioning from care. Whilst small in number the JCSA projects are a significant component of provision within the overall continuum of accommodation and support for young people.

5.5.   These accommodation based 24/7 staffed projects provide care and support for young people aged 16-21[3] years assessed as being in the medium to high need category. Projects range in size from 4 units to 25 units of accommodation. The majority provide self-contained accommodation and 2 projects provide a mix of self-contained and shared living. All placements in a project are on a temporary basis with a maximum stay of two years in preparation for a move to a less intensively supported living arrangement. The two year rule is aligned to the Department for Communities (DfC) Policy on the administration and eligibility of the SP grant funding for temporary housing support to be paid on a block gross basis.

Demographics

Care Experienced Young People

5.6.   The review of supported accommodation projects is being brought forward in the context of growing numbers of children coming into care and an upward trend in the number of young people aged 18+ experiencing homelessness. It comes at a time when securing suitable and affordable accommodation and support for care experienced young people and late entrants to care and those presenting as homeless, is a growing pressure across the region and for service providers.

5.7.   As at 31st March 2021 there were 3530 Looked After Children of which 535 (15%) were aged 16/17 years old. Overall this represents a 40% increase in the number of looked of children in care in the past 10 years and is projected to continue to rise by 20% over the next 5 years from 3530 to 4251. HSC Trusts have experienced a corresponding increase in the number of care experienced young people aged 16+ to whom statutory duties are owed under the Children (Leaving Care) Act (NI) 2002. The majority of children (81%) are living in kinship and non-kinship foster care whilst 215 (6%) were cared for in a residential setting, 9% living with parents and 4% in other specialist settings. It is important to note that the number of looked after children living with foster carers or kinship carers

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[3] With the exception of Rossorry Grove, Enniskillen which accommodates young people aged 16-25 years.

decreases across the age range – 58% of 16 and 17 year olds were living in this type of living arrangement whilst 14% were living in residential care and 7% in joint commissioned supported accommodation.

5.8.   During 2020-21 HSC Trusts supported 114 late entrants to care aged 16 and 17, accounting for 13% of all admissions to care during that period.[4]   The outcomes for late entrants to care are less well documented and the main routes for entering care include emergency or unplanned placements following family breakdown, via the Juvenile Justice System or as Unaccompanied and Separated Children. Some late entrants will have been known to social services and may have been on the edge of care for some time whilst others are new referrals and about whom little is known. The upward trajectory in the overall number of looked after children and care leavers has led to increased demand for care placements across the age range and for supported accommodation for young people aged 16+.

Homeless Young People aged 16 and 17

5.9.   The number of young people aged 16 & 17 presenting as homeless to the Housing Executive has declined since 2014-15 from 361 to 134 (57%), in 2020-21. Similarly, there has been a decline in homeless presentations to social services from 160 in 2016-17 to 86 in 2020-21. Despite the reduction in 16/17 year old homeless presenters, there has not been a corresponding reduction in the demand for supported accommodation. These figures perhaps need to be understood in the context of:

- a more streamlined process of data capture agreed by HSCB, Trusts and Supporting People, Housing Executive;
- the implementation of good practice guidance for HSC Trust and Housing Executive relating to young people who present as homeless which supports an effective multi-agency and partnership approach to meeting their needs; and
- the growing demand for care placements due to an increasing population of younger looked after children alongside 16 and 17 year olds with greater complexity of need and a lack of suitable placement provision.

Homeless 18-21 year olds

5.10.   Forecasting the numbers of homeless presenters who are non-care experienced is a greater challenge than for care experienced young people. Reflecting on previous referral trends of homeless presenters is one method of predicting future demand. Over the two year period from 2018-2020 there was a total of 3,496 young people aged18-21 year olds who presented as homeless to the Housing Executive. For the age range 18–21 year old there were 1,729 homeless

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[4] Children's Services Statistical Report, March 2021.

presenters during 2018-19 with a small increase during 2019-20 when there was a total of 1,763 young people aged18-21 years who presented as homeless to the Housing Executive.

5.11. There was a significant increase in presenters during 2020-21 at a time when young people were significantly impacted by family breakdown during the Covid-19 pandemic. The increase was highest in the Belfast area and at 31 March 2021 young people aged 18-21 represented 18% of all homeless presenters across NI. The numbers of 18-21 year olds presenting as homeless at 31 March 2021 across each Trust locality is as follows:

18-21 Year old Homeless (NIHE) by Trust Locality 2020-21					
BHSCT	NHSCT	SHSCT	WHSCT	SEHSCT	TOTAL
579	368	350	322	144	1763

Current Continuum of Accommodation and Support Provision

5.12. The Housing Executive and HSC Trust localities are not co-terminus so the HSC Trust localities have been used for reference. The following table provides a breakdown of the 16 projects and units by Trust area.

Table A - JCSA Provision across the 5 Trust Localities

HSC TRUST LOCALITY	NO OF JCSA PROJECTS	PROJECT CAPACITY	ASSESSMENT BEDS
NHSCT	3	33	2
BHSCT	4	44	2
SEHSCT	3	29	6
SHSCT	2	11	0
WHSCT	4	53	2
TOTAL	16	170	5

5.13. A synopsis of JCSA provision across each Trust area is provided below.

Northern Trust: Current JCSA Provision
- 3 JCSA projects, delivered by 3 provider organisations, totalling 33 units including 2 assessment beds;
- The projects are situated in Ballymena (5 units), Magherafelt (13 units) and Coleraine (15 units). Two projects are centrally located within main towns of Magherafelt and Coleraine. Grove Road, Ballymena JCSA project is located in

a large housing estate with some challenges regarding transport to and from the service into town;

- Two projects have referral criteria for both homeless, 18+ and 16/17 year old care experienced young people, the third in Ballymena currently accepts only Trust referrals for care experienced young people;
- All units are self-contained and of a good standard;
- There are no JCSA projects located in the southern sector of the Trust.

Western Trust: Current JCSA Provision

- 4 JCSA projects, delivered by 3 provider organisations, totalling 53 units and includes 2 assessment beds;
- One project located in Enniskillen has 13 units and is the only provision within the mainly rural Fermanagh area. The JCSA project in Enniskillen is the only service in NI where the age group is for 16 to 25 year olds. Referral source HSC and NIHE;
- Three projects are situated in the L/Derry city area equate to 40 units and range in size of 6 units, 9 units, and 25 units;
- The three L/Derry projects accept allocations from HSC and NIHE. Referral data shows that the largest project receives the most NIHE direct allocations with minimal NIHE allocations being made to the 2 smaller projects;
- The largest JCSA project of 25 units is located within the Derry city locality; providing 20 units for young people aged 18+ years and 5 units for 16/17 year olds, and includes 2 assessment beds for 16/17 year homeless presenters. Following an RQIA inspection in 2019 the number of units was reduced from 25 to 20 in line with recommendations to limit the number of young people under the age of 18+ years being accommodated;
- All units are self-contained accommodation and are of a good standard.

Southern Trust: Current JCSA Provision

- 2 JCSA projects delivered by 2 provider organisations providing 11 units;
- There are no assessment beds in this Trust locality;
- Both projects are commissioned for care experienced young people only;
- The Southern Trust has the lowest provision of JCSA regionally;
- The smallest JCSA project regionally is located in Dungannon, providing 4 units on a shared living arrangement for 3 young people and 1 self-contained flat with limited communal space and no external space;
- There are 7 units within Newry all of which are self-contained and of a good standard;

- The services are centrally located in towns; however there is no provision within the areas of Portadown / Craigavon / Lurgan / Armagh.

South Eastern Trust: Current JCSA Provision

- 3 JSCA projects providing 29 places delivered by 2 provider organisations;
- 6 of the 12 assessment beds are located in these projects - two in each project;
- Referral criteria is for both homeless presenters age 16-17, care experienced young people and homeless presenters 18+;
- Located in main towns of Bangor (12 units), Lisburn (9 units) and Downpatrick (8 units), close to local amenities;
- The projects provide a high standard of accommodation and there is good provision of internal and external communal space.

Belfast Trust: Current JCSA Provision

- 4 projects providing 44 places, delivered by 4 provider organisations;
- 2 assessment beds are available in one project;
- Referral criteria/pathways to the four projects is Trust only with the exception of the two assessment beds;
- Located in North (10 units), South (10 units and 18 units) and East (6 units) of the city; there is no provision in West Belfast;
- The smallest project in Belfast has 6 units, 4 of which are on a shared living basis;
- The second largest JCSA project, providing 18 units is located in the university area of South Belfast. It has limited communal space and no external space;
- The services are of a good standard and are based within local communities.

5.14. The JCSA projects sit within a wider continuum of accommodation and support services specifically for young people. Although these services are not all jointly funded they are designed to provide a range of services to meet the presenting and assessed needs of young people. It should be noted that not all of the services listed below are consistently or equally available across the region. Within the overall continuum of support outlined in Table B below there are notable variations in provision across and within the Trust localities.

Table B - Units of Accommodation and Support Provision by Trust Locality

Project type	WHSCT	BHSCT	SEHSCT	SHSCT	NHSCT
JCSA	53	44	29	11	33
GEM*	68	72	38	35	43
STAY** Supported Lodgings	10	10	10	13	10
Housing First for Youth /	-	2	2	-	8
Tenancy with support	10	-	-	-	-
Shared Tenancies	-	20	-	-	-
Floating Support / Step down	186	57	199	122	57
Foyers	48	79	-	-	-
Trust transition houses	-	-	-	7	-
TOTAL	**375**	**284**	**278**	**188**	**151**

*Number of young people living in GEM placements is subject to change on a monthly basis
** Supported Lodgings 2 Year Pilot April 2020-22 across 4 Trusts (except SHSC TRUSTS); Recruitment targets set - 5 Hosts in Year 1, increasing to a total of 10 hosts in Year 2.

5.15. A brief descriptor of each type of accommodation is detailed is as follows:

GEM Scheme   Delivered and solely funded by HSC Trusts the Scheme enables young people to remain in foster care post leaving care and up to the age of 21 years or beyond if completing a course of education

STAY Supported Lodgings   Two year pilot co-funded by HSCB and SP and delivered by Trusts to provide up to 10 places in four Trusts for young people assessed as in the low to medium need category. Southern Trust has an existing STAY scheme which provides 15-18 placements.

Housing First for Young People, NHSC TRUSTS	This is a model funded by the HSCB, initially piloted by the Northern Trust and delivered by an independent sector organisation to provide intensive in reach and responsive support for to up to 8 young people assessed as in the high risk / high needs category. Providing single intensively supported placements for young people for whom other current provision is not appropriate. This model is also being jointly developed by Belfast Trust and South Eastern Trust.
Tenancy With Support	This service is funded by SP and unique to the Western Trust area. It provides 21 units of support; 10 within individual leased properties for 16–25 year olds and 11 within the wider community, delivered through floating support for 18–25 year olds. It provides low/ medium level tenancy support for young people aged 16–25 years. Referral is via a number of routes including HSC Trust or NIHE for 16/17 year olds for the accommodation units.
Shared Tenancies	A pilot service delivered in Greater Belfast for up to 20 young people who are moving on from supported accommodation and who require low level housing support in their pathway to independent living. Funded through the Homelessness Prevention Fund and SP, floating support provision is delivered by a JCSA provider organisation.
Floating Support	Funded by SP to deliver low level housing support to young people in their own tenancies and operates mainly Mon-Fri, 9am-5pm. The premise of this service is to support young people to move into their own home and to prevent future homelessness. The age range is generally 16 to 25 years. There are 724 places provided across the 5 HSC Trust localities. There is significant variation by locality in the provision of housing floating support. NHSCT has the lowest provision with 32 units and the WHSCT has highest with 151 units of floating support.
Foyers	Funded by SP there are 3 foyers with 24/7 staffing providing low level housing support and accommodation. Two foyers are located in Belfast (79 units) for 18-25 year old homeless presenters and one Foyer is situated in Derry (48 units) for homeless presenters aged 16-25.

Flexible Outreach	Funded by HSC Trusts to deliver enhanced and specific outreach support to care experienced young people and seeks to complement existing support services, support step down and provide enhanced, intensive and flexible in-reach support to young people with high and complex support needs.
SHSCT Community Living Support & Trust Transition Houses	Southern Trust community living support workers provide flexible in-reach and outreach support to young people aged 17+ transitioning from their care placement or supported accommodation, to independent living. Community living support is also available to any young people living in the transition properties owned by the Trust and which are let to young people on either a single let or shared basis.

5.16. There should be a continuum of support available to young people, comprising of a range of services to meet their specific and assessed need. JCSA projects are commissioned to meet the needs of young people requiring medium to high support on a 24/7 basis. Progression from this provision should therefore be planned and support tapered to ensure a seamless transition for young people. The ultimate goal is to achieve stability and integration in the community and to prevent unplanned move on from projects leaving young people vulnerable to becoming homeless and moving to unsuitable accommodation. An analysis of young people's pathways into and out of JCSA projects is explored in further depth in Section 5.

5.17. There is notable variation in the number of places and provision across and within each of the Trust localities which is not aligned to housing and support needs. Feedback from stakeholders including HSC Trusts and Housing Executive indicated that for some care leavers and young homeless the type of accommodation they are able to access can be driven primarily by availability rather than an ability to match the particular needs of the young person to the most appropriate supported accommodation option. Within the NHSCT locality there is a gap in young people's accommodation and support provision in the southern area of the Trust. The NHSCT has the lowest provision of young people services overall and the SHSCT has the lowest number of JCSA provision with 11 units across the Trust locality. Across four of the Trust localities there is limited provision within the more rural hinterlands. BHSCT has no JCSA projects in the West of the city and similar to NHSCT, has a limited number of housing floating support units when compared with the WHSCT and SEHSCT localities.

5.18. The disparities in provision by locality raise questions about choice, suitability, availability and accessibility of provision. During the review both feedback from Housing Executive staff and analysis of homeless statistics evidence increased use of non-standard accommodation. This has led to homeless young people aged 18+ being placed into generic adult hostels as there are limited housing options available to appropriately meet their needs and many will have experienced repeated homelessness and multiple placements. Referrals to housing and support services can therefore be resource led as opposed to needs led. This may lead to young people, both homeless and care experienced being referred to and offered a place in a JCSA project in the absence of alternative suitable provision. It may also require them to move away from familiar surroundings and support networks in order to access this model of supported accommodation.

6. REVIEW FINDINGS - QUALITATIVE AND QUANTITATIVE ANALYSIS

This section of the report provides a synopsis of the key findings and themes emerging from an analysis of the qualitative and quantitative data, under the following three key headings:

- **Pathways into projects** which examines the profile of young people and assesses whether the projects are accessible to those who need them;
- **Pathways through projects** and how responsive they are to meeting the needs of young people living in the services;
- **Pathways out of projects** that enable good outcomes for young people and their onward progression into suitable housing at a time when they are ready.

Provider data on the profile and pathway for young people collated for the period **1st April 2018 to 31st March 2020** showed **433** young people had moved into the projects during the period[5]. The review found that there was no process for collating information on the number of referrals to projects and/or waiting lists to inform service capacity, demand and unmet need. Any reference to *referral* throughout this report relates only to those referrals where a young person was allocated a place and moved into a project. Data analysis will therefore focus on the 433 young people who moved into projects during the two year period, examine their profile and referral pathway into, through and out of projects. Information requested from providers included the referral source, young person's age, status, living arrangement prior to and after living in the project, presenting need, educational status, type of transition into and out of the project and length of stay.

Pathway into Projects

6.1. Profile of Young People Moving into Projects

6.1.1. The referral criteria aligned to each project's statement of purpose in keeping with local commissioning arrangements, includes *one or more* of the following:
- Looked After Children and care leavers aged 16-21 years;
- 16 and 17 year old children in need who are assessed as homeless and requiring emergency accommodation for a 10 day period of assessment[6];
- Young adults aged 18-21[7] presenting to the Housing Executive as homeless.

[5] Similar number of young people living in projects during two year period - 215 during 2018-19 compared to 218 during 2019-20

[6] This referral criteria applies to four Trusts. There is no provision for emergency or unplanned referrals for a 10 day period of assessment in Southern Trust.

[7] With the exception of one project, Rossorry Grove, Enniskillen where the referral criteria is 16-25 years old.

6.1.2   Figure 1 below demonstrates significant variation in the number of young people *moving into projects* over the two year period. There was a higher number of young people moving in where the referral criteria included emergency and unplanned admissions for a 10 day period of assessment and/ or referrals from the Housing Executive for homeless young people aged 18+. These projects were more likely to be larger in size (over 10 units of accommodation) than projects commissioned only for care experienced young people. A number of project variables can be attributed to higher number of young people moving in, including project size, multiple referral criteria and the number of referral sources into each project. Analysis of data by project size identified that projects with the highest number of young people moving in were Simon Community NI projects in Belfast and Coleraine, followed by MACS Lisburn, Barnardos Ballymena, BCM Magherafelt and FHASS Jefferson Court.

Figure 1

Young People moving into Projects 2018-20
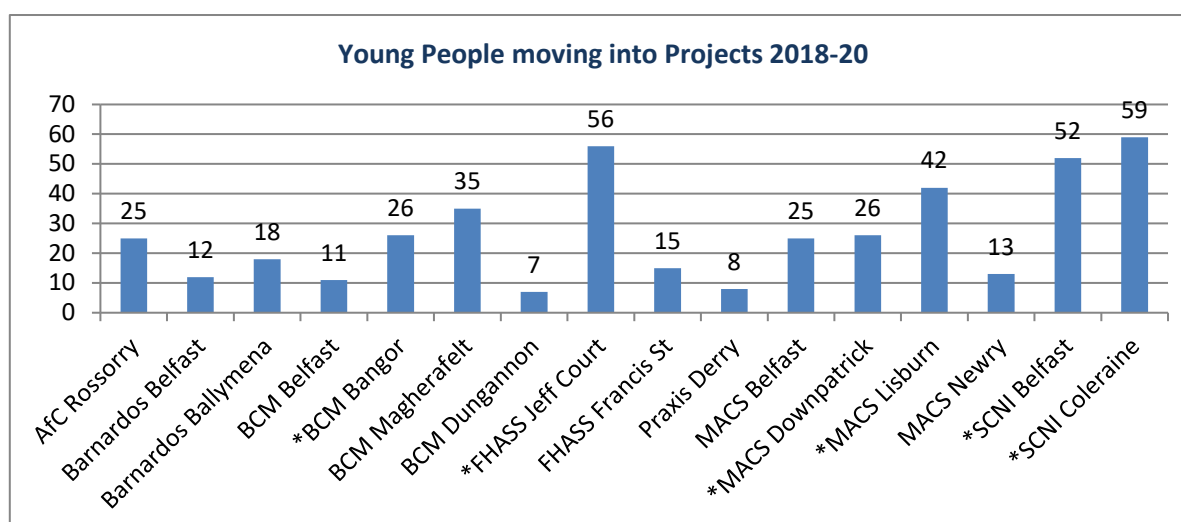
* Denotes those projects which provide accommodation for homeless 16 & 17 year olds for a 10 day period of assessment

6.2.   Entry to Project by Gender

6.2.1.   All projects are mixed gender and as demonstrated in Figure 2 data showed more males than females moved in during the two year period. Females were more likely than their male counterparts to experience a planned move into, and a planned transition on from projects. Quantitative data related only to gender identity; sexual orientation is not captured by providers. Whilst there was no specific exploration of gender related themes raised by providers, during data validation meetings or with other key stakeholders, it was evident that a small number of young people had left home due to conflict with their parent/ guardian about their gender identity and/ or sexual orientation.

Figure 2

Entry to Projects by Gender

- Male
- Female

192
241
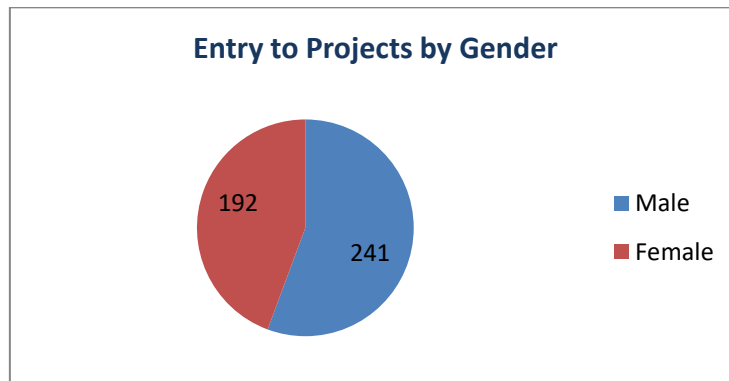
6.3. Entry to Project by Age and Legal Status

6.3.1. Figure 3 below shows that, young people under 18 accounted for 66% of all those moving into projects, the majority of whom were aged 17[8] and provider data reflected an overall increase in the number of children aged 16 and 17 referred to projects during the two year period. This increase can be mainly attributed to a rise in the number of emergency or unplanned referrals resulting in young people moving into a project for a 10 day period of assessment - 45 referrals in 2018/19 increasing to 77 in 2019/20. Most commonly these were children in need who experienced family breakdown; although over the two year period 34 looked after children were placed in an assessment beds in the absence of a suitable alternative placement. Referrals to assessment beds represented 21% of all referrals to projects in 2018/19, rising to 36% of all referrals the following year. The referral process and young people's pathway experience moving into and out of assessment beds is discussed further in this section of the report (para 6.23).

Figure 3

Age of Young People Moving into Project

- 16
- 17
- 18
- 19
- 20+

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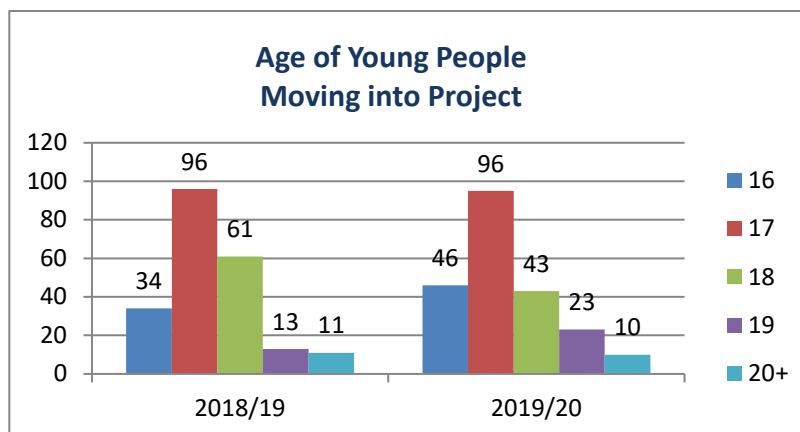
[8] 80 referred aged 16 (39 of whom moved into assessment beds) and 192 aged 17

6.3.2. During the two year period ending 31st March 2020 a total of 175 looked after children, 85 care leavers, 97 Homeless/Children in Need aged 16 and 17, and 76 homeless aged 18+ (non-care experienced) moved into projects during the two year period. Figure 4 illustrates that 60% of young people were care experienced with Looked after children accounting for 40% (n175) of all referrals into projects. The overall referral rate for looked after children remained fairly static across both years.

6.3.3. During 2019-20 the overall number of care leavers aged 18+ moving into projects decreased whilst there was an increase in the number of young homeless 18+ referred by the Housing Executive[9]. Young adults aged 18+ accounted for 37% of all young people moving into the projects - 85 (19.5%) were care leavers; and 76 (18.5%) were 18+ homeless referred by the Housing Executive into projects[10].

<p style="text-align:center;">Figure 4</p>
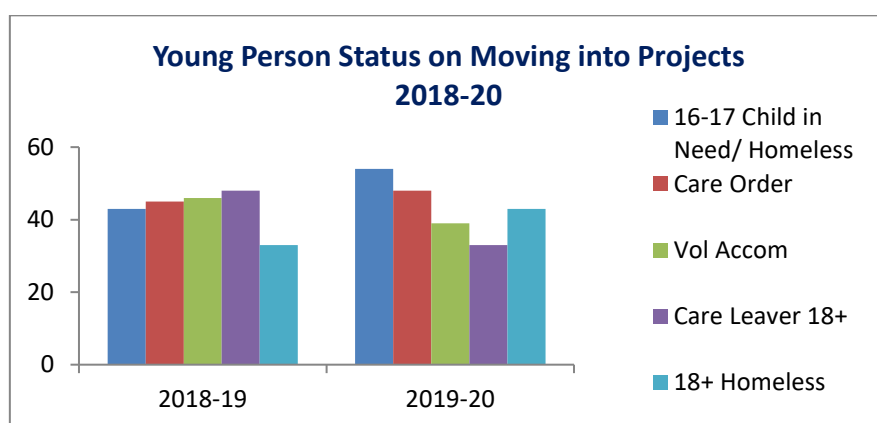
6.3.4. Referral trends and the status of young people living in joint commissioned projects differed significantly across Trust localities and individual projects. Figure 5 reflects variance by Trust locality in current provision, joint commissioning arrangements, referral criteria and the pathway into projects for homeless 16/17 year olds, care experienced and 18+ homeless. The overall number of project referrals accepted by Trust locality ranging from highest to lowest is as follows: NHSCT 112; WHSCT 104; BHSCT 103; SEHSCT 93; SHSCT 21.

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[9] During the 2 year period the number of care leavers in 2018/19 and 2019/20 reduced from 61 to 43 and the number of 18+ Homeless increased from 33 to 43.

[10] NIHE 18+ Homeless Referrals were made to 9 projects – FHASS Jefferson Court 23; AfC Rossorry Grove 13; BCM Riverside 9; SCNI Mount Street Mews 8; MACS Downpatrick 7; MACS Lisburn 6; BCM Tafelta 6; SCNI Belfast 3; Praxis Northland Rd 1.

Figure 5

Young People Status on Moving into Project by Trust locality
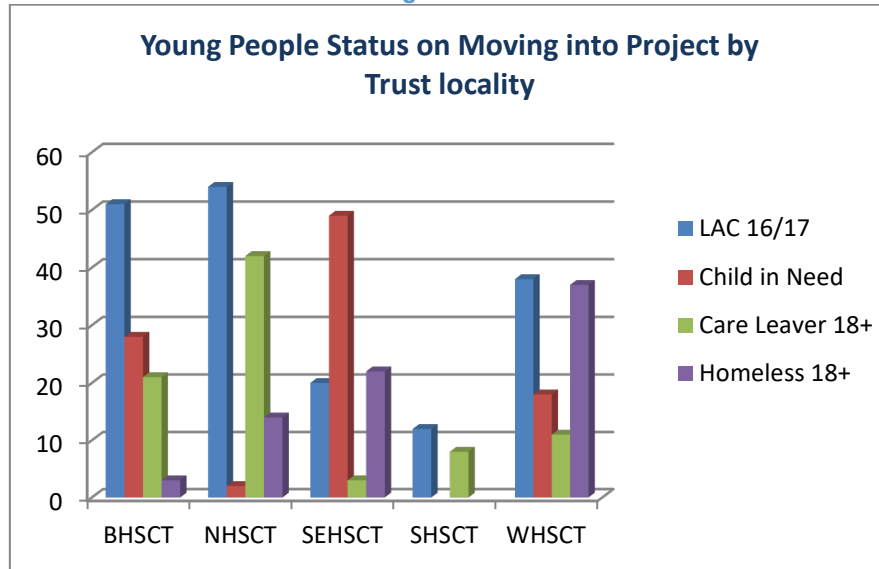
6.4. Reason for Referral

6.4.1. For looked after and care experienced young people aged 16+ Trusts are required to complete a needs assessment and pathway plan which should clearly outline the young person's needs and how these will be met as they make the transition from care[11]. The pathway plan should include details on suitability of accommodation, financial support, learning and employment and the development of the practical and social skills in preparation for their eventual move to more independent living. Referral data showed that whilst a planned referral was made for 71% of looked after children, a significant proportion had been referred in an unplanned manner and were experiencing placement instability as shown in Figure 6.

Figure 5

Reason for Referral - Looked After Children

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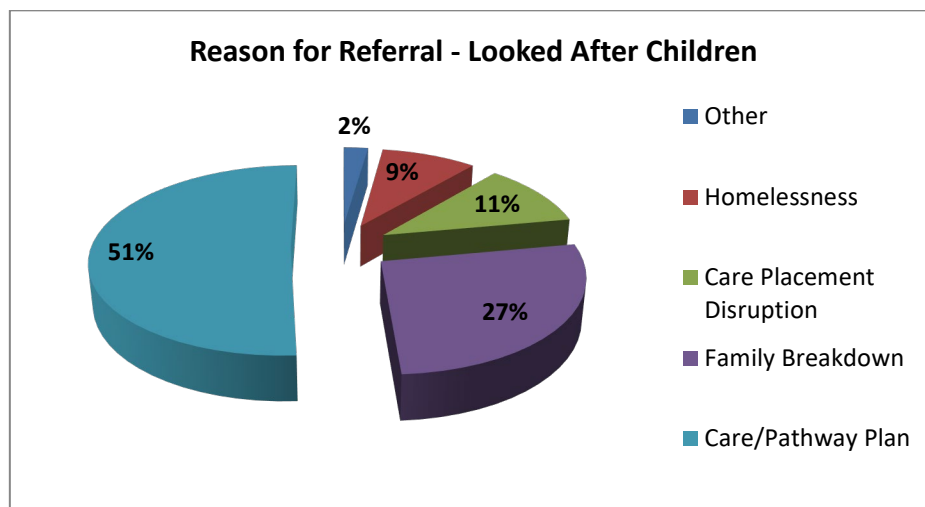
[11] Children (NI) Order 1995 as amended by Children (Leaving Care) Act (NI) 2002

6.4.2. Figure 6 illustrates that a transition to a project aligned to the young person's pathway plan was the main referral reason for approximately half of all looked after children. An additional significant proportion of young people referred to projects were experiencing placement instability due to family breakdown (27%), care placement disruption (11%) and homelessness (9%). Some young people recorded as looked after children were initially placed in projects as children in need who had experienced family breakdown and who subsequently became a looked after child at the point of placement in projects in adherence with the Children (NI) Order 1995.

6.4.3. The data showed that once they had reached adulthood care experienced young people were more likely to be referred as a result of homelessness (41%), the majority of whom were living with family. Figure 7 below illustrates that the young person's needs assessment and pathway plan was the referral reason for just over one third of care leavers aged 18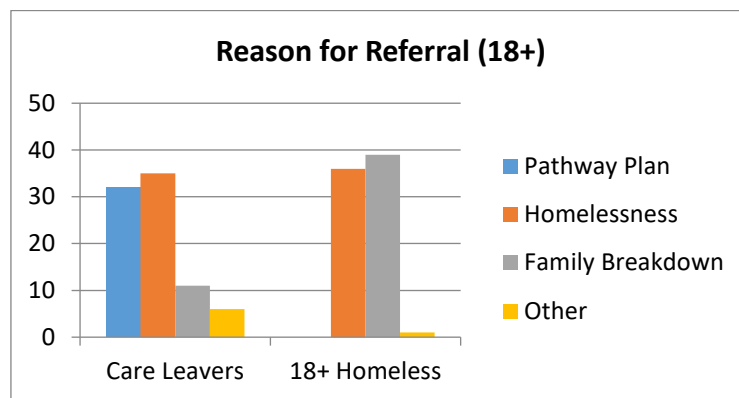+ whilst 13% were being referred due to family breakdown and 4% as a result of a disruption in their previous care placement.

Figure 6

Reason for Referral (18+)

6.4.4. The main reason for referral for young people aged 18+ presenting to the Housing Executive was recorded as homelessness (51%) and family breakdown (47%). Referral data showed that over half of young people aged 18+ referred by the Housing Executive were living with parents prior to referral. The second most common living arrangement was homeless, staying temporarily with a friend or relative (40%).

6.4.5. The Review found that pathways into projects and the support available to young people varied depending on the whether the young person was care experienced or 18+ homeless. The care and pathway planning processes supporting entry to projects of care experienced young people are not applicable to 18+ homeless who, for the most part experience emergency or unplanned pathways into

projects. As referenced above, care experienced young people, by virtue of the Trust's continuing responsibilities as the corporate parent, have a needs assessment, a pathway plan and continuity of additional support from a social worker and / or a personal adviser. Such support also includes financial support, for example, incentives to promote and sustain engagement in ETE, setting up a new home and other practical supports. This level of support is in contrast to 18+ homeless who are solely reliant upon project staff to undertake and complete a need / risk assessment, provide day to day support and plan for their transitions out of projects.
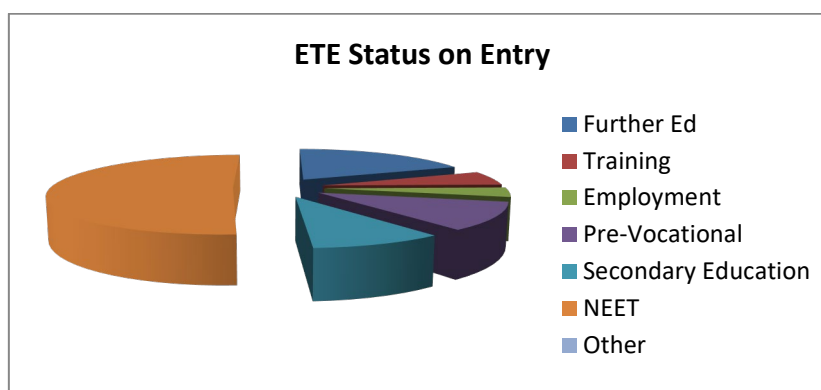
6.5.   **Primary and Secondary Presenting Needs of Young People**

6.5.1.   Looked after children who have experienced adversity, abuse and / or neglect often have resulting complex needs. Analysis of the cumulative data relating to both primary and secondary support needs for looked after children moving into projects identified a multiplicity of needs, with the most prevalent being mental health (42%), substance misuse (42%) and independent living skills (45%). Preventing offending behaviour was recorded as the primary or secondary support need of nearly one in five (18%) looked after children whilst other support needs included bereavement (12%) and Child Sexual Exploitation (11%). Less frequently recorded needs included autistic spectrum disorder, learning difficulties, alcohol misuse and domestic violence.

6.5.2.   Provider data showed that of the 433 young people who moved into projects, 66 had been living in a children's home. These young people typically had complex and co-occurring support needs relating to substance misuse (42%), mental health (48%), and bereavement (24%) and offending behaviour (13%). The majority (91%, n 60) were recorded as having planned transitions however the perception of what constituted a planned move and how this occurred, differed across projects and stakeholders. An additional 12 looked after children moved from the Juvenile Justice Centre to a supported accommodation project, the majority of whom were aged 17 and their main presenting support needs related to substance use, offending behaviour, mental health and child sexual exploitation.

6.5.3.   The primary and secondary presenting need of care leavers aged 18+ moving into supported accommodation evidenced what is already known about the challenges they face in achieving stability and positive outcomes in early adulthood. Their main support needs related to substance misuse (56%), independent living skills (56%) mental health (30%) and bereavement/ trauma (21%). The co-occurrence of mental health and substance misuse was also evident from provider data and stakeholder feedback. The barriers to these young people achieving good outcomes are much more difficult to overcome and they are more likely to experience repeated/ chronic homelessness.

6.5.4. The primary and secondary support needs of 18+ homeless differed to care experienced young people with the most common support needs recorded as independent living skills (71%), mental health (46%) and substance misuse (25%). For approximately one in five young people the primary support need was independent living skills with no recorded secondary need. Whilst in some cases this may be due to limited information at the point of referral for 18+ homeless presenters, discussions with providers during data validation meetings confirmed the data was reflective of the support needs of this group. Stakeholders including provider staff and Housing Executive staff referenced the lack of alternative temporary accommodation for young homeless presenters. The allocation of a place in a JCSA project for an 18+ homeless young person therefore appeared to be less related to an assessed level of medium to high support need aligned to this model of supported accommodation, and more resource led due to a lack of other suitable housing provision.

6.5.5. Figure 8 below illustrates that approximately half (49%) of all young people referred into the projects were not engaged in education, training or employment (NEET) on entry to and a similar proportion were NEET on exit from the projects. This indicates young people need a higher level of support to address and overcome barriers to learning and employment.

Figure 7

ETE Status on Entry

- Further Ed
- Training
- Employment
- Pre-Vocational
- Secondary Education
- NEET
- Other

6.6. Living Arrangement Prior to Supported Accommodation

6.6.1 When considering the strategic relevance, purpose and function of JCSA it is important to consider the different stages of homelessness prevention and where these projects fit on the continuum of homelessness prevention, accommodation and support provision. Preventing youth homelessness presents a challenge to statutory agencies. Family dynamics and social issues are complex and often evolve over time, however at times a family can reach crisis point quickly and unpredictably. Some will have been known to statutory services for some time as a child in need whose family is in receipt of support from social services. The

young people's profile data was completed retrospectively by providers and reflects only the living arrangement *immediately prior* to the young person moving into JCSA. It therefore does not capture if a young person has experienced multiple moves back and forth from the family home to other living arrangements.

6.6.2.   Early intervention focuses on preventing new cases of homelessness by working with the young person and their family well before homelessness may occur; secondary prevention is aimed at supporting a family at the point of crisis / family breakdown and typically support will be provided by social services; and finally, tertiary prevention is targeted at young people who have already experienced family breakdown and are homeless.[12] Qualitative and quantitative data reflected that children and young people aged 16+ presenting as homeless are being referred to projects during the last two stages of homelessness prevention.

6.6.3.   Looking at the previous living arrangements for all young people moving into projects, it is notable that the previous care/ living arrangement for approximately 19% was homelessness and living with a friend or relative. Commonly known as 'sofa surfing' these young people often endure multiple transitions which adversely impact on their mental health, physical health and personal relationships. Young homeless 18+ referred by the Housing Executive and 16/17 year old children in need referred to assessment beds were more likely than care experienced young people to have experienced 'sofa surfing' immediately prior to moving to supported accommodation. Figure 9[13] below shows that approximately 46% of looked after children moved from a care placement, that is, residential care and foster care, into supported accommodation and 21% (36) had been living with a parent.

Figure 9

Previous Living Arrangement for Looked After Children aged 16 & 17

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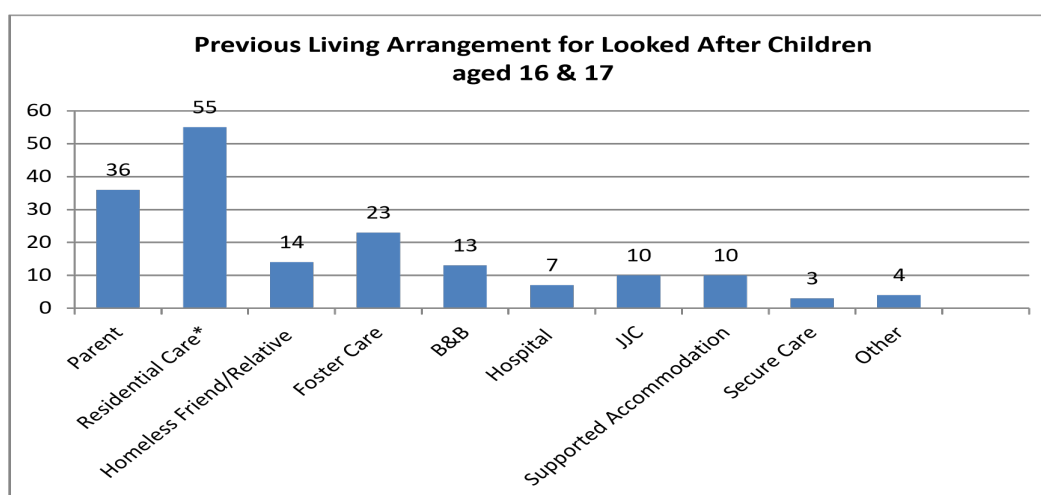
[12] Preventing Youth Homelessness, What Works? Centrepoint (2016)
https://centrepoint.org.uk/media/1700/prevention-what-works_summary.pdf

[13] 8 young people transitioned from residential care either on or shortly after their 18th birthday

6.7. Homeless 16 & 17 Year Olds referred for 10 Day Assessment

6.7.1. The responsibility of both statutory agencies towards meeting the accommodation and support needs of young people aged 16 and 17 presenting as on the edge of care or homeless is clearly outlined within legislation and good practice guidance[14] which details how both agencies should work in a coordinated and responsive way. The provision to accommodate young people in a project for a 10 day period of assessment pending the outcome of a UNOCINI[15] assessment is in place within four of the five Trusts.

6.7.2. Research shows that regardless of the stage of homelessness, factors that increase the likelihood of a successful intervention to prevent homelessness include a multi-agency, whole family approach, a single point of access to services and positive professional relationships. St Basil's Positive Pathway Framework, Preventing Youth Homelessness and Promoting Positive Transitions[16], is designed to help local authorities and partner agencies to develop a collaborative and more integrated approach to service development and delivery resulting in better outcomes for young people. It aims to prevent young people aged 16-24 from becoming homeless, and sets out the sorts of services and supports needed to help young people who do become homeless to build a more positive future. The underpinning features of this approach include the following:
- A whole systems approach to preventing youth homelessness and supporting planned moves where necessary;
- Investment in housing options;
- Seamless, joined up and coordinated services;
- Targeting early intervention;
- Developing significant, positive relationships with one or two professionals;
- Providing information and advice to young people and their families at all stages of the pathway;
- Supply and affordability of suitable housing to ensure young people's housing needs are considered in housing strategies and commissioning;
- Progression to independence through a range of housing options
- Ensuring a strong focus on building up skills, focus and motivation needed to securing employment.

6.7.3. The Positive Pathway model has been used extensively throughout local authorities in England. Where implemented this model has been found to have a significant impact on local authority provision, including their use of data and their

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[14] The Regional Good Practice Guidance agreed by NIHE and HSC Trusts "Meeting the Accommodation and Support Needs of 16-21 year olds" (Revised 2014)

[15] UNOCINI - Understanding the Needs Of Children In Northern Ireland

[16] Final-framework1_PositivePathway_A4.pdf (stbasils.org.uk)

understanding of young people's needs. An evaluation of the implementation of this model found that local authorities reported this had led to improved services, more effective use of scarce resources and better outcomes for young people.[17] St Basils has also developed pathway frameworks for care leavers and for young people involved with youth justice.[18] [19] The purpose of these pathways is to promote better collaborative working between statutory and voluntary sector organisations to deliver flexible support and services. The pathway framework also supports the work of commissioners by informing local housing strategies and perhaps most critically, the supply of suitable supported accommodation and housing provision for young people aged 16+ making the transition from care.

6.7.4. Some JCSA projects currently provide emergency accommodation and support (referred to as assessment beds) to young people aged 16 and 17 where family breakdown has occurred. All assessment beds are funded by NIHE/SP and current referral criteria restricts access to include only young people aged 16 and 17 who present as homeless to a Housing Executive office. It is therefore intended that the Housing Executive is the referral agent for young people not already known to social services and who can be placed in supported accommodation for an assessment period of up to 10 days. Table C below sets out the provision of 12 assessment beds, corresponding utilisation and referral source. There are 2 beds each within the BHSCT, NHSCT and WHSCT; 6 beds in the SEHSCT (2 beds in each of the three projects); and no assessment beds in SHSCT.

Table C - Assessment Bed Provision & Referrals by Trust Locality

	BHSCT	NHSCT	SEHSCT	SHSCT	WHSCT	Total
No of Beds	2	2	6	0	2	12
No of Referrals	34	10	56	0	24	124
Referred by NIHE	26	1	49	1	1	78
Referred by Trust	8	9	6	0	23	46
*NIHE referral for YP living in SHSCT locality 122 young people aged 16/17; 2 young homeless aged 18+ (1 BHSCT;1 SEHSCT)						

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[17] The Positive Pathway Model: A Rapid Evaluation of its Impact (stbasils.org.uk)

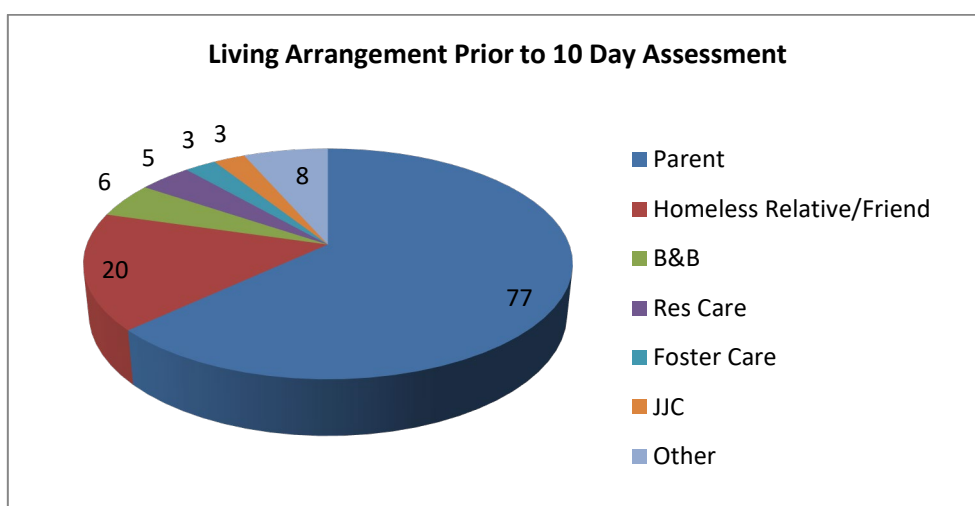[18] Care Leavers Accommodation and Support Framework, St Basils and Barnardos, 2015 Finalframework2a_CareLeavers_A4.pdf (stbasils.org.uk)

[19] Youth Justice Accommodation Pathway, St Basils, 2019) Finalframework3_YouthJustice.pdf (stbasils.org.uk)

6.7.5. There were 122 referrals of homeless 16/17 year olds accepted into assessment beds on an emergency or unplanned basis during the two year period.[19] Data relating to referral source showed NIHE as the main referral agent in the South Eastern Trust, Northern Trust and Belfast Trust. In contrast, the provider of the two assessment beds in the Western Trust reported 96% of all such referrals were received from the Trust.

6.7.6. Analysis of quantitative data provides evidence that there is significant variation by Trust and Housing Executive in referral trends and pathways in response to the needs of children aged 16 and 17 who experience family breakdown and are on the edge of care/ at risk of becoming homeless. Further analysis of referrals to assessment beds by project for the two year period shows that referral criteria related to the young person's status, referral source and length of time living in a project was not being adhered to and most significantly, there was insufficient evidence of a need for the current configuration of assessment beds within some projects. This was particularly evident in the South Eastern Trust where assessment bed occupancy rates in the three projects ranged from 25% to 65%.

6.7.7. The quantitative and qualitative data collated during the review has evidenced that by the time young people aged 16/17 present as homeless to one of the statutory agencies they are already experiencing crisis and often to the extent where family relationships have already broken down. This is evident when looking at data on the reason for referral and is also demonstrated in Figure 10 below on living arrangements immediately prior to moving into an assessment bed. Family breakdown was the main reason for referral for over half (58%) and over a third (37%) were already living away from parents in a range of temporary living arrangements and were therefore already homeless at the point of entry to the project.

Figure 8

Living Arrangement Prior to 10 Day Assessment

- Parent
- Homeless Relative/Friend
- B&B
- Res Care
- Foster Care
- JJC
- Other

6.7.8.   Almost two thirds of young people referred into an assessment bed (63%; n77) had been living with a parent at the point of referral and 17% were already homeless and living with a friend or relative at the point of moving into JCSA. Around 5% (n6) were living in Bed and Breakfast immediately prior to moving into an assessment bed.

6.7.9.   It is estimated that at least 35% (n 44) of all young people received into projects for a 10 day period of assessment were unplanned referrals for children already known to Trusts in a safeguarding or family support capacity as children in need. A further 27% (n 34) were looked after children who were placed in assessment beds on an unplanned basis in the absence of a suitable care or supported living placement.

6.7.10.   The status of young people as demonstrated in Figure 11 shows that the referral criteria[20] for assessment beds was not being adhered to as a significant number of these young people were either already known to Trusts as children in need or looked after children who experienced placement disruption and/ or homelessness. This referral pattern evidences the need for more responsive service models that are capable of working more preventatively with young people to reduce the number of emergency and unplanned moves. Where it is not possible for a young person to remain living with family, there is a need to expand the range of accommodation and support options to support planned transitions to suitable accommodation matched to the young person's needs.

Figure 9

Referrals for 10 Day Assessment by Young Person's Status (16/17 year olds)

- Homeless/ Child in Need
- Looked After Child
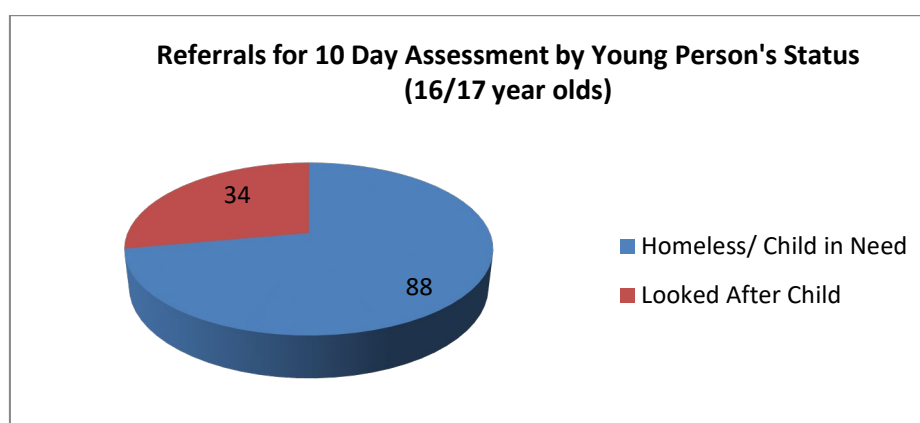
6.7.11.   Stakeholders provided feedback on assessment, planning and intervention relating to 16 and 17 year olds referred to the 10 day assessment provision within JCSA projects. Their views were sought on the quality and nature of crisis intervention and support to young people and their families. Provider data and stakeholder intelligence highlighted a number of themes about pathways into, through and out of the assessment beds. Most stakeholder groups expressed

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[20] 10 day period to complete UNOCINI initial pathway assessment

concerns about the lack of suitable accommodation and support options for young homeless aged 16/17 and the uncertainty they experience about where they will be moving to following the time limited 10 day period of assessment.

" … there is an unknown for them, an increased level of pressure, they don't know whether their parents will take them back… this is a 10 day assessment, they don't know what is happening and you can't tell them until it's [assessment] concluded… one young person… he was very vocal about saying you need to do something. "These people have told me that come Thursday at 12 o Clock my bags are packed and I'm out of here". I was feeling the pressure from the young person but if his parents didn't take him back I didn't know where he was moving to". (Social Worker)

6.7.12.   All Trusts cited issues relating to the lack of availability of care placements and suitable supported accommodation due to age, complexity of need and locality, leading to an over-reliance in some Trust localities on the use of assessment beds in JCSA projects to respond to emergency admissions to care and unplanned placement moves. Young people placed in assessment beds with no clear exit plan discussed how this experience negatively impacted them. The uncertainty about their future left them feeling stressed and anxious and some described this as a period of being in limbo.

"Because of my situation I was building relationships but I didn't know if I would be leaving the next day. It was very unsettling". (Male, aged 17)

6.7.13.   Some of the young participants spoke about having to wait for some time before suitable accommodation was identified. The delay in moving to suitable accommodation for some was further compounded by the Covid19 pandemic. Young people relayed their experiences of staying in a range of temporary accommodation including hotel, bed and breakfast, hostel, and staying with friends and family.

6.7.14.   The assessment beds provide a vital resource to the Housing Executive and Trusts in providing a crisis response to meeting the accommodation and support needs of young people presenting as homeless. There was some evidence of the lead agencies working in partnership to respond to homeless referrals and delivering joint training to staff to support adherence to regional good practice guidance. The role of dedicated young people housing advisers and social workers for young homeless aged 16 & 17 was considered positive in responding to assessing and planning for support and accommodation needs. Overall however, there was a lack of consistent and effective joint working between Trusts and the Housing Executive and thus a more robust and joined up response is needed to assess and determine if a young person requires immediate accommodation prior to moving to a project.

6.7.15. Some housing officers advised they were feeling ill-equipped to assess and respond to homeless referrals for young people aged 16 and over with complex needs, mainly relating to mental health, substance use and trauma. These challenges have been compounded by the impact of Covid-19 on working practices resulting in homeless assessments being completed via telephone and decisions being taken by the Housing Executive to place young people in supported accommodation in the absence of an immediate social work response including a home visit to the young person and their family.

6.7.16. There was a strong correlation between the availability of the dedicated homelessness social workers within Trusts and a reduced need for emergency/ crisis accommodation. Where these workers were available in Trusts it afforded a more robust and responsive approach to preventing youth homelessness and critically, to supporting planned admissions to care when necessary. This was particularly evident within the Southern Trust where there is no assessment bed provision within the two projects in its locality and referrals are made on a planned basis. There are two dedicated social workers based within the Trust adolescent service to support young people aged 16 and 17 on the edge of care/ homeless and their families. This dedicated resource is essential to ensuring that families are supported to remain living together where at all possible and safe, and to ensure optimum use of supported accommodation as a positive pathway for young people.

6.7.17. The objective of supported accommodation projects should be to avoid housing crisis and ensure that young people do not experience future homelessness. Project staff advised they were often not consulted or involved in assessment and planning during the 10 day period in an assessment bed. Two thirds of young people exceeded the 10 day period usually because there was no agreed plan for a return home to family and/ or no alternative suitable accommodation identified. Pathway data for the 122 young people aged 16 and 17 who moved into an assessment bed showed that 21% (n26) continued to live in a JCSA project; just over one fifth (22%) returned to live with a parent and 10% moved to a care placement (residential care 7%; foster/kinship care 3%). Almost one third moving out of an assessment bed were homeless and moving to either bed and breakfast or hotel accommodation (18%) or to live temporarily with a friend or relative (14%).

6.7.18. The majority of stakeholders agreed that joint working across agencies should be strengthened to more effectively prevent some young people becoming homeless and entering the accommodation pathway. Providers would like to work more in partnership with key statutory agencies. They agreed there are opportunities for all staff to work differently with each other to better support young people and their families and to achieve reunification where it is safe to do so. Some respondents suggested the 10 day period in JCSA should be extended to include sufficient time to allow information sharing, joint decision

making and coordinated interventions including family mediation and family finding.

6.7.19. There is a need for Trusts and Housing Executive to review current responses to youth homelessness and pathways experienced by young people. The availability of dedicated homeless social work interventions and partnership working with NIHE housing advisers is an essential first step to providing an effective response to young people particularly those aged 16/17 who present in housing crisis. The lead statutory agencies should consider how assessment bed provision could be better utilised and the role of JCSA projects in homeless prevention. There is a need for key partner agencies with responsibility for homeless prevention and meeting accommodation and support need to work together to develop and adopt good practice pathway frameworks so as to ensure a more positive pathway and coordinated approach to meeting the needs of 16 and 17 year old homeless.

6.8. Referral Process

6.8.1. The referral route and referral thresholds into projects varied greatly by project and Trust locality. The referral and pathway process was dependent upon: 1) the age and status of the young person; 2) the nature of the referral (emergency, unplanned or planned); 3) the referring agency; and 4) the authority responsible for meeting the young person's accommodation and support costs. In effect, although the projects are jointly commissioned and co-funded, a joint approach is not adopted across all projects in relation to gatekeeping new admissions and monitoring young people's pathways into and out of supported accommodation projects.

6.8.2. The projects which experienced a high number of emergency and unplanned referrals were those which host assessment beds for 16/17 year old homeless and/ or accept referrals from the Housing Executive for 18+ homeless. The percentage of planned referrals by project ranged from 29% to 100%[21]. The data illustrated in Figure 12 showed that the majority of care experienced young people (71% of looked after children and 61% of care leavers) had a planned move into services and around 32% of all care experienced young people had an unplanned move into a project. The number of emergency and unplanned admissions was therefore an area of concern particularly as it was reported some may have been prevented through a more joined up and robust homelessness prevention approach. Other admissions could have been avoided if alternative suitable accommodation and support options were available. It is important that jointly commissioned projects are used for their intended purpose based on assessed needs and that a referral to such provision promotes a positive pathway experience for young people.

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[21] Jefferson Court experienced the lowest proportion of planned referrals at 29%

Figure 12
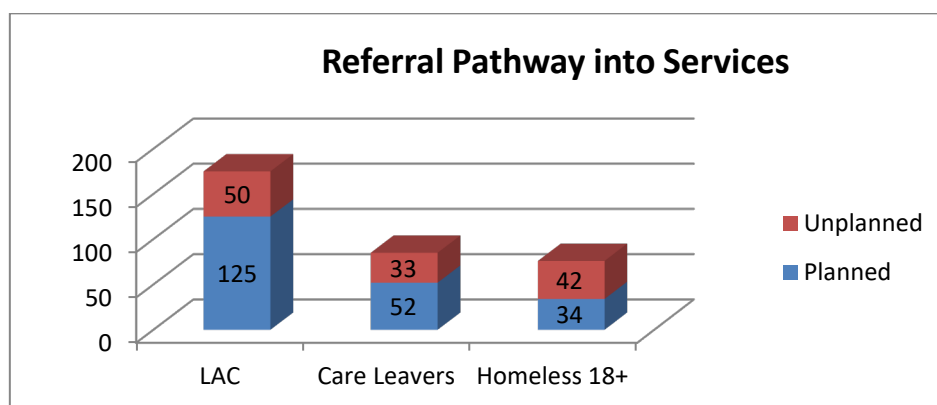
6.8.3.   Across a number of the projects whose criteria extended to both care experienced and homeless young people there was no single consistent, unified referral pathway approach as young people are referred by separate agencies depending upon their status and circumstances.

6.8.4.   In two of the five Trust localities JCSA projects are jointly commissioned primarily for care experienced young people[22]. Comparative to other projects these six projects tended to be smaller in size (4-9 beds) with the exception of the MACS project based in Belfast which accommodates 18 young people. Provider data showed that the majority (87%) of referrals to these projects were made on a planned basis involving an assessment and matching process and presentation to a panel. The Trust is the main referral source and the Housing Executive had minimal or no involvement in the referral and panel process. Occupancy levels within five out of six projects were consistently high.

6.8.5.   The referral route for more than two thirds of care experienced young people was planned and made by the responsible Trust. The completed referral and pathway assessment was shared with the provider who undertook an assessment to determine if the young person's needs could be met within the project. This assessment process involved meeting with the young person and relevant others and often took a number of weeks to complete.

6.8.6.   Some stakeholders described a single point gateway approach to receiving all planned referrals to the projects for care experienced young people. This was done through a panel which considered all referrals to the JCSA projects within the Trust locality. This process was described to be of benefit to the providers as it allowed the means for a more joined up, coordinated approach to managing and prioritising all referrals with a view to better matching of young people to projects. This approach aimed to ensure appropriate use of resources so that young people with medium to high and complex needs which would be best met

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[22] Southern Trust and Belfast Trust;

within this model, are able to access the accommodation in a planned and timely way. There was also evidence of referrals for care experienced young people whose support needs were beyond the capacity of the projects as they are currently configured who were being referred to projects in the absence of an alternative more suitable placement.

6.8.7.   The Strategic Review of Temporary Accommodation has highlighted the increased use of supporting people funded temporary hostel and nonstandard accommodation such as bed and breakfast because of relatively low levels of homelessness prevention and where demand was outstripping supply. There has been a significant increase in the number of homeless presenters awarded FDA status and alongside this an increase in referrals to temporary accommodation, mostly attributed to the expansion in the use of B&B accommodation. Feedback from all stakeholders during this review of young people's jointly commissioned supported accommodation confirmed a lack of suitable temporary accommodation for young people presenting as homeless and that some had been referred to JCSA projects in the absence of any other suitable accommodation and to avoid referrals to B&B accommodation and generic adult homeless hostels.

6.8.8.   The Housing Executive housing solutions staff reported that there was a lack of availability of supported accommodation for young people and cited difficulties in gaining access including into the JCSA projects. As noted in Section 5, the referral criteria within some projects do not extend to 18+ homeless NIHE referrals. Housing advisers report that the lack of supported accommodation options led to young people aged 18+ being placed in adult hostel or non-standard accommodation. The Housing Executive has adopted a preventative approach to homelessness with the aim of increasing homelessness prevention to ensure less reliance on supported accommodation. During the review stakeholders had limited knowledge of homeless prevention services and identified gaps in the provision of sustainable, funded homelessness prevention services and housing provision for this age group.

6.8.9.   Whilst some young people were recorded as having a planned pathway into the projects, through stakeholder engagement it became apparent that the majority of young people aged 18 + from a non-care background had moved into the project within 1-2 days of referral which is reflective of the largely unpredictable nature of homelessness and the legislative duty of the Housing Executive to place those assessed as homeless and in need of emergency housing. A planned pathway for 18+ homeless was more evident for a small number of young people including those who were sofa surfing and where the provider also delivered housing floating support services. The floating support worker was able to identify the young person's housing and other support needs, allowing for a more seamless and appropriate referral / admission transition into JCSA.

6.8.10. When discussing the needs of 18-21+ presenting to the Housing Executive as homeless, provider staff relayed that at times only minimal or limited information is known about their family and relationship history, health needs and any risk factors. This was attributed to the emergency and unplanned nature of homeless presenters to the Housing Executive and the compressed timescales for completing an assessment and making a referral to supported accommodation projects, most often on the same day. Whilst there was evidence that some 18+ homeless had support needs which required 24/7 support, quantitative data, focus groups and provider staff survey showed that a number of those referred to the projects did not present with medium to high needs and therefore may not have required support on a 24/7 basis.

6.8.11. Housing Advisers undertaking a homeless assessment are reliant upon the young person sharing information about their circumstances and any contact with parents or kin and other professionals/ agencies can only be progressed with the young person's consent and where it is safe to do so. Housing advisers are required, with the young person's consent, to contact family and undertake other multi-agency checks relevant to the presentation of a homeless young person who is being referred to an integrated model of supported accommodation. Referral information is sent to the project and if an offer of emergency accommodation is made the young person usually moves into the service on the day of referral. Project staff discussed what they perceived to be the limitations of the role of the housing adviser when completing a homelessness assessment within compressed timescales.

"There are times when NIHE do not have all the information as it is not their role. However sometimes after young people move in risks become known". (Project Support Worker)

6.8.12. Providers stated they would prefer the Housing Executive to furnish them with a comprehensive needs assessment to enable them to complete a risk assessment at the referral stage and determine if accommodation could be offered to the young person. The staff survey of project staff showed that 43% felt the Housing Executive provided them with sufficient information on the young person's support needs and any associated risks.

"More clear communication would be a great benefit to manage risks and offer safeguarding. Trust referrals are more detailed and give more information. NIHE are limited to what information the young people share with their housing officer, risks become more apparent after several weeks, even months". (Project Support Worker)

6.8.13. Housing Advisers discussed the challenges they face in their role in undertaking homeless assessments where young people have high support needs.

"From my experience in Belfast the young people are presenting more and more with, drug and alcohol addictions… You could be dealing with a young person… who has serious mental health problems and we are not equipped to deal with that". (Housing Adviser, Belfast)

6.8.14. Housing Advisers also reflected on the impact of the Covid-19 pandemic due to changes in working practices and the additional challenges this presents when completing homeless assessments.

"In the past year it's become even more complex because we are dealing with things over the phone, we are not seeing the young person face to face in the office and therefore we cannot see how they are presenting, we are trying to gauge this over a phone call." (Housing Adviser)

6.8.15. The Regional Good Practice Guidance on Meeting the Needs of Young People aged 16-21 sets out the statutory duties, roles and responsibilities of the respective agencies. There is however no regionally agreed up to date information sharing protocol/ process in place between the Housing Executive, Trusts and Providers for the placement of 18+ homeless young people into JCSA projects on an emergency basis alongside care experienced young people aged 16+. Across most projects NIHE referrals are not presented to a supported accommodation panel in same the way they are for care experienced young people due to the unpredictable nature of homelessness which can present difficulties for providers relating to safeguarding and risk management. Further consideration should be given to how the key agencies can strengthen referral and admission decision making processes to take account of risk factors and any matching considerations in relation to young people already living in the project.

6.8.16. In order to ensure the optimum use of this integrated 24/7 model of accommodation and ensure that it remains relevant to strategic need, the current referral criteria, assessment and matching process should be reviewed to ensure safe, quality services that are underpinned by effective governance arrangements. This should include an information sharing agreement between lead agencies on the safe sharing of confidential information relevant to the gatekeeping and management of referrals into projects and which is compliant with General Data Protection Regulation (GDPR). The regional good practice guidance developed in 2014 should also be reviewed to ensure this is reflective of associated changes.

6.9. Psychologically and Trauma Informed Supported Accommodation

6.9.1. Qualitative and quantitative data collated during the review reflected that many care experienced young people and those who have faced homelessness have endured complex trauma. Research shows that the most positive experiences of

care and the best outcomes for looked after children are associated with strong relationships with primary care givers, stability in care and supported transitions to greater independence in adulthood. This holds particular significance for those young people leaving residential care who are among the most vulnerable in our society and often have very complex and challenging needs which require specialist services. Many are living in residential care because they have experienced severe neglect, abuse or trauma, have complex disabilities, or social, emotional or behavioural difficulties, including offending and substance misuse. Typically they will have endured multiple care placements and moved to residential care as their needs could not be met within a familial care placement. Young homeless may also have endured adverse childhood experiences, family instability and previous homelessness and multiple housing moves.

6.9.2.   The current development of a regional Framework for Integrated Therapeutic Care is a trauma informed approach to meeting the physical, emotional and social needs of looked after children and young people [23]. The Framework is comprised of organisational commitments and specific practice delivery approaches with the aim to support a child's development and recovery by developing a sense of understanding, mutual trust and empowerment. The Framework provides the building blocks to support young people and their carers to engage in a wide range of activities that support healthy development, community integration and trauma recovery. One such building block relates to ensuring a trauma informed response to the needs of young people transitioning to adulthood.

6.9.3.   Psychologically Informed Environments (PIEs) are services that are designed and delivered in a way that take into account the psychological needs of the individuals using them. The PIE framework has been adopted and implemented across some homeless and supported housing services in England [24]. They consider how best to support those that have experienced trauma in the layout and design of their services as well as how staff behave and work with service users. The purpose of a PIE is to help staff understand where the young person's behaviours are coming from and therefore to work more creatively and constructively with challenging behaviour [25].

6.9.4.   The theory and application of the Framework for Integrated Therapeutic Care and PIEs strongly resonate with the presenting needs of young people living in supported accommodation, the challenges facing staff and the frequently cited difficulties in accessing appropriate specialist services, particularly relating to the

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[23] Northern Ireland Framework for Integrated Therapeutic Care Looked After Children and Young People - Therapeutic Care | Department of Health (health-ni.gov.uk)

[24] Psychologically Informed Services for Homeless Young People (2012) Psychologically-informed-services-forHomeless-People.pdf (pathway.org.uk)

[25] Psychologically Informed Environments No One Left Out: Solutions Ltd for Westminster City Council (2015) Creating a Psychologically Informed Environment - 2015.pdf (homeless.org.uk)

co-occurrence of poor mental health and addictions. If young people are to experience continuity of support and relationships during transitions there is a need ensure that service delivery models of supported accommodation are underpinned by a psychologically and trauma informed framework.

6.9.5.   These complex and interrelated issues can be highly challenging for all services and none less so than the independent provider sector where many of the staff may not have professional qualifications, clinical experience or direct access to psychology support. The impact of multiple Adverse Childhood Experiences (ACEs) is such that whilst care leavers and young homeless may be most in need of psychologically informed support, they may be least able to access it, and often for reasons relating to the impact of the trauma they are enduring.

6.9.6.   The review found some evidence of good practice relating to the formulation and implementation of therapeutic plans to support care experienced young people prior to, during and following their transition to supported accommodation. Continuity of therapeutic support was however not routinely in place for all young people who required it and bearing in mind the multiple and complex needs of young people moving into these projects, this was noted to be a significant deficit in supporting positive pathways for young people into, through and out of JCSA projects.

6.9.7.   The JCSA sector can undoubtedly be a very rewarding and yet challenging environment in which to work. The project staff in all five Trust localities spoke positively about the benefits of training facilitated by clinical leads within TTLAAC however this tended to occur on an adhoc basis rather than being agreed as part of the provider annual staff training programme. For young people to progress well into early adulthood and beyond, and to achieve the good outcomes of which they are so deserving depends upon the hard work, commitment and dedication of a well skilled, resourced and supported workforce which is able to meet demand now and into the future. An example of good practice was cited in the NHSCT where TTLAAC provided regular reflective group sessions to project managers with a focus on a trauma informed approach to responding to the needs of young people living in the projects.

6.9.8.   The enhanced role that TTLAAC services undertook to support projects during the initial stages of the Covid19 pandemic was considered by stakeholders to be of value to both young people and staff, and in particular the role of the Trust primary mental health practitioner aligned to TTLAAC. Stakeholders however advised that often the team of professionals and specialist supports around care experienced young people frequently falls away or diminishes following their move into supported accommodation. Stakeholders were unanimous in their views of the need to develop a psychologically and trauma informed approach to providing care and housing support to all young people living in supported accommodation projects. Providers highlighted the significant challenges

experienced in coordinating services for care leavers and all providers said their staff needed more specialist mental health advice and support.

6.9.9. The experiences of young people as they aged out of care, particularly in terms of their perceived involvement and engagement in the process of preparing and planning to leave care, revealed that most young people considered housing options had not been fully discussed or explored with them and around a quarter felt they had no say. Some had come to live in a project in the midst of a crisis, often as a result of becoming homeless, including some care leavers who were homeless on their 18th birthday.

"I didn't really have a choice as there was nowhere else for me to go. I didn't know what would happen if somewhere wasn't found". (Male, 18).

Some young people described varying degrees of feeling involved in making plans for their future and in the decision to move to supported accommodation.

"They decided I was moving into supported accommodation… there was three places for me to pick from, so I came here". (Male, 19)

6.10   Thresholds of Need and Risk

6.10.1. There were mixed responses from providers as to what they considered appropriate thresholds of need and risk within supported accommodation projects. Although the hybrid model of supported accommodation is for young people with medium to high needs who require support on a 24/7 basis, this was not borne out during discussion with key stakeholders.

"I would probably say we provide low to medium support although young people coming from care have complex needs and behaviours. Tolerance levels in residential care are much higher than in supported living. A young person in a children's home can smash windows or verbally abuse or assault staff and there will probably not be too much of a consequence for that young person. However if they do this in supported living you are talking about ending their placement and possibly having a criminal record." (Project Team Leader)

6.10.2. Stakeholder's shared their experiences and perceptions about variance in thresholds of need and risk that operated across projects which influenced and determined referral outcome. Therefore, despite being classified as providers of medium to high support, some projects were more open to accepting referrals for young people with higher support needs than other projects. It was evident there was sometimes a mismatch between the high level of support young people experienced when living in care placements and the support then available to them during and after their transition to a project. The complexity of need has not

reduced however the support available from project staff can often be at a reduced level to that available to them when living in a care placement.

"There is a steep learning curve for young people moving from care to supporting living. We have young people who are experiencing trauma, family breakdown, mental health, addiction, CSE – all those things are really challenging and difficult. But when you put them into supported housing and you tell them 'you have to start looking after yourself now, cook your own meals, budget your money, there's no pocket money, if you go out and can't get home we're not coming to get you'… all these things make it really difficult for young people moving from care". (Project Team Leader)

6.10.3. When considering the place of JCSA projects on the current and future continuum of provision, Trust participants acknowledged that the strategic landscape has changed. A number of service developments have resulted in changes to how supported accommodation projects are utilised and their future purpose and function within the wider strategic context. The strategic landscape has shifted and these projects whilst a valuable concept, have not changed and evolved accordingly and are therefore no longer closely aligned with the strategic and policy context underpinning service delivery.

"Some [projects] were commissioned at a time when young people moving in may have been more settled, engaged in ETE. The profile of young people moving into these projects is changing, not just because of the prevalence of drug and alcohol misuse and mental health needs but also because we have alternative options for young people who might previously have been referred to the projects, for example supported lodgings and Trust transition properties".
(Trust Leaving & Aftercare Service)

6.10.4. Trust Leaving and Aftercare services are developing more bespoke models and accommodation solutions for young people with multiple support needs and who often engage in high risk taking behaviour.

"One size does not fit all,.. when referring some young people in the past I have asked myself, are we setting them and the young person up to fail, and we don't want to do that. We are trying to develop a range of accommodation and support models and a portfolio of accommodation options which are needs led and where we have flexible supports available to meet their needs. The bricks and mortar is just one element of the accommodation solution – it provides the base but what support is wrapped around [the young person] is what makes it work".
(Trust Head of Service),

6.10.5. When discussing the existing capacity of services to meet the holistic needs of young people moving into projects different thresholds of need and risk were evident across projects. It is important to note thresholds operated by Providers

are also influenced by project characteristics including their origin, size, layout, location and staffing levels. There is little uniformity in the current provision within and across Trust localities which makes it difficult to undertake a comparative analysis of projects.

6.11   Moving from Residential Care

6.11.1.   All key stakeholders considered that young people leaving residential care had high support needs. In projects which accommodate both care experienced and homeless 18+, comparisons were often drawn between the two groups on the multiplicity of their needs and the pathway experience into projects.

"Young people who need care are becoming more and more challenging and need a high level of support. Young people are definitely not prepared for moving from care to supported living and the transition is really difficult". (Project Team Leader)

6.11.2.   The data also reflected that the majority of young people leaving residential care (91%, n 60) were recorded as having planned transitions however the perception of what constituted a planned move and how this occurred, differed across projects and stakeholders. There was evidence that some young people experienced accelerated and condensed transitions to supported accommodation with approximately one in five young people aged 16 at the time of moving from residential care to a project. Whilst some placement disruptions can occur quickly and need an emergency response, providers also expressed concern about a lack of planning leading to compressed transitions for some young people leaving residential care at age 16 or experiencing what was described by some as a 'cliff edge' scenario very close to their 18th birthday. Although described as a planned move, these transitions were the cause of much stress and anxiety which was often exacerbated by a combination of pre-existing trauma, a lack of preparation and feelings of isolation and loneliness.

"I was homeless on my 18th birthday. At the start they wanted me to move out of Belfast but I didn't want to, so they put me in a Foyer for three days. Then my PA told me I could come here". (Male, 20)

6.11.3.   Of eighty young people aged 16 years that moved into the JCSA project, approximately half were placed in an assessment bed and thus stayed only a short period in the project. A commonly held view was that 16 year olds are too young to move to supported accommodation and that care leavers, and in particular those moving from residential care, were often ill-prepared for the move.

"I personally feel that young people are being transferred to supported living much too soon and very unprepared as they are aged 16 [and there are] negative outcomes for the young people and the staff that are supporting them". (Project Team Leader)

"Young People moving into supported accommodation aged 16-18 are very young and if transitioning from a children's home or foster placement - supported accommodation can be lonely and very different". (Project Support Worker)

6.11.4. When discussing young people's readiness for moving from residential care to supported accommodation some projects adopted a more trauma informed, person-centred approach to supporting planned transitions staged at the young person's pace. Some stakeholders discussed close links between providers and children's homes however most agreed that much stronger collaboration would support a more seamless and less stressful transition from residential care to supported accommodation.

"We have had a number of young people who have moved from one Children's home and they are very, very dependent at the point of moving into the service. The residential staff team have been very supportive… they spent a week in and out of the project helping one young person to settle in. The transition was staged but not slowly enough… he was so distressed… it really was heart-breaking… the level of his distress in response to every structure and comfort he had known been taken away from him and I think it was all too much for him. He has come a long way since then but it is important to keep in the back of your mind that this is how difficult it is for young people. It is not just the trauma from early childhood, it's the retriggering of all that when everything around them changes". (Project Service Manager).

6.12   Moving from Juvenile/ Criminal Justice

6.12.1. The difficulties faced by many young people who are involved within the juvenile and criminal justice systems in accessing suitable accommodation and support are well documented. Provider data and stakeholder feedback confirmed much of what is already known about the challenges of meeting the complex and high needs of these young people. The data identified that 16 young people moved into JCSA directly from secure settings, including Juvenile Justice Centre (12) and Prison (4) and with the exception of one 18 year old, all were care experienced young people referred by Trusts. The data therefore reflected that young people referred into a project were much more likely to secure a place if a Trust made the referral and/or they were already looked after. Youth Justice Agency participants referenced the challenges in finding suitable emergency accommodation for young people, including access to jointly commissioned

projects. This particularly related to those on bail, resulting in them unnecessarily remaining in custody for a longer period.

"Accessing supported accommodation can be difficult as they are often at full capacity and admissions are generally planned. My experience is that there is more planning for children who are coming out of a care placement or those on the edge of care where agencies are involved, whereas [a referral from YJA for a young person in JJC] has to be incredibly reactive today, tonight… and it's about the availability of crisis accommodation and how difficult that is to manage. My understanding is that most access to supported accommodation projects is through social services – we can't access this directly ourselves". (Youth Justice Agency)

6.12.2.   The exit pathways for young people aged 16/17 in JJC who are at risk of homelessness on discharge are outlined in the regional good practice guidance. There was no evidence that a planned pathway into services resulted in a positive pathway experience for the young person through and out of services. Whilst the majority (n 14) were recorded as having a planned pathway into supported accommodation, thirteen experienced unplanned moves out of the project. The length of stay was short lived for most of these young people, 13 had lived in services for less than 12 weeks. Most typically, these young people were asked to leave the project due to aggressive behaviour, risk to others and damage to property.

6.12.3.   JCSA should not be seen as a panacea for meeting the accommodation and support needs of all Looked After Children aged 16 and 17, care leavers and young homeless. Evidence indicates that on occasions and in the absence of suitable alternatives, referral to a project was sometimes made where no other suitable living arrangement could be achieved and to avoid use of unsuitable alternatives. There are unrealistic expectations about the type and level of support which can be provided to young people with high and complex needs within some projects given their size, referral criteria, and staffing model. In order to ensure the optimum use of this integrated 24/7 model of accommodation and ensure that it remains relevant to strategic need, the current referral criteria, assessment and matching process should be reviewed to ensure safe, quality services that are underpinned by effective governance arrangements.

Pathway Through Supported Accommodation

6.13   Providing Care and Support

6.13.1.   Joint Commissioned Supported Accommodation Projects are governed by the minimum standards which set out the minimum standards for the provision of

housing support, care and accommodation.[26] The minimum standards are centred around four quality themes which include Care and Support, Physical Environment, Staffing, Management and Leadership; and Assurance and Monitoring.

6.13.2. The standards require that each young person has a specific support plan in place following admission to JCSA which sets out the goals of the placement and what is to be achieved to enable young people to move towards and progress to community living. The aim of the projects is to support young people to develop the skills and confidence to progress towards greater independence, prevent future homelessness and isolation in later life.

6.13.3. This section of the report will draw upon the lived experiences of previous and current residents of the projects as well as feedback from other key stakeholders to consider the extent to which the projects were able to deliver a quality service and support a planned transition out of the project at a time when they are ready, to suitable and affordable housing.

6.14   Staff Availability

6.14.1. Developing positive relationships which are characterised by genuine caring, availability, reliability, continuity of relationships and positive role models is the cornerstone of an effective care and support network around young people living in JCSA. To achieve this there should at all times be suitably qualified, competent and experienced persons working in the projects. It is critical that the number of staff is appropriate to meet the holistic needs of young people. The review found significant variation across projects in terms of the staffing and management structure, skills mix, and perhaps most markedly in the staffing rota and the number of frontline staff available to provide direct support to young people. Most, but not all services operate with a minimum of two support workers during daytime hours, however this reduces to one staff member on a Saturday and Sunday resulting in lone working practices for half of all projects.

6.14.2. Most projects had two wake-in night staff due to risk management issues associated with the young people which typically related to poor mental health, self-harm and substance misuse whereas other projects had staff onsite on a 24/7 basis but did not employ sleep-in staff. One project had security staff onsite at night due to previous issues with members of the public trying to gain entry to the building and some projects had surveillance cameras on site.

6.14.3. During online visits staffing levels and staffing rota were discussed and project staff referenced not being able to provide transport and accompany young people to appointments. Some staff discussed limited availability to spend time

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[26] Standards for Young Adults Supported Accommodation Projects in NI (DoH, 2012)

undertaking support activities with young people such as shopping, seeking employment, attending health appointments, recreational and leisure activities. Support staff reported that fire risk assessments required a staff presence in the building at all times which placed restrictions on their availability to leave the building to undertake support activities. Staffing levels within projects therefore restricted the extent to which planned, structured, group activities could be undertaken. Given what is known about the variation in the size of projects and the support needs of young people living in supported accommodation, staffing levels and ratios are generally considered insufficient to provide safe and good quality social care and housing support and to achieve positive outcomes for young people.

6.15   Positive Relationships

6.15.1.   A key objective of supported accommodation is to empower young people towards more independent living. This requires intensive support around areas such as personal and family relationships, boundaries and safeguarding, developing the skills to avoid financial and other exploitation.
Most young people reported positive experiences of the support they received from the project staff. Strong, supportive relationships with staff generally indicated a more positive experience overall for the young people and they attributed being happy living in the project to the positive relationship the staff had developed with them.

"The staff that work here are amazing, very understanding. They talk about emotional health. They are very easy to talk to… you can have some craic with them". (Male, 19)

"I feel the staff are really caring and they do listen to me and want what is best for me". (Male, 19)

6.15.2.   Young people also discussed the importance of having their own space and privacy, and being able to exert some degree of self-autonomy whilst also being able to draw upon the support of staff when needed. The responses from young people highlighted the importance of a focus on supporting their *interdependence* rather than *independence*. They provided feedback on the important role staff played in helping them learn life skills. A few participants talked about *'growing up'* during their time living in the project, and the positive influence the staff team had in preparing them for more independent living.

"The best part is having staff there to help you, and it provides you with the space to learn before going out on your own properly." (Male, 19)

6.15.3. Young participants also discussed the importance of being supported to maintain relationships with others close to them including family and friends. For some, the most challenging aspect of living in a supported accommodation project related to moving to an area unfamiliar to them and the distance from parents and siblings. Being supported to live close to birth family or close to others where at all possible was therefore very important. Project rules on visitors were seen as problematic by some young people and the thing they would most like to change if they were in charge.

"the hardest thing about living in supported accommodation is the rules on visitors. You aren't allowed to have more than one visitor here, which can be really awkward because if have two friends and I feel bad not being able to have them over to visit me at the same time". (Female, 18)

6.16   Feeling Safe and Cared For

6.16.1. Almost all of the young people who gave feedback on their experience of living in supported accommodation said they felt safe and cared for in the project. Some of the participants reflected on past experiences in their lives when they did not feel the same sense of security, including periods of time spent '*sofa-surfing*' before entry to the project. Many of the young people talked about the importance of the staff team within the project making it '*feel more like home',* rather than *'somewhere to stay'.*

"I felt more safe there than I have felt in a long time".
(Female, 20)

"People are good to me. It is home to me now. I feel really safe". (Male, 17)

6.16.2. Some young people talked about feeling unsafe because of the needs of other residents, particularly relating to drug misuse. These young people tended to be living in larger projects whose origins were aligned to a homeless housing support model. A significant percentage (20%) of the young people shared some negative experiences of support from staff in their project. This generally arose due to a perceived lack of involvement by staff and young people feeling that they had not been adequately supported.

"I definitely did not feel supported. I had to reach out to staff and ask for support. This didn't feel right because these places are meant to be supporting young people with their mental health. Why do social workers tell you that you will be getting the right support for your needs, should that be your mental health, learning to live independently…I feel that staff should have shown more of an interest in me, especially since they knew that I was vulnerable and was suffering with my mental health". (Female, 20)

6.17   Practical Support

6.17.1.   Young people clearly valued the time invested in getting to know them and
          getting alongside them on a practical level to help with cooking, cleaning their
          flat, doing laundry, shopping, job interview skills, budgeting and opening a bank
          account, filling out forms, making appointments.

*"Totally support me with medication and health issues, doctor's appointments,
prescriptions. And life skills, like budgeting, cleaning, shopping, problem solving,
cooking. Always willing to help, even in the trickiest of situations, they support
me really well."* (Male, 17)

6.17.2.   Some young people suggested organising more activities and classes within the
          project, including group activities around cooking and life skills. Whilst some
          acknowledge that this has been more difficult due to the Covid-19 pandemic, this
          was also linked to the level of support from staff more generally.

*"There definitely needs to be more staff and more presence from staff to actually
support people to learn the skills that they need to cook food and to clean and do
laundry. There should be more cooking nights for young people and this could
be done in a group if there isn't enough staff to do this individually"* (Female, 20)

6.18   **Health Needs and Administering Medication**

6.18.1.   Whilst young people should be supported to make decisions about, and manage their own medicines where possible and safe to do so, one of the most frequently cited areas of unmet support needs related to support with storing and administering prescribed medication. The minimum standards for supported accommodation list policies which all providers should develop, including a policy for storage and administering medication. Providers currently do not have a policy in place for the storage, transportation and administering of medication and therefore responsibility for these matters rests with the relevant Trust.

6.18.2.   A range of measures have been put in place by providers to manage risks where is it assessed a young person cannot take responsibility for self-administering prescribed medication. These measures include social workers, personal advisers, and/ or residential staff transporting medication to the project up to three times per day to administer to the young person. There have also been occasions when this has been outsourced to a domiciliary care provider or other qualified health professional.

"Joint commissioned projects do not take responsibility for storing or administering medication for young people so Trust staff are calling daily to the project with the medication. The preference is that there would be a similar protocol in place to the one which exists in residential care to allow for safe storage and support with administering medication to young people until they are able to take on this responsibility". (Head of Service, HSC Trust)

6.18.3.   All providers should have a policy in place for the storage and administering of medication which clearly outlines their role and responsibilities in relation to joint working and information sharing with health professionals and other social care practitioners to enable young people to receive integrated, person-centred support from their keyworker and other project support staff.

6.19   **Education, Training & Employment (ETE)**

6.19.1.   Approximately half (49%) of all young people were not engaged in education, employment or training (NEET) on entry to supported accommodation and a similar proportion were NEET when moving on from a project. Some young participants shared that staff had helped build their confidence and encouraged them to develop the skills to do new things and shared feedback with VOYPIC on the support they received to access and stay engaged in education, training and employment. Two thirds of 41 participants interviewed were engaged in ETE. Only three were employed and some advised their part-time employment mainly in the hospitality sector was interrupted due to the Covid-19 pandemic. All

providers discussed the challenges in supporting care leavers to re-engage with education, training and/ or to secure employment, particularly for those who have already experienced periods of inactivity prior to moving into supported accommodation.

"When you are looking at ETE, we are seeing an increased number of young people where showering, eating, cleaning their flat are all huge challenges never mind building up to the point of being able to leave the building at set times to attend courses. More and more the care and support plans are becoming very bespoke. We cannot expect them to run before they can walk". (Project Team Leader)

6.19.2.   The flexible and targeted supports young people receive from project staff and other professionals are critical to helping them overcome disadvantage and engage in ETE. Providers discussed links with training providers including further education colleges and community and voluntary organisations who deliver support with personal development and essential skills. Young people clearly valued those staff who took an interest in them, provided encouragement to engage in ETE and who invested time in supporting them to develop good routines.

"They encourage you to do stuff. To attend school or tech, getting you up in the morning and offering a lift if you're late for the bus". (Female, 24, Former Resident)

"Staff wake me up and make sure I get the bus... make sure I have lunch". (Male, 19)

"Staff have supported me by encouraging me to attend and showing an interest in what I am doing." (Male, 18)

"Staff have really helped me to stay motivated to continue with my education and they offer me support to do my work or I can talk to them if I feel stressed about the work I have to complete." (Male, 18)

6.19.3.   For other young people, their main source of support was their social worker, personal adviser or education/ training professionals rather than staff in the project.

"I don't feel that I got any support from staff to attend my training and it was my social worker who told me about the course". (Female, 20)

"My tutors have supported me a lot throughout my training and my social worker has encouraged and supported me as well. (Male, 18)

"Staff supported me but I found the work hard. It maybe would have helped if staff helped me keep on top of my work. I was young and didn't realise what I needed to do". (Male, 18)

6.19.4. Although there was some degree of success in young people engaging with ETE whilst they were living in projects, there was limited success in this progressing to sustainable training and employment. This was evident from provider data on the ETE status for young people leaving projects which showed no change to the proportion who were NEET on exit, as on entry (49%).

6.20 Money Matters

6.20.1. Most young people living in supported accommodation have to cope with multiple transitions during late adolescence and early adulthood relating to their education, health and family, personal relationships and in-care placements. This is a daunting and challenging time for young people when they have to overcome huge challenges if they are to achieve the same positive outcomes as their peers. Those living in supported accommodation require targeted, flexible and intensive support from staff in making these difficult transitions, including from education to the world of work and crucially, in preparing them for independent living and how to better manage their finances.

6.20.2. Young people and provider staff said that the costs associated with living in supported accommodation projects can act as a disincentive to securing employment. Affordability was an issue as rent charges differed from one project to another, ranging from £85 to £216 and the young person's earnings are means tested when determining eligibility for Housing Benefit. Additionally, young people incurred a weekly service charge in projects to cover the cost of utilities. Stakeholders reported that young people who continued to live in projects after securing employment were only marginally better off, and in some circumstances there was no financial gain to securing full time employment. To mitigate this financial risk some providers had capped rent costs for young people in full-time employment and had absorbed the shortfall in rent.[27]

6.20.3. Looked after children aged 16 and 17 living in supported accommodation projects cannot access most welfare benefits as HSC Trusts are responsible for providing financial support until they turn 18. The weekly maintenance payment made by Trusts to young people is equivalent to the standard rate of Universal Credit paid to claimants over 25. A care leaver's weekly income then drops when they turn

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[27] DWP changes to housing benefit payments on 31st May 2021 to provide additional housing support including increases to the Shared Accommodation Rate. Care leavers and some young homeless can now claim the higher one-bedroom rate under the Local Housing Allowance.

18 as they receive the Universal Credit rate for under 25 year olds.[28] Making a claim for welfare benefits around their 18th birthday because they have limited financial support and savings is one of the many challenges care leavers face when reaching adulthood. Project staff and Trust staff discussed the difficulties experienced by young people making the adjustment to budgeting on a reduced income when they reach 18.

6.20.4. Young participants aged 18+ discussed their sources of income which typically included Universal Credit, Housing Benefit, Personal Independence Payments and Educational Maintenance Allowance or other weekly incentives paid by the responsible Trust to care experienced young people. Young people said UC alone was not sufficient.

"Universal Credit is nowhere near enough money to live on… [we are] expected to buy food, electricity, gas and clothes on this small amount of money. This is not good enough and needs to change" (Female, 20).

6.20.5. Other participants reported that their combined sources of income were just enough to live on but not enough to thrive on. Almost all participants said staff in the project and other professionals had supported them to budget their income and discussed various supports available from project staff including food and electricity top-ups. Affordability of heating was an issue within some projects where Economy 7 was in place. Feedback from both provider staff and young people indicated that young people living in these projects were experiencing fuel poverty. Many young participants reported ongoing budgeting difficulties and worries about running out of money before their next payment. It should be noted that young participants were receiving an uplift in Universal Credit (36% uplift for single claimants) payable during the Covid-19 pandemic which ceases in October 2021.

"I receive Universal Credit £70 per week, and I also receive £40 every week [from training provider]. I really need the extra £40 from college because £70 per week isn't enough to get by on. Once you buy food and keep money for your services charges, like heat and electricity, you aren't left with very much money, especially if you smoke." (Female, 18)

"This is enough money for food and heat and electricity, but it never leaves me enough money for clothes. This is really hard for me because everyone needs clothes. I don't get support from Social Services for clothes either. I think this really needs to improve because when I go back to college face to face, you want to have proper clothes to go out in." (Male, 20)

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[28] HSC Trust weekly maintenance payment to 16/17 year olds £324.84 per month. Care leavers age 18+ then claim Universal Credit – single claimant rate for those under 25 - £257.33.

6.20.6. Young people and staff supporting them were often not fully aware of welfare rights and entitlements and the rules governing benefits. Provider staff advised there are differences across Trusts in financial support to care leavers and how this accessed. Updated financial guidance for relevant staff and information written in a user friendly format for young people on their rights and entitlements was identified as an area for development and would ensure a consistent framework is applied for all young people and that the sources of income available to them are maximised.

6.20.7. In summary young participants provided the following suggestions for improving current projects:
- Rules should be fair and kept to a minimum
- More young person friendly rules on visitors to projects
- More organised group activities and games
- Decorating flat/ room and making it more homely
- Supporting health and wellbeing
- More affordable supported housing costs
- Remote access / Wifi with projects
- Later curfews for over 18 year olds

Pathway Out of Projects

6.21   Pathway Out of Supported Accommodation

6.21.1. The main aspiration of most young people living in supported accommodation is to have a safe, secure and affordable home of their own. Consequently the main objective of JCSA is to help young people to achieve a move to more permanent housing in a planned way at a time when they are ready. The 41 young participants interviewed were at various stages of their journey through and beyond supported accommodation projects. Some were living in the project only a few months, others were in the process of moving out and 14 were previous residents who had been living independently for a few years, 11 of whom had secured their own tenancy. None of the participants interviewed had experienced being given a notice to quit or immediate termination of their licence agreement. Of the former residents just two said they were not ready to move out when they did. Both commented saying that the decision to move out of the project should be a joint decision between the resident and the provider, and not set by their age or the length of their stay. There was no indication that any of the fourteen former residents interviewed had left the accommodation without at least some planning. The young participants interviewed were therefore not reflective of the proportion of young people who moved out of projects in an unplanned way.

6.21.2. Support to young people should be flexible, led by young people, focused on their strengths and regularly reviewed through pathway and housing support plans. Move on plans should be openly discussed through regular meetings between young people and housing support workers and for those care experienced, leaving and aftercare staff should be involved. The young person's progress in working towards securing suitable housing and move-on options should be regularly discussed with them from the outset of their move to supported accommodation. Many young people who moved to supported accommodation projects experienced problems establishing and sustaining stable relationships with those who are there to help and support them.

6.21.3. Stakeholders discussed the multitude of challenges young people encounter when making the transition to adulthood and it was evident that many young people left supported accommodation in an unplanned way following being given notice to end their licence agreement or immediate termination. Provider staff reported that this occurred most commonly due to difficulties controlling their fear and anger related to mental health needs such as depression and anxiety. Providers and other key stakeholders have discussed young people's engagement in maladaptive health harming behaviours such as using drugs or alcohol misuse or self-harming as a way of coping.

6.21.4. Figure 13 demonstrates that, discounting those young people still living in projects, 50% of looked after children who moved in during the two year period had moved on in an unplanned manner. Similarly, the transition from supported accommodation for approximately 47% of care leavers aged 18+ was unplanned. Provider data showed that 18+ homeless referred by the Housing Executive were less likely to experience an unplanned move on from projects. Approximately 65% of 18+ homeless experienced a planned move on and a similar proportion of children in need. The prospect of a return to live with family was greater for these cohorts (children in need 33% and 18+ homeless (30%) than for looked after children (18%), care leavers (13%).

Figure 13

Pathway Out of Services
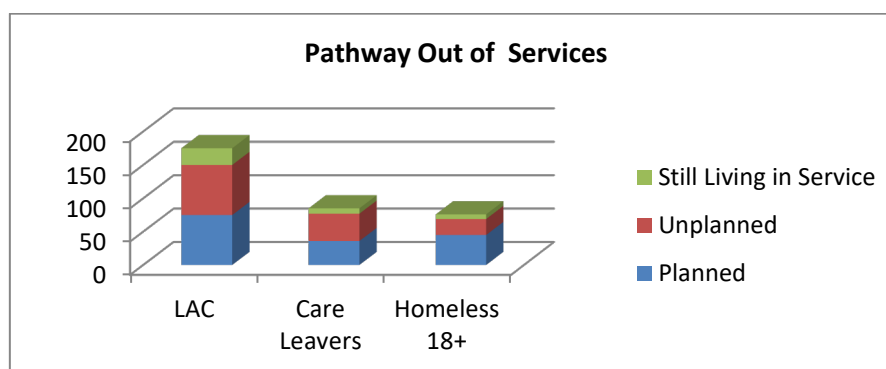
6.21.5. Figure 13 shows the level of planned and unplanned move on by status of young people and Figure 14 provides analysis of move on by individual project. This

reflects all referrals into projects including assessment beds. There is evidence of a high turnover of referrals within some projects which can result in a very different lived experience for young people and for staff working in those projects.

Figure 14

Planned and Unplanned Move On by Project
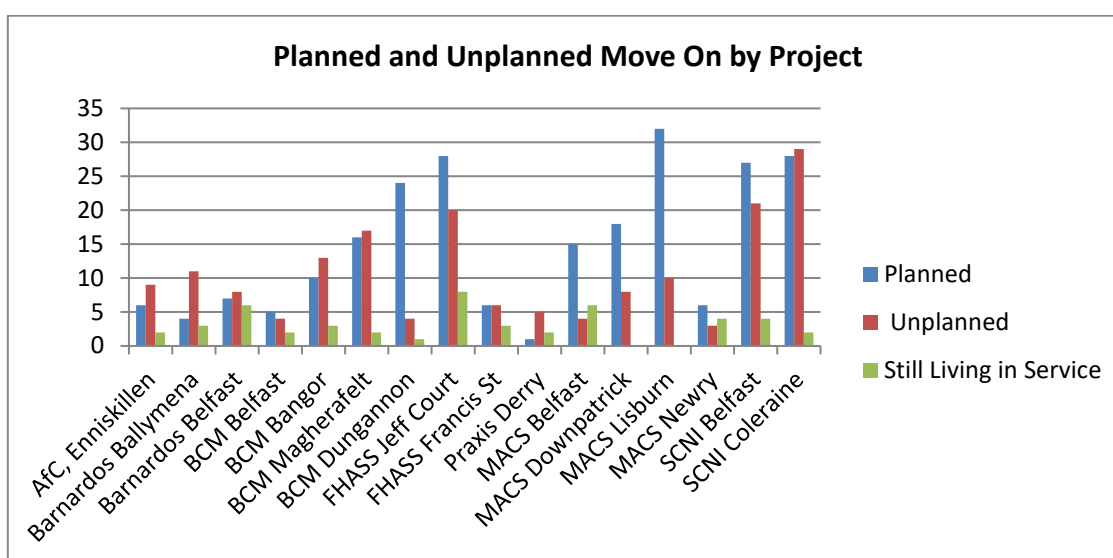
6.21.6.   Young people who participated in the VOYPIC engagement exercise cited the change in group dynamics when a resident moved out, or someone new moved in and how unsettling this could be for the others living in the project.

"It doesn't feel like a home- all my friends have moved out now and I don't know the others." (Male, 19)
"*The new people are younger, so there's more drama. I'm getting too old for that now."* (Male, 19)
"I don't like new people coming in and changing the dynamics of the house." (Male, 17)

6.22.   Planned Pathway out of Supported Accommodation

6.22.1.   There was some evidence of good practice and proactive engagement and planning with young people with some moving on from supported accommodation in a planned way to a secure tenancy or other accommodation deemed suitable as part of their pathway plan/ housing support plan. There is however a lack of consistency across projects on an agreed process for supporting and timely planning to assist young people with their move on.

6.22.2.   The Housing Executive has a statutory duty to provide accommodation for those people who are deemed to be homeless and in priority need under the Housing

(NI) Order 2003. This provides for applicants who are homeless or who are threatened with homelessness to be assessed in line with the provisions of the Order to determine what duty, if any is owed by the Housing Executive. To be considered for social housing and to be placed on the Common Selection Scheme Waiting List young people need to make a housing application. The role of project support staff is to ensure that this is completed as soon as possible to ensure timely transition planning and consultation with Housing Executive staff. Close liaison between housing, Trusts and providers is key to working collaboratively and ensure timely applications for housing.

6.22.3. The intended maximum stay in a JCSA project is two years. Under the protocol, based on legislative responsibilities, the duty of care and housing for 16/17 year olds falls to Trusts except if there are other exceptional factors. There was evidence that a young person's status and referral route into a project has a bearing on when an application for social housing is completed and Full Duty Applicant Status awarded. Whilst homeless 18+ referred by the Housing Executive are awarded FDA status at the point of referral to JCSA, care leavers under 18 years old making a planned move from their care placement are not awarded FDA status as they are not assessed as homeless due to their in-care status. This has led to some care leavers being unable to make an application for housing until 28 days prior before their 18th birthday. Full Duty Applicant (FDA) status under Homeless legislation and associated points are awarded at this time. In circumstances where a young person has been residing in JCSA since they were 16 and therefore due to move out after a maximum of a 2 year period their application is likely to occur very close to their expected move on date. This does not allow sufficient time to plan and secure a move to suitable social housing.

6.22.4. These practices were more rigidly applied in some Housing Executive offices than others where a more flexible and young person centred approach was taken. Care experienced young people moving into supported accommodation projects at age 16 were less likely to secure social housing at the end of their two year tenure in supported accommodation and therefore experienced the uncertainty and stress of not knowing where they would be living in the future. There was evidence of some young people moving into unsuitable private rented accommodation or temporary living arrangement with friends or family as their two year period in supported accommodation had elapsed with no offer of social housing or being able to secure a suitable private tenancy. The timing of moving out of a project before they were ready was an area of concern for some young people, alongside worries about not having enough support after they leave.

"You shouldn't have to move out until you're ready to. It's not just about what age you are." (Male, 18)

"I've been here nearly two years, but I'm not thinking about moving out.

I'm not ready yet. I don't really have a clue as I am still young so I need to grow up." (Male, 18)

6.22.5.   Securing a suitable tenancy is not easy for young people living in supported accommodation as they face multiple barriers in securing their own tenancy, not least due to the lack of available and affordable accommodation for young people with housing support needs. During the initial visit to services the staff consistently reported lengthy waiting times experienced by young people wishing to secure NIHE or Housing Association tenancies and a lack of supply of one bedroom properties which leaves young people with limited housing options. The young people's profile data lends some weight to staff feedback, indicating that many young people who have made applications have been unable to secure a social tenancy. This has resulted in delays to young people moving on from supported accommodation when they are tenancy ready, causing distress and anxiety about their future. Delays in securing suitable housing has also led to the silting up of projects thus delaying the planning process for young people moving in.

6.22.6.   For young participants who were getting ready to move out, and the majority of former residents, there was a general recognition that the support was needed to help them successfully transition to independent living. Most talked about getting help to complete forms, make application to the Housing Executive, view flats to rent, and pack up their belongings and arrange the move. Many also talked about staff helping them to process their fears about moving on, helping them explore coping strategies and staying in contact after they left.

6.22.7.   Provider staff and young people described that once a housing offer is made by the Housing Executive, there is a very compressed period between accepting an offer and preparing to move from the project to set up home. The staff advised that housing offers are received from the Housing Executive with little advance notice and once accepted, the young person needs to move out of the project within 1-2 weeks as Housing Benefit cannot be paid for both accommodations. These timescales are unrealistic and impractical, both in terms of the logistics of setting up home for the first time, but also coping with this emotionally. The experience of moving on to their own accommodation was enhanced when staff offered to help the young people pack and move their belongings.

"I was lucky that they give me a grace period of a week so I could get my flat ready, so it was ready for me. Some people don't have anyone, so having a cooker plugged in can take longer so it means they have nothing to cook on." (Female, 20)

"I only had a few days' notice to get head around things and gather thoughts around moving out. The staff could have supported me more, or even helped me pack. I did that on my own with no support at all." (Female, 20)

6.22.8. Continuity of relationships with project staff following move on to their own tenancy was really important to participants and they described continuity of relationships that lasted for a few months, and for others this continuity lasted for a number of years. This continuity of support was important for almost all the young people involved, underlining the key role played by strong and trusting relationships.

"My project support is invaluable and I don't know where I would be without them, the staff are always there for me". (Female, Former Resident 24)

6.22.9. Participants were asked about their awareness of, and contact with, Floating Support. Fewer than half of the participants (39%) had heard of 'Floating Support'. However, when describing support they receive, some of these young people described a service which could be identified as Floating Support.

6.22.10. A few former residents shared their ideas about how their journey beyond supported accommodation could have been improved. For those who had developed close relationships with the staff in the project, the continuation of these supportive relationships was important. Participants living in projects were apprehensive about embarking on the next stage of their journey and most wanted to have some form of contact with project staff after they left and to be able to call on them for help and advice in the future but were unsure if this would be encouraged. Young people said that having someone they know and trust to help with the practicalities of filling in forms, making applications, and solving problems is viewed as essential for many of the young people as they move on from the project into adulthood. So too is the emotional support and reassurance, having someone they feel comfortable with and able to turn to when they are struggling.

6.22.11. Moving into their own home is one of the most important milestones in the lives of these young people and young people placed great significance on the importance of maintaining a connection with the project and the staff team. Others discussed the benefits of having step-down accommodation close to the project. There was a general consensus across the participants that young people leaving a project should be supported to make informed choices about where they go next, and given the time and space required to effectively make those key life decisions.

6.22.12. Profile data showed that very few young people remained living in a project beyond two years. Providers advised of young people living in a project who were ready (with or without housing support) to move on from supported accommodation but being unable to do so due to a shortage of suitable and affordable housing. The Review considered how providers and other key stakeholders have been responding to the challenges associated with low

housing supply and the difficulties navigating the private rented sector and affordability. One provider relayed the experience of a young male aged 19 who had been awarded 90 housing points which was insufficient for an offer of social housing in his area of choice and had made 35 unsuccessful applications for housing with the private rented sector.

6.22.13. During meetings with Providers to validate the young people's pathway data it became apparent that young people who are tenancy ready fall into two categories – those who have made a planned tenancy move on to social or private housing and those who have made a planned non-tenancy move on to hostels and other very short-term living arrangements such as staying with friends or living with a family member. For a small number of young people, a move to other suitable supported accommodation is progressed as this is deemed in their best interests, perhaps relating to locality, model of provision and level of support offered.

6.22.14. Although limited, there was some evidence of local innovation initiatives that unlock the door and increase young people's access to suitable accommodation. These included accessing rent deposit schemes, the development of shared tenancies and one HSC Trust developing a small number of short-term tenancies through properties owned by the Trust, for care experienced young people. There was also evidence of some Providers developing excellent working relationships with Housing Executive to secure permanent housing for young people. One project team leader gave a good practice example of networking with a Housing Association to secure suitable housing for one young person. Housing Clinics held within the JCSA service on a monthly basis by Housing Advisers were seen as an excellent way of reviewing the young person's housing application and providing an update on their progress and future support needs.

6.22.15. There is a need for stronger multi-agency working to develop effective alliances and good working relationships with the Housing Executive, Housing Associations (particularly those Housing Associations who are the landlords for supported accommodation projects) and other landlords including those in the private sector who can offer housing to young people at affordable rates, for example through rent deposit schemes. It is notable that shared tenancy, although a fairly recent development across some Trusts, has made a positive contribution to the range of planned move on options for young people who wish to be matched to share their tenancy with another young person and to also avail of housing floating support.

6.23. **Unplanned Pathway Out of Supported Accommodation**

6.23.1. Three quarters of the young people interviewed had lived in only one supported accommodation project however over a quarter had lived in two or more projects.

Some young people talked about 'bouncing between projects' and other living arrangements, sometimes returning to a project for more than one stay. In most situations where they were asked to leave the project it was because of negative behaviour, and some referenced being 'kicked out' usually due to breaches of the rules of their licence agreement.

6.23.2. Provider data shows instances of young people within all services experiencing an unplanned move on however the extent of this varied across services. The majority of unplanned moves occurred as a result of young people being given notice to end their licence agreement or immediate termination of a licence agreement. During the two year period one fifth of all young people who lived in the projects were either given notice to quit (n45) or immediate termination of their licence agreement (n46). The reasons for young people being asked to leave the accommodation often mirrored their presenting support needs on moving into the project. The reasons for being asked to leave ranged from aggression towards staff or other residents, drug and/ or alcohol misuse, damage to property, young person not engaging/ staying away from project on a frequent basis and for a small number of young people, non-payment of service charges. Provider data on the rate of unplanned move on by project showed that this varied considerably by project and was linked to thresholds of need and risk.

6.23.3. Young people making an unplanned move which is not in keeping with their pathway/ housing support plan often moved to accommodation that was deemed unsuitable by the Provider. These young people are likely to experience a chaotic housing pathway into the future, moving frequently from one homeless setting to another.

6.23.4. The importance of ensuring that young people are not only aware of and informed about their rights and entitlements but also have the opportunities, mechanisms and skills needed to exercise them was evident. A key element of the work of Providers is advocating on behalf of the young people to whom they are providing social care and housing support. As such they have a role in ensuring that all stakeholder partners work together to uphold the rights of young people. Equally there is a need for Trusts with NIHE to adopt an approach which focuses on the overall pathway of young people, their journey into, through and out of appropriate services and how to best intervene and assist with the shared goal of enabling vulnerable young people to achieve stability and integration into a community of their choice.

6.23.5. The review has identified the need for provider organisations to ensure the culture, ethos and practice within services is underpinned by a trauma informed approach to supporting young people to move on in a planned way. This should include employing creative solutions and approaches to reduce the risk of unplanned moves. This needs to be incorporated as part of the overall service specification and should include better differentiation of services, who they are

for, what they aim to achieve and how they fit and contribute to the overall continuum and pathway for young people who are vulnerable to homelessness. All projects should:

- implement effective and supportive approaches to problematic behaviour including positive reinforcement and supportive sanctions;
- develop move on policy and procedures with a focus on planned transitions and for those unplanned, access to independent advocacy, advice and support for young people;
- ensure better working together to coordinate move on plans with young people and professionals. This includes meeting with multidisciplinary professionals including Provider, Housing Solutions, Leaving & Aftercare Staff (for care experienced young people), Floating Support Staff and any other relevant agencies. All providers should have in place a process for undertaking exit interviews with young people to help inform future service delivery and improvement. These interviews should be undertaken with all young people who have moved on from JCSA services, whether in a planned or an unplanned way.

7. ANALYSIS OF FUNDING FOR JCSA PROJECTS

Background to Joint Funding Arrangements

7.1.   Joint commissioning / funding of supported accommodation for young people is a strategic approach to planning and delivering integrated projects in a holistic and joined up way. The JCSA projects are commissioned and funded to provide specialist, integrated models of housing and social care support to young people who are unable to live independently and assessed to need medium to high levels of support.

7.2.   Set within a historical context there are a small number of the projects which are referred to as "legacy" projects. These legacy projects are in the minority and existed for young care leavers, prior to and then subsequently transferred to the SP Programme following its introduction in 2003.

7.3.   A financial analysis undertaken during the review was somewhat limited, however, did bear out the rationale for the review. The lack of clarity around the formula used to determine the funding streams made any financial analysis extremely difficult within the time constraints. It did confirm that the financial analysis required a more detailed appraisal of the funding streams and the current splits.

7.4.   The funding streams for 2019/20 and the unit split are outlined in the Table E below.

								Table E
Supporting People and HSC Trust Funding to JCSA Projects by Trust Locality (2019/20)								
	No of Providers/ Projects		**Project Capacity**				**Funding Contributions**	
Trust Locality	Providers	Projects	18+ (SP)	16/17 Homeless (SP)	LAC (HSC Trust)	Total	Supporting People	HSC Trust
BHSCT	4	4	23.5	2	18.5	44	£695,859	£855,613
NHSCT	3	3	19.5	2	11.5	33	£480294	£381,522
SEHSCT	2	3	12	6	11	29	£649700	£378, 982
SHSCT	2	2	6	0	5	11	£249,139	£173,808
WHSCT	3	4	39	2	12	53	£858288	£350, 269
Total	7	16	100	12	58	170	£2933275	£2140194

7.5.   The funding arrangements for the projects were generally agreed following the approval of Business Cases which set out the associated HSC and SP revenue costs required, which was agreed and approved through the SP programme approval processes. Through the joint funding arrangements SP pay a grant fund contribution for housing related support and the HSC Trust pays an annual contracted sum for all social care and housing support costs associated with looked after children aged 16/17 years. In some legacy projects HSC funding also included a contribution towards social care costs for care experienced young people aged 18+. Whilst funded jointly, the arrangements for payment, referral and governance are inherently separate based upon "bed split"; often referred to as "Trust bed" or "SP bed" This arrangement determines that "Trust bed" is for young people aged 16 and 17 years and a "SP bed" is for young people aged 18+ years. The SP beds also include 12 assessment beds, located in 6 of the projects, which are funded through SP (as outlined in Section 5 and 6).

Financial Analysis of Existing Provision

7.6.   For the purposes of financial analysis the average unit rates for both HSC and SP funding have been used when considering common themes and findings. It is recognised that there are limitations to using average rates as a basis for comparison, however in the absence of an agreed funding model any other benchmarking is difficult to achieve.

7.7.   The HSC Trust funding stream for the projects was divided by the total number of 16/17 year old "Trust" beds in each project (58 units). The HSC Trusts unit rates illustrate the average weekly unit rate across all HSC Trust units is £745.12 and ranges across projects located in different HSC Trusts as well as within the HSC Trust locality. Eleven of the projects sit below this average rate and five are above the average rate. There are five projects which have a weekly unit rate above the average weekly rate. There are a number of significant outliers at both ends of the spectrum; at the higher rate the weekly unit rate is over £1,000 above the average and at the lower end is £400 below the average. There are two projects of identical size located in two different HSC Trust localities; there is a difference of £1,000+ per weekly unit between the two projects.

7.8.   The SP funding in the projects illustrated an average weekly unit rate of £550.59 for SP beds based on the number of units for 18+ young people and inclusive of the 12 assessment beds only. There is also variation in SP block funding between projects both within and across Trust localities, albeit not to the same extent. Nine projects are in receipt of SP funding which is above the average, although this is marginal other than one project which is in receipt of a SP weekly unit rate is almost £400 above the average. Seven of the projects sit below the average rate and again this is marginal in all but one project for which the unit rate is almost £300 below the average.

7.9. The lack of an existing uniform formulae to calculate unit rates or the annual funding streams for each project had undoubtedly added to the variation in rates. It also disallows any meaningful benchmarking to be applied and makes it difficult to understand how the annual funding levels were agreed. As previously illustrated the projects are operating across the bed split and what is considered to be the responsibility of each of the funders. The HSC Trust funding is used to provide housing related support, social care and the rent costs for those aged 16/17 years. SP grant funding contribution is used to pay for housing related support for those young people aged 18+ years.

7.10. The analysis of the financial package has confirmed the rationale for the strategic review and has provided an overview of how the projects are operating within the financial envelope available. There is a substantial level of funding from both SP and HSC Trust to deliver the 16 JCSA projects at over £5 million per annum (as of 2019/20). This is a finite sum and there is a need to ensure best use of public funding and that funding streams are adequate to meet the costs of an agreed and effective model of jointly commissioned supported accommodation. The funding structures have been in place for many years with funding continuing to be paid on an annual recurrent basis. The review has identified that there is no uniform funding rate or formulae for projects for either SP grant funding or the HSC Trusts contract awards.

7.11. It is difficult to provide any rationale to explain why there is such a significant variation between projects and across Trust localities. There is some indication that legacy projects have higher Trust contribution and the providers operate an integrated approach - that is the Trust funding is used to take account of the ongoing social care needs for the care experienced young people who turn 18 years whilst remaining in the project. However, the focus of this review is not to analyse the historical context but to consider the current situation and the future commissioning of the projects. There needs to be a further exploration around how social care and housing related support is delivered and how this is costed and split.

7.12. The unit split within projects has been agreed at a point in time and it is reasonable to comment that demand and need may have shifted since projects were developed. This, coupled with an increased complexity of need of young people at the point that projects were commissioned suggests that a review of the overall service model and associated funding is warranted. During feedback with provider organisations and HSC Trust there was often reference to "SP bed" or "Trust bed" which can influence support provision. Adoption of an integrated funding arrangement should encourage a more integrated approach to the delivery of social care and housing support provision. As outlined in Section 6 of this report the review found that young people are presenting with greater complexity and co-occurrence of need and that from the profile this was more evident for care experienced young people who generally have experienced more trauma and less

stability. It was also noted from the profile data that more young people aged 16/17 were accessing the projects than those aged 18+ years.

7.13   The Review's terms of reference included an analysis of the application of the funding streams. Time constraints did not enable a full analysis of the funding applied to central costs as opposed to frontline staffing or the percentage of funding applied to the number of staff hours and how these costs are being applied within the project's management accounts. As noted in Chapter 8, HSC Trusts and SP operate separate arrangements for monitoring and governance of the projects. HSC Trusts have annual contract meetings with providers in relation to the projects but the financial analysis is very separate to SP. During the review the annual financial data returns to SP provided information on the percentage of funding from the two funding streams which is applied to staffing costs. A first line analysis would indicate that the percentage being applied does not fully correspond with the respective levels of funding streams.

7.14   Table F below illustrates the percentage of funding allocation and the application of the allocated funding for staff hours against SP and HSC Trusts for the year 2019/20.

Table F - Allocated Funding and application 2019 / 20

Project	SP % Bed allocation	HSCT % bed allocation	SP % funding allocation	HSCT % funding allocation	% staff hours allocated against SP	% staff hours allocated against HSCT
1	**58%**	42%	**21%**	79%	**56%**	44%
2	**50%**	50%	**34%**	66%	**64%**	36%
3	**57%**	43%	**69%**	31%	**83%**	17%
4	**58%**	42%	**65%**	35%	**56%**	44%
5	**50%**	50%	**39%**	61%	**64%**	36%
6	**67%**	33%	**59%**	41%	**75%**	25%
7	**50%**	50%	**49%**	51%	**64%**	36%
8	**63%**	38%	**64%**	36%	**82%**	18%
9	**69%**	31%	**49%**	51%	**68%**	32%
10	**80%**	20%	**81%**	19%	**91%**	9%
11	**67%**	33%	**63%**	37%	**82%**	18%
12	**69%**	31%	**65%**	35%	**69%**	31%
13	**50%**	50%	**46%**	54%	**78%**	22%
14	**89%**	11%	**84%**	16%	**91%**	9%
15	**67%**	33%	**68%**	32%	**91%**	9%
16	**80%**	20%	**73%**	27%	**85%**	15%

7.15. In all but one project there is a lack of alignment to the percentage of the respective funding streams, both in terms of the "bed" split and how this has been funded and then the application of the funding as a percentage of the staffing hours. The areas outlined above will need to be addressed through future deeper analysis of the management accounts for individual projects.

7.16. The future analysis will need to be undertaken in a partnership arrangement between the two funding agencies and enhances the proposal that an independent commissioned review of the financial package would be an appropriate response.

7.17. The revenue arrangements for all jointly commissioned/ funded supported accommodation projects are currently being reviewed by the Department for Communities (DfC) and the Department of Health (DoH). As budgets come under increasing pressure and demand for housing support and accommodation increases, there is a need to ensure that investment in projects is completed strategically and collaboratively. Ongoing and future funding arrangements within the 16 JCSA projects will be subject to agreement at departmental level within both departments.

7.18. The Terms of Reference for this Review included the completion of a benchmarking exercise to examine models of provision from elsewhere in Ireland and the UK with comparative costs, the purpose being to help determine value for money in the provision of the JCSA projects. This has not been fully met within the scope of this review as the information received was limited and does not give any form of evaluation of effectiveness to compare against the JCSA projects. This aspect will require further work and will be progressed going forward and will involve potentially more extensive assessment of the long, medium and short term effectiveness of the financial investment into the JCSA projects. A more specific and accurate financial appraisal (with detailed terms of reference) is suggested in order to accurately reflect the overall funding position with regard to benchmarking and comparative value for money analysis across the projects.

7.19. Table G, as set out below provides some context with regard to benchmarking with a simplistic comparative exercise completed by the authors. With increasing demand and pressures on budget it is necessary to view the financial envelope in the context of the cost of other supported accommodation provision and to ensure that the funding provided is delivering value for money. Some comparator projects viewed and assessed as part of the literature review for this report, whilst not like for like in some cases, provide a perspective on the funding packages and delivery in other geographical areas. This comparison will require a deeper analysis out-with the scope of this report.

Table G - Comparison of support provision

Name	Weekly cost per place	Level of support	Comments
Move On Homes (Oxford CC)	£2,115.40	High intensive, with clinical team attached. Very complex needs transitioning from care	Annual total cost of £440,000 per home – 4 units.
Young People supported housing project	£216.00 average	4 packages of support. 3 stages of support, including assessment	228 units for young homeless 16 -25 years for singles on a sharing basis, parents and specialist support
Rock Trust Housing First for Youth Scotland	£207.50 (support only)	Complex needs intensive in-reach support	Cost is for support only
Housing First NI	£1,052.88 (support only)	Very complex needs, intensive in-reach support for care experienced young people	NHSCT funded service
Rock Trust accommodation based Scotland	£102.00 (support only)	Low to medium	Support via visiting housing support with variance in intensity
Accommodation with support NI	£150 (support only)	Low to medium	Support via visiting support with variance in intensity
Foyer NI	£162.00 (support only)	Low to medium	24/7 staff on site
Generic adult hostel NI	£250	Low / medium	24/7 staff on site
Non standard B&B / hotel NI	£546.00 (accommodation only)	Varies	No staff on site, may have Floating support provided

7.20. The models viewed and analysed within Oxfordshire County Council are worth further exploration and discussion. There are a number of different projects offered including the House Project which operate similarly to the Shared Tenancies model, however young people who successfully "graduate" from the support scheme are able to remain in the property as a tenant with further new additional properties sought for other young people to move into.

8. GOVERNANCE AND MONITORING

Quality Assurance Guidance

8.1.   The governance arrangements for Jointly Commissioned Supported Accommodation projects are clearly set out in the Quality Assurance Guidance for Jointly Commissioned/ Funded Supported Accommodation Projects for Young People aged 16-21 in Northern Ireland[29]. Co-produced by all relevant agencies it provides a framework to ensure that key agencies involved in the governance and monitoring arrangements for the JCSA projects have clarity about their respective roles and responsibilities and the arrangements and processes in place for the exercise of these. The overall aim of the Guidance is to provide systematic oversight of the JCSA projects and to improve service provision within the projects. The HSCB, DoH, RQIA, and NIHE are committed to ensuring there is effective and funded governance, quality monitoring and inspection (RQIA), framework in place, that is being applied systematically and is operationally effective; and further that there is a consistent approach to supporting providers to strengthen internal monitoring arrangements of these projects.

Current Governance and Monitoring Measures in practice

SP   15 out of the 16 projects have had a Quality Monitoring Tool (QMT) visit over the period 2018 – 2021; the remainder are planned for 2021/22. Findings to date confirm that these projects are largely meeting the standards within the QMT. Performance and Outcomes data are reported to SP on a quarterly basis and discussed at Contract management meetings which are held annually by SP with providers.

HSC TRUSTS   Four of the five HSC Trusts are undertaking the required quarterly monitoring visits to projects as per the Quality Assurance Framework issued in December 2019. The Western Trust now has arrangements in place to undertaken quarterly monitoring visits. In addition to this annual contract meetings are held by each Trust with the relevant provider.

RQIA   Inspections have been completed of all projects in line with RQIA's programme of inspection for this sector

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[29] Quality Assurance Guidance for Jointly Commissioned/ Funded Supported Accommodation Projects for Young People aged 16-21 in Northern Ireland, Version 3, November 2019.

Providers   In line with the Quality Assurance Guidance serious / critical incidents are reported to the relevant Trust, RQIA and SP as appropriate;
Outcomes Framework recording for individual young people for support planning;
Internal audits of individual projects.

Analysis of current Governance and Monitoring Arrangements

8.2.   Whilst the JCSA projects are in place to provide integrated models of housing support and social care to young people, the systems and processes in place to monitor project activity and performance are largely operating in isolation of each other. The Quality Assurance Guidance clearly sets out respective roles governed by funding arrangements, and policy and statutory responsibilities; it does not however set out or specify the collaborative processes or information requirements needed to jointly meet the shared goal of monitoring, quality assurance, governance and service improvement.

8.3.   SP receive a substantial amount of performance information from the provider organisations. Performance measurement is an integral part of the SP contract management framework, with quarterly returns forming part of regular contract management reporting to evidence how providers are performing against SP performance indicators and is a contractual requirement for providers. There are some limitations with the existing arrangements including that information is collected as necessary only for the terms of the funding agreement: client data; a record of date of move in and move on from the project; utilisation and throughput which is collected on a quarterly basis, with information limited primarily to levels of occupancy and throughput. Current monitoring of performance does not consider the reasons why young people are moving on from services or the circumstances or nature of their move on. Performance data reporting is limited to recording whether a move on is unplanned or planned and does not necessarily relate to a positively planned and appropriate transition from the JCSA projects.

8.4.   SP undertake a monitoring regime through the application of the Quality Monitoring Tool (QMT) which is completed through provider self-assessment and SP validation visits. This process is applied across the different thematic groups within SP. There are 16 JCSA projects included in the wider Young People's Thematic Group in SP. The current regime and based on the number of overall young people SP funded services allows for the JCSA projects to be validated through the QMT process every one to three years. The outcomes of the self-assessment and validation visits are retained by SP and not shared as a matter of course with HSC Trusts nor RQIA. Contained within this tool are areas which are duplicated or similar to those within the inspection regime completed by RQIA.

8.5.   RQIA has since 2019 undertaken an inspection of each project on an annual basis. The inspection reports from the visits are generally not shared with the lead funders, however, a composite report on inspections of projects was completed in 2019 and RQIA delivered a feedback session to all providers and key stakeholders to share high level findings, good practice and areas for service improvement. This was a valuable exercise and used as a platform to make improvements across the sector and cemented a more collaborative approach evidenced on those occasions particularly where the lead agencies have worked in partnership to address identified areas for improvement, drive change and support the delivery of safe, young person centred care and support.

8.6.   The HSC Trusts stated that their quarterly monitoring visits enable them to better understand how the projects are operating, and gives an opportunity to discuss the needs of the young people and consider training for staff to meet needs of the young people. The quarterly monitoring report captures information such as staffing, rota arrangements, and training needs. Quarterly monitoring reports are at a point in time and used primarily to address the needs of individual young people residing in the projects. Providers confirmed the benefits of the quarterly visits and considered them to be a useful opportunity to discuss the needs of the young people as well as any incidents or complaints and the visits provided a mechanism for identifying training gaps and needs. This information is retained by the relevant HSC Trust and is only raised with SP where an incident / issue of concern is noted or the provider has approached the HSC Trust for additional funding. Quarterly monitoring visits were undertaken by four out of the five HSC Trusts; the Western Trust has now put in place a nominated officer to undertake quarterly visits and annual contract management meetings.

8.7.   Through discussions with providers during this review they advised that they complete internal audits of projects and use the information from audits and incidents for reflective practice undertaken in the main at management meetings and individual supervision. Providers advised that audits are completed annually at a minimum with examples of quarterly and monthly file audits being completed. There were examples given by one provider of independent audits completed with young people residing in the projects and where recommendations were made these were incorporated into practice. The information from these audits is stored and used internally by the providers with no systematic process in place which requires providers to submit this information to the dual funders resulting in limited knowledge around provider self-assessment and improvement plans.

8.8.   The SP team developed an outcomes data set in 2018 to enable providers to report data which was aligned to the previous draft Programme for Government, however, providers have been using outcomes tools for many years as a mechanism to determine individual progress and support planning for young people. Whilst the providers each use different tools to record and monitor outcomes they report on the same set of outcome indicators to SP on a quarterly

basis for those young people who have moved on from the projects. One of the key objectives for the provision of the JCSA projects is that young people are supported to develop skills which will help them to transition successfully to independent living. The data outlined in Table H below indicates that young people achieved very positive outcomes.

Table H - SP Outcomes Framework Report 2018–2020 all JCSA Projects

SP Outcome Description	No Supported	No successful	Success Rate %
Service users supported to access relevant welfare benefits	354	337	95%
Service users supported to gain employment (paid or voluntary) and/or desired training / education	308	234	76%
Service users supported to achieve independent living	288	238	83%
Service users supported to manage their physical / mental health	345	325	94%
Service users who have been supported to access services to make them feel secure in own home / tenancy	341	330	97%
Service users supported to contribute to wider society and enhance social networks	337	308	91%

8.9.   It is positive to note that the Outcomes reported by providers for the period 2018 – 2020 demonstrate that there have been high levels of overall success rate across the JCSA projects; including support with management of physical and mental health 97%, and achieving independent living 86% success rates. The figures reported above indicate that a high number of young people achieve very positive outcomes on their pathway through the projects.

8.10.   It is acknowledged that whilst the Outcomes Report and the Data Profile gathered for this review, are not like for like, the comparison draws attention to a number of inconsistencies and variances between data reported on through the SP Outcomes Framework and the analysis of the profile information collated for the purposes of this Review which examined the pathways of young people into, through and out of the projects over a two year period. It would appear the outcomes framework in its current form cannot be solely relied upon to provide an accurate picture of the outcomes achieved for young people who use the projects. Whilst the SP Outcomes Framework evidenced some positive outcomes for young

people, in its current form it does not capture information on how well outcomes have been achieved for young people in the longer term nor does it provide information on the reasons why some young people did not have successful outcomes or whether or not young people moved on to actually live independently in suitable accommodation.

8.11.   All providers use an outcomes tool to construct support plans and to assess the progress of young people in their pathway through the projects. There was variation across projects on how this information is used. Only one provider used individual outcomes information to inform service improvement. All projects provide Outcomes returns to SP; this information is not shared with other stakeholders and is also not being utilised to drive service improvement within the projects.

8.12.   There are already regional partnership approaches and corresponding structures embedded within and across SP and HSC Trusts; the Regional Thematic Group and Strategic Advisory Board, SP and the Regional Reference Group hosted by HSCB. These structures provide a strong foundation for strengthening and building on partnership and collaborative working to deliver and drive strategic priorities, and to make decisions that seek to improve approaches to working jointly with this provider sector. There is however a lack of local partnership working arrangements across the key stakeholders which this Review has identified as a gap in strengthening local ownership and oversight of provision and ensuring connectivity to the wider regional partnership structures.

Considerations for Strengthening Governance

8.13.   Whilst there are substantial governance and administrative arrangements in place, the collation and analysis of the information on project activity is at times fragmented and out of sync with a fully systematic approach which could support and drive improvement. Provider organisations voiced concerns around the bureaucracy, duplication and administrative requirements placed on them where they are reporting to different funders. It is recognised that some information reported to SP/Trusts/RQIA is similar but required in different formats necessitating them to operate parallel administrative processes.

8.14.   The core objective of the JCSA is to provide young people with support and care and to help them to achieve positive outcomes as they progress to adulthood and independence. Within this review we have repeatedly alluded to the commissioned services as supported accommodation models delivering integrated provision of housing support and social care. Operationally the JCSA projects are consistently alluded to in terms of "Trust Beds" or "SP Beds" creating the impression of a divide. Governance arrangements which continue to operate in isolation will further compound this approach, ethos and practice.

8.15. Strengthening the governance and monitoring arrangements through joint arrangements for quality assurance and contract management and outcomes reporting could result in improved performance, raise standards and ensure that projects deliver an integrated housing and support service which meets the needs of the young people. Closer localised joined up monitoring and performance management arrangements by HSC Trusts and SP in a meaningful partnership arrangement should ensure that trends and challenges around for example, levels of planned and unplanned move on for young people, are highlighted and addressed in a timely manner.

8.16. Whilst the Review identified that the majority of Trusts are fulfilling quarterly monitoring functions of the projects and SP has undertaken QMT and contract management activity these are conducted in isolation of each other. There is a need to establish local multi agency structures which create and embed local ownership, streamline and strengthen oversight, monitor performance and activity and ensure robust governance arrangements. A lack of collaborative local oversight weakens connectivity to the wider regional and strategic direction and priorities. Strengthening the connectivity between local structures and the wider regional structures would drive consistency, support strategic direction and priorities and provide appropriate oversight across the key elements of JCSA project delivery. Equally critical or key themes, trends or issues emerging at local level would be collectively monitored and actions agreed jointly to ensure timely and proactive interventions.

8.17. There are separate but similar regimes used by RQIA and SP to have quality assurance based on their respective legislative and contract responsibilities. Some areas contained within the two systems are similar and result in duplication of returns and visits to the projects by the two agencies. By way of example, the area of Safeguarding is included by SP and is also considered by RQIA and HSC Trusts. The focus by SP however is on whether or not providers have followed policy and procedure in all cases of safeguarding and not on the content of the actual incident. A method of sharing information and combining visits to projects by the two agencies would help to address this issue and result in a more streamlined and timely approach to governance and quality assessment.

8.18. It is important that a framework and process for monitoring outcomes is able to measure changes in young people's lives relating to their emotional well-being and behaviour, for example, in reducing drug or alcohol use, feeling less depressed, anxious or fearful. These outcomes need to be measurable and aggregated to project level so that providers can review their service delivery as well as demonstrate to service users themselves that change and progress is being made. It is important that projects can demonstrate to commissioners what difference their service has made through, for example, reporting against a set of agreed indicators that evidence reductions in chaotic behaviour, supported and planned exits out of projects, uptake and sustainment of education, training, employment

pathways, transitions from projects into suitable accommodation and ultimately provide assurance of the effectiveness of the service provision and betterment for young people. A composite outcomes framework which meets the needs of both funders / commissioners could be developed and used to monitor and measure the ongoing effectiveness of the projects and helpfully inform future commissioning requirements.

9.   RECOMMENDATIONS

Recommendation 1

The delivery of current and future jointly funded / commissioned projects must be underpinned by a shared and mutually agreed strategic direction owned by policy makers, commissioners and funders which will set out their purpose, the intended user group, future investment and apportionment of funding.

Recommendation 2

A service specification should be jointly developed by the lead commissioners/ funders in consultation with relevant stakeholders and young people which will be used to consolidate current provision and inform potential future development of JCSA projects.

Recommendation 3

Service specifications must be fully costed and ensure value for money, specifying funding sources with an agreed and explicit basis for the apportionment of funding contributions.

Recommendation 4

Establish a multi-agency group in each Trust locality with representation from the Trust, Supporting People, Housing Executive and key partner agencies to ensure local ownership and oversight of the continuum of housing and support services in place and to monitor effectiveness, continued relevance and the outcomes achieved for young people. This group will also identify service gaps and unmet need, and serve to provide a connection between local and the existing wider young people's planning and commissioning regional structures.

Recommendation 5

A regional accommodation and support pathway framework should be developed in partnership with, and embedded by HSC Trusts, Housing Executive, SP and other key partner agencies. The pathway framework is to ensure effective practice and interventions, timely responses to young people to prevent homelessness where possible, a more seamless pathway to accommodation and support and improved outcomes for young people.

Recommendation 6
HSC Trusts SP and the Housing Executive should agree the purpose and function, location and number of the assessment beds currently in place for the provision of an emergency response to homeless 16 and 17 year olds to determine how this resource can be best utilised and delivered to establish a positive pathway for the young person from the point of presenting as homeless and in crisis.

Recommendation 7
A review of the referral criteria, assessment and pathway for emergency and unplanned admissions of 18+ homeless into supported accommodation projects needs to be undertaken to ensure safe, quality services in line with strategic need and underpinned by effective governance arrangements.

Recommendation 8
HSC Trusts should ensure that dedicated social workers are in place to provide seamless interventions specifically for young people aged 16/17 on the edge of care/ homeless. The function and role of these social workers is integral to the delivery of a regional accommodation and support pathway framework which seeks in the first instance to prevent family breakdown/ homelessness and where this cannot be achieved, to ensure positive pathways to accommodation and support.

Recommendation 9
The Housing Executive should explore the provision of a dedicated young people's housing adviser within Housing Solutions teams to replicate the Belfast model on a regional basis.

Recommendation 10
The Fundamental Review of Allocations within the Housing Executive should give due consideration to awarding a greater priority to all homeless young people and care experienced young people to ensure timely move on to a stable home within the community.

Recommendation 11
A clear decision making process and structure should be in place within each HSC Trust locality to act as a single gateway to assessing and matching young people's needs to the range of accommodation and support services. This will include access to the JCSA, Supported Lodgings, and other support services.

Recommendation 12
The social housing sector should ensure there is an adequate supply of suitable and affordable accommodation for young people aged 18+ to enable timely move on from JCSA projects when they are ready to take up   a tenancy.

Recommendation 13
Providers of supported accommodation projects should adopt a trauma informed approach to the care and housing support provided to young people. Provider organisations should ensure the provision of training, support and leadership to staff to equip them to implement and integrate trauma informed practice and interventions with young people.

Recommendation 14
HSC Trusts should ensure continuity of therapeutic planning and support for care experienced young people transitioning to adulthood through supported accommodation which is aligned to the implementation of the regional Framework for Integrated Therapeutic Care. This should be done through the continued involvement of therapeutic services for looked after children and other specialist services to support a more seamless and positive transition from care and into / through supported accommodation.

Recommendation 15
Wider consideration should be given by providers to optimising the contribution of external agencies in the delivery of in-reach and connected services that will better support staff in meeting the holistic needs of young people and promote positive social networks and young people's future integration into communities.

Recommendation 16
Young people should be fully informed of their rights and entitlements and supported by project staff and other key professionals to access independent advocacy services as and when needed and at key transition points in their accommodation and support pathway.

Recommendation 17
Providers should ensure they have in place a programme of training for staff working with care experienced and homeless young people with multiple and complex needs. This should be informed by a training needs analysis to develop knowledge, expertise and skills. Areas could include the regional good practice guidance, psychologically and trauma informed care and support, mental health and substance misuse, managing finances, housing options, housing rights, welfare rights, housing supply and affordability and homelessness prevention.

Recommendation 18
HSC Trusts and SP should develop an integrated approach to monitoring service performance and contract management. This will include ensuring effective mechanisms are in place for reviewing whether co-funded services have achieved expected outcomes and to assess the actual effectiveness of investment.

Recommendation 19

SP and RQIA should adopt a more joined up approach to the quality monitoring and inspection regime to reduce potential duplication and the administrative burden on providers, and to share their respective areas of expertise and knowledge in the quality assurance of these integrated models of service provision.

Recommendation 20

A single outcomes framework should be developed by SP, HSCB/Trusts and other key stakeholders to closely monitor outcomes and measure the impact/ difference that living in a supported accommodation project has made to the young person's life.

Recommendation 21

SP and HSC Trusts should undertake a deeper forensic analysis of the application of funding by providers across projects.

Recommendation 22

SP and HSC Trusts should further examine their respective funding streams across each project to ensure appropriate and proportionate alignment with usage, need and responsibilities.

Recommendation 23

SP and HSC should undertake a wider benchmarking and value for money exercise to help inform future development and commissioning of projects.

APPENDIX 1

Final
Terms of Reference
Review of Jointly Commissioned Supported Accommodation Projects for Young People
05.05.2020

1.   Background

Following the implementation of the Children (Leaving Care) Act 2002 in 2005 the HSCB in partnership with the NIHE initiated work to establish jointly funded supported accommodation projects for 16-21 year old young people leaving care and / or in need of supported living.

These projects were designed to provide 24/7 on site staffing support targeting those young people assessed as presenting with medium to high needs.

In 2011/2012 a Five Year Commissioning Plan specifying accommodation based proposals to address assessed needs across Trusts / NIHE district offices was endorsed and informed the priorities for funding across HSC Family and Childcare and the NIHE Supporting People Programme.

The NIHE / SP acted as the lead partner, committing significant capital and a major share of the revenue costs to realise delivery of the proposed developments over an agreed funding cycle.

A revenue stream to meet the care component and statutory responsibilities of HSC Trusts for certain categories of young people was secured by the HSCB.

Currently there are 18 jointly commissioned supported accommodation projects operating across the five Trusts (this is inclusive of 2 supported lodging schemes).

2.   Rationale

There is growing and compelling evidence of the need to undertake a review of jointly commissioned supported accommodation projects for young people. Specifically these include:

- Changing financial landscape within the Supporting People Programme which includes a fixed budget which has necessitated a 5% reduction across all projects in 2018/19; the potential impact of introducing standardised payment rates; development of a three year SP Strategy Plan (2021 – 2023) which will require identification of priorities across young people's services based on a needs analysis
- Significant variance in unit costs and funding split across existing projects
- Lack of clarity about the formula used to determine bed split and corresponding revenue commitment by the lead funders (NIHE / SP and HSC Trusts)
- Demand for places in projects is in excess of supply in some localities with consequent delays in timely access / transitions into projects; this is further impacted upon by increased demand arising from homeless young people aged 16/17
- Lack of suitable move on accommodation and pathways from projects potentially contributing to delayed transitions and exits from jointly commissioned projects and young people subsequently moving into homeless hostels
- Some projects have been identified as being at particular risk which is being attributed to multiple factors, such as, sustainability within current financial envelope; suitability of current location; size and scale, voids etc.
- Increasing complexity of need presented by young people which is a combination of age (e.g. 16 year olds), growing drug culture, criminality and vulnerability
- Project providers and other stakeholders are reflecting concerns about project capacity to safely manage and support some young people presenting with highly complex needs and associated risks and fitness for purpose of existing provision to adequately and safely manage the risks being presented
- Changing policy and strategy landscape which has introduced new service delivery models and approaches, for example Housing First, Housing Solutions, and Supported Lodgings. Consideration needs to be given to how these might better contribute to meeting the needs of certain young people and ensuring that there is a clear pathway to achieving a stable living arrangement in the community
- RQIA undertake an annual inspection of the projects and produce a composite report outlining recommendations that need to be considered as part of the review.

In considering these themes together, it is imperative that a review of young people's projects is initiated to better inform;

- future strategic planning
- service improvement, redesign and / or decommissioning
- priorities for future development and investment

- best use and distribution of finite funding available to meet assessed need – and to deliver value for money

3. <u>Scope of Review</u>

The Review will incorporate the following:

- All jointly commissioned supported accommodation projects for young people across the region
- Completion of a profile on each project setting out its origins and development
- Local context on each project as per existing continuum of provision including a focus on urban/rural needs
- Collation and analysis of information relating to the service model i.e.
  - ❖ Staffing structure and composition
  - ❖ Statement of Purpose and Function and corresponding service delivery model
  - ❖ Capacity
  - ❖ Description of physical environment, location of property and standard of décor / maintenance
  - ❖ Roles, function and interventions delivered by staff
  - ❖ Financial analysis (investment, application of funding, funding split, unit cost, value for money etc.)
- Collation and analysis of project activity and performance i.e.
  - ❖ Profile of current occupants
  - ❖ Referrals
  - ❖ Pathways into project
  - ❖ Profiling admissions by age, legal status, length of stay
  - ❖ Profiling of discharges, taking account of destination on exit, education, training and employment status, nature of discharge (planned / unplanned) and ultimately outcomes for young people
  - ❖ Continuity of service post exit
  - ❖ Performance information
  - ❖ Evidence of outcomes
- Completion of a SWOT analysis in respect of each project to provide qualitative information for inclusion in the overall analysis and review

4. <u>Methodology</u>

The review will adopt the following approach:
- Dedicated leads on behalf of NIHE and HSCB will be established and will lead on the completion of this review
- A steering group of key stakeholders will be established to support and monitor delivery
- Progress reports will be submitted to SAB and shared with the Regional Thematic group and the Regional Reference Group on Young People

- The review will be completed by March 2021
- Design standardised templates to collate the required information and data
- Undertake an analysis of information and data and complete a summary report specific to each project with recommendations relating to quality, safety, financial viability and sustainability, strategic relevance and fitness for purpose
- Engagement with a range of stakeholders:
  - ❖ Funders (HSC Trusts and NIHE / SP)
  - ❖ Providers
  - ❖ Service Users (current potential future users and former users)
  - ❖ District NIHE staff
  - ❖ PSNI / YJA / Probation
  - ❖ RQIA
  - ❖ PHA
- Establish an overall Project Initiation Document setting out process, methodology, scope, timeline, and product to be achieved
- Adopt a Task / Finish approach where appropriate and helpful to timely completion
- Undertake a benchmarking exercise to examine models of provision elsewhere (England, Scotland, Wales) and comparative costs
- Scoping of alternative models, particularly models designed to meet the complex needs of adolescents aging out of care/ presenting as homeless
- Analysis of the wider strategic and policy context across DoH and, DoJ DfC/NIHE as it pertains to addressing housing / support needs of vulnerable young people
- Drawing on the findings of the project specific analysis and findings, learning from elsewhere and the policy / strategic landscape produce a report which sets out recommendations and a direction of travel for current and future provision of services

SWOT ANALYSIS	External
Strengths *Positive attributes internal to the organisation/ sector or situation that are within your control; Demonstrated competency; Proven performance;*	**Opportunities** *Mobilising Resources*
Commissioning, Quality Assurance, Joint working • Commitment of lead agencies to jointly commission services, partnership working and ring-fenced funding for services. • Robust Quality Assurance Guidance and minimum Standards • Planned transitions/ pathway planning into supported accommodation for majority of care experienced young people • Dedicated Housing Advisers for young people (Belfast HE) • Dedicated Youth Homeless Social Workers in some Trusts (Southern; Northern. • Covid – stronger multi-agency working, sectoral working; sharing learning and good practice • Evidenced demand for an integrated model of supported accommodation for young people with medium to high and complex needs, with staffing on 24/7 basis. • Evidence of trauma informed approach within services and planned transitions to more independent living (MACS Newry, Belfast)	*Redesign of Joint commissioned integrated model of supported housing underpinned by psychologically/ trauma informed approach* • Strategic planning setting out a vision of enabling young people to have greater choice of housing, support and care that meets their needs; • Application of Psychologically Informed Environment framework to supported accommodation services • Regional development of a Framework for Integrated Therapeutic Care; • Continuity of and strengthened therapeutic planning and support for looked after children and care leavers; • Integrated & targeted approach to commissioning of support services relevant to the needs of young people living in JCSA services – HSC Trusts, Homeless Prevention Fund, PHA, etc. *Enabling independent living with support*

Internal (vertical label, left column)

SWOT ANALYSIS	External
• Examples of providers innovative and resourceful approach to service development – funding applications to develop services (Wellbeing worker, SCNI; social enterprise employment opportunities (MACS); *Living and working in supported accommodation services* • Physical environment – good standard of accommodation • Generally located close to amenities and transport • Staff feel supported by management • Majority of staff feel safe working within services • Staff feel they provide a good service and are committed to delivering good quality support and care • Good multi-agency working between Providers & Leaving & Aftercare Services; • Planned move ins for the majority of care experienced young people • Evidence of well-established links with TTLAAC (LAC Therapeutic Services) and therapeutic planning. *Moving on from services* • Housing clinics taking place within services to keep under review young person's housing needs assessment, housing points and move on options. • Young people like living in the supported accommodation and feel safe and secure • Good partnership working between Provider, NIHE, Housing Association & Trust to develop step-down accommodation • Positive outcomes achieved for young people making planned, supported transitions from jointly commissioned supported accommodation.	• Commitment to cross departmental / sectoral working and collaborative working underpinned by Children Service's Cooperation Act (NI) 2015 • Housing stock & tenancy offers – prioritising needs of young people ready to move on from JCSA services • Development of other accommodation & support - Step Down Accommodation linked to each JCSA service/ provider; - Shared tenancies - Housing First for Youth; • Collaboration with social landlords including Housing Associations linked to JCSA • Funded, sustainable rent guarantee schemes *Practice* • Pathways guidance for professionals and joint training to strengthen collaborative working • Greater involvement of young people in service delivery & design • Establishing stronger links with TTLAAC and role of primary mental health practitioner *Providing Safe, Quality JCSA Services* • Strengthening Governance arrangements and improving service performance by ensuring joint arrangements for quality assurance and contract management. • Outcomes Based Accountability Framework co-produced by SP & HSC.

SWOT ANALYSIS	External
• Some evidence of seamless transitions to housing floating services, particularly where this is delivered by JCSA provider.	
Weaknesses *Internal factors within your control that may impede ability* *to meet objectives* *Invest in areas with minimal weakness* *Divest in areas of significant/ major weakness* *Address solutions to each weakness in opportunities*	**Threats** *Damage Control*
Meeting Complex needs; ETE engagement; direct support *to young people* *Multi-agency working; mediation; move on for young* *people; staffing skills mix; staffing levels; interface with* *floating support; staff training opportunities; social* *activities; high number of unplanned move ons;* • Variation in referral criteria and processes across services. • Finite funding & Restricted Budgets • Lead agencies lack of collaboration regarding contract management and consulting jointly with providers on need for additional funding provided by HSC Trusts for young people with additional needs. *Covid* • Impact on response to youth homelessness – housing advisors completing assessments by phone, increased complexity of need, lack of joint working across, delays in social work response in some areas. • Increased complexity of mental health needs & experience of substance use/ addictions.	*Increasing demand for services* • Demographics – increasing number of children coming into care; increasing number of homeless aged 18+; • Location of services not consistent with demand • Covid related factors – increased demand for services; emotional and mental wellbeing; • Lack of access to adult supported services – substance misuse, mental health • Funding for services *Current continuum of service provision* • Young people on low incomes with support needs are at risk on becoming increasingly marginalised and experience barriers to suitable housing and support • Lack of suitable care placements and supported accommodation for 16&17 year old late entrants to care

SWOT ANALYSIS	External
Moving in and support to young people living in services • 16 & 17 year olds unplanned/ emergency move ins account for approx. one quarter of all accepted referrals (2018-20) • Inconsistent practices in joint working; • Governance arrangements regarding referral process and placement of young adults aged 18 – 21 / 25 alongside services • 16 / 17 year olds – use of B&B / hotel • High and Complex Needs - Use of generic hostel and B&B for young people over 18 with very complex needs; • The size, staffing model/ complement incompatible with complexity of need within some services – lone working within some services. • Staffing model does not provide med-high level direct support to ensure good routine and purposeful engagement in activities/ tasks to support young person's needs - social, educational, health, educational, civic, housing • Supporting young people's emotional wellbeing and experience of managing addictions – variations in therapeutic planning and support when looked after children transition to supported accommodation. • Lack of understanding across the sector of integrated care and housing support model • Providers do not administer or store medication for young people – current responsibility of Trust leaving & aftercare services. • YP leaving residential care – transition planning to prepare YP, pathway planning; • Therapeutic planning for LAC living in JCSA inconsistent practices across Trusts	• Housing & support solutions for homeless 18+ - lack of provision for young people with low to medium support needs • Homelessness prevention services – *Planned transitions from supported accommodation to housing & support – logistical and market challenges* • Policy and practice relating to timing of housing application & assessment for care experienced young person means they are less likely to secure social housing • Insufficient social housing options for young people due to excessive waiting lists; • Accessibility and affordability of the private rented sector; • Poverty & Welfare Reform/ LHA/ Universal Credits • Limited placement options for 16 & 17 year olds • Lack of suitable provision for young people with high and complex needs – JJC • YP familial ties to communities & securing housing in location of choice (young people offered housing in unsuitable areas with high level of anti-social activity);

SWOT ANALYSIS	External
Transitioning out of Supported Accommodation • Delays in young people moving from supported accommodation • Lack of connectivity/ coordination with support accommodation landlords (housing associations) • Lack of connectivity to Floating Support in some localities to support young person's pathway to greater independence and suitable accommodation • Lack of a consistent partnership approach to exploring housing options and secure suitable accommodation • High number of unplanned move ons from many services leaving young people at risk of, or experiencing homelessness and unsafe living arrangements. • Variation in needs and risk thresholds across provider organisations and services and a trauma informed approach – different tolerance levels and "stickability" approach to supporting young people • Variation in service documentation, referral forms & processes, information for young people • Application and FDA award for young people living in service • Process of unplanned move (notice to end/ termination of licence agreement, young people's information about rights and entitlements and advocacy support. • Confusion regard role clarity – SW/PA/Housing Support Worker/ Floating Support • Knowledge base on Housing Rights, young people's entitlements, expertise – SW/ PAs/ Housing Staff	

APPENDIX 3

HSC Trust	Provider	Location	Units		18+ (Max 2 yrs)	Total	NIHE 18+	Care Only
			16/17 Yr old					
			Max 2 yrs	10 day Assessment				
Joint Commissioned Supported Accommodation Projects								
Belfast	MACS	University Street	9	-	9	18	N	Y
	Simon Community NI	242 Antrim Road	2	2 (Currently closed)	6	10	N	Y
	BCM	Grampian Avenue	3	-	3	6	N	Y
	Barnardos	Annadale, Belfast	4	-	4	8	N	Y
	Barnardos	Haywood Avenue	1	-	1	2	N	Y
Northern	BCM	Tafelta Rise, Magherafelt	4	-	9	13	Y	N
	Simon Community NI	Mount Street Mews, Coleraine	5	2	8	15	Y	N
	Barnardos	Grove Road, Ballymena	2	-	3	5	N	Y
South Eastern	MACS	Downpatrick	3	2	3	8	Y	N
		Lisburn	3	2	4	9	Y	N
	BCM	Bangor	5	2	5	12	Y	N
Southern	MACS	Newry	3	-	4	7	N	Y
	BCM	Thomas Street, Dungannon	2	-	2	2	N	Y
Western	Action for Children	Rossory Grove, Enniskillen	4	-	9	13	Y	N
	First Housing Aid & Support Services	Francis Street, Derry	1	-	8	9	Y	N
		Jefferson Court, Derry	5	2	18	25	Y	N
	Praxis	Northland Road	2	-	4	6	Y	N
TOTAL			58	12	100	170		

GLOSSARY OF TERMS

Care-experienced   For the purposes of this report where we use the term 'care experienced', it is intended to include both looked after children and young people and children and young people who are 'on the edge' of being looked after. This includes: those who are living in families with intense needs and requiring supports [on the edge of coming into care]; those returning home from a period of care [on the edge of a (short) period in care]; or those leaving care to make the journey into adult life [on the edge of ageing out of care]. It also includes young people who have left care and are still in need of support, including those who have been adopted; those who are living with family under a Private Law Order and those who are supported in independent living in early adulthood.

Child in Need   16 and 17 year olds who are assessed as homeless and in need of accommodation.

Looked After Child   A child who is looked after and in the care of HSC Trust or who is provided with accommodation by that HSC Trust for a continuous period of more than 24 hours.

Edge of Care   Young people known to the HSC Trust due to family involvement, returning home following a short period of time in care or young people leaving care as they transition to adult life and independence.

Homeless 18+   Non-care experienced young people presenting to NIHE as homeless.

Care Leavers   Care experienced young people aged 18+.

Floating Support   Housing support delivered to young people in own tenancy to prevent future homelessness and to achieve independent living.

Late entrants to Care   Generally applies to 16/17 year olds previously not known to HSC Trust.

Co-funder The two lead agencies HSC Trust and Supporting People who jointly fund the 16 supported accommodation projects.

Pathway Plan Looked After Children Pathway plans, undertaken in partnership with children and young people and in consultation with professionals working with the child and family, provide a co-ordinated composite assessment and plan from across the multi-agency group working with the child and family to prepare them for leaving care.

Service Users Young people in living supported accommodation projects

ACRONYMS

ACEs	Adverse Childhood Experiences
CAMHS	Child and Adolescent Mental Health Service
CSE	Child Sexual Exploitation
CYP	Children and Young People
DE	Department of Education
DfC	Department for Communities
DfE	Department for the Economy
DoH	Department of Health
ETE	Education Training or Employment
FDA	Full Duty Applicant awarded status under homelessness legislation
FITC	Framework for Integrated Therapeutic Care
GEM	Going the Extra Mile Scheme
HB	Housing Benefit
HSC	Trust Health & Social Care Trusts – 5 in Northern Ireland

- **BHSCT** Belfast Health and Social Care Trust
- **NHSCT** Northern Health and Social Care Trust
- **SHSCT** Southern Health and Social Care Trust
- **SEHSCT** South East Health and Social Care Trust
- **WHSCT** Western Health and Social Care Trust

HSCB	Health and Social Care Board
JJC	Juvenile Justice Centre
JCSA	Jointly Commissioned Supported Accommodation
NEET	Not in Education Training or Employment

NIHE   The Northern Ireland Housing Executive

PBNI   Probation Board Northern Ireland

PfG   Programme for Government

PHA   Public Health Agency is the regional organisation for health
              improvement, health protection and social wellbeing.

PIEs   Psychologically Informed Environments

PSNI   Police Service of Northern Ireland

QMT   Quality Monitoring Tool for Supporting People

RQIA   The Regulation and Quality Improvement Authority

SP   Supporting People

TTLAAC   Therapeutic Teams for Looked After and Adopted Children

UASC   Unaccompanied Asylum Seeking Children

UC   Universal Credit

UNOCINI   Understanding the Needs of Children in Northern Ireland

VOYPIC   Voice of Young People In Care

YJA   Youth Justice Agency