



SCOTTISH EXECUTIVE



Glasgow Homelessness Partnership

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SHELTER CONFERENCE

Halfway to 2012

ASSESSMENT & SUPPORT



Progress To Date

- Commissioning of Housing support
- Creation of integrated Assessment teams
 - Assessment and Diversion Team
 - Hostel Assessment and Resettlement Team (HART)
 - Ring Fencing of hostel residents and assessment process developed
 - Resettlement plans developed
- Development of protocols with GHA/R.S.L'S

Progress To Date (Cont.)

- Development of specialist support teams e.g.
 - Connect
 - Community Alcohol Services
- Commissioning of specialist accommodation with support
 - Increased number of drug rehabilitation beds commissioned
 - Increase mental health supported accommodation comm..
 - Alcohol support services - ARBD, Continuing drinkers, outreach
- Increase capacity in temporary accommodation within local communities (650 > 1700) with access to support

Progress To Date (cont.)

- Further development of Homelessness Integrated Assessment following outcome of pilot
 - Rationale:
 - Needs were not assessed unless within assessment team
 - Need for and access to support services not identified
 - 2 tier service being offered dependent on where you were placed.

HOMELESSNESS INTEGRATED ASSESSMENT



What is Homelessness Integrated Assessment (HIA)?

- An Assessment Tool and process
- Developed from Scottish Executive Guidance on:
 - Joint Working – Integrated Processes
 - Single Shared Assessment
 - Care Management

Development of HIA

- Initially developed in 2003 with pilot in HART team 2004
- Failure to implement and pilot feedback was poor
- Process revisited in 2005/6 to include feedback and lessons learnt
- Development group more inclusive and multi agency
- Process consulted on and revised

Development of HIA (cont.)

- Training on HIA revisited and carried out with all relevant staff
- Presentation points agreed
- Sharing of information agreed considering limits under data protection
- Paper system developed in the absence of IT solution
- Data collection system developed as part of process
- Monitoring and Information Officer recruited

Aim of HIA

To Provide a Tool to Assess the Needs of Individuals who Present as Homeless in order to:

- Divert them Away from Homelessness
- OR
- Direct them through Appropriate Homeless Services into Mainstream Housing and Care
- Respond to needs identified through assessment process
 - e.g. Health needs, support needs, specialist accommodation needs

Principals of HIA

- Needs-led Assessment
- Transparent & Accountable Process
- HIA Coordinator
- Monitoring and Evaluation of the process is built in to it
- Enables Information Sharing
- Person Centred Model of Care
- Service User Involvement
- Improved contact
- Available at different presentation points

Presentation Points

Statutory

Community Casework Teams:

Prison Casework Team

Refugee Support Team

Hamish Allan Centre

Homeless Addictions Team (HAT)

Homeless Health & Social Care Resource
Centre

Homelessness Acute Hospital Liaison
Service

Mental Health Discharge Assessment &
Resettlement Team (MHDART)

Non-Statutory

Glasgow Street Service

Link-Up

Homeless Day Centres:

- Wayside
- Glasgow City Mission
- Lodging House Mission

How Does it Work?



Homelessness Integrated Assessment (HIA)

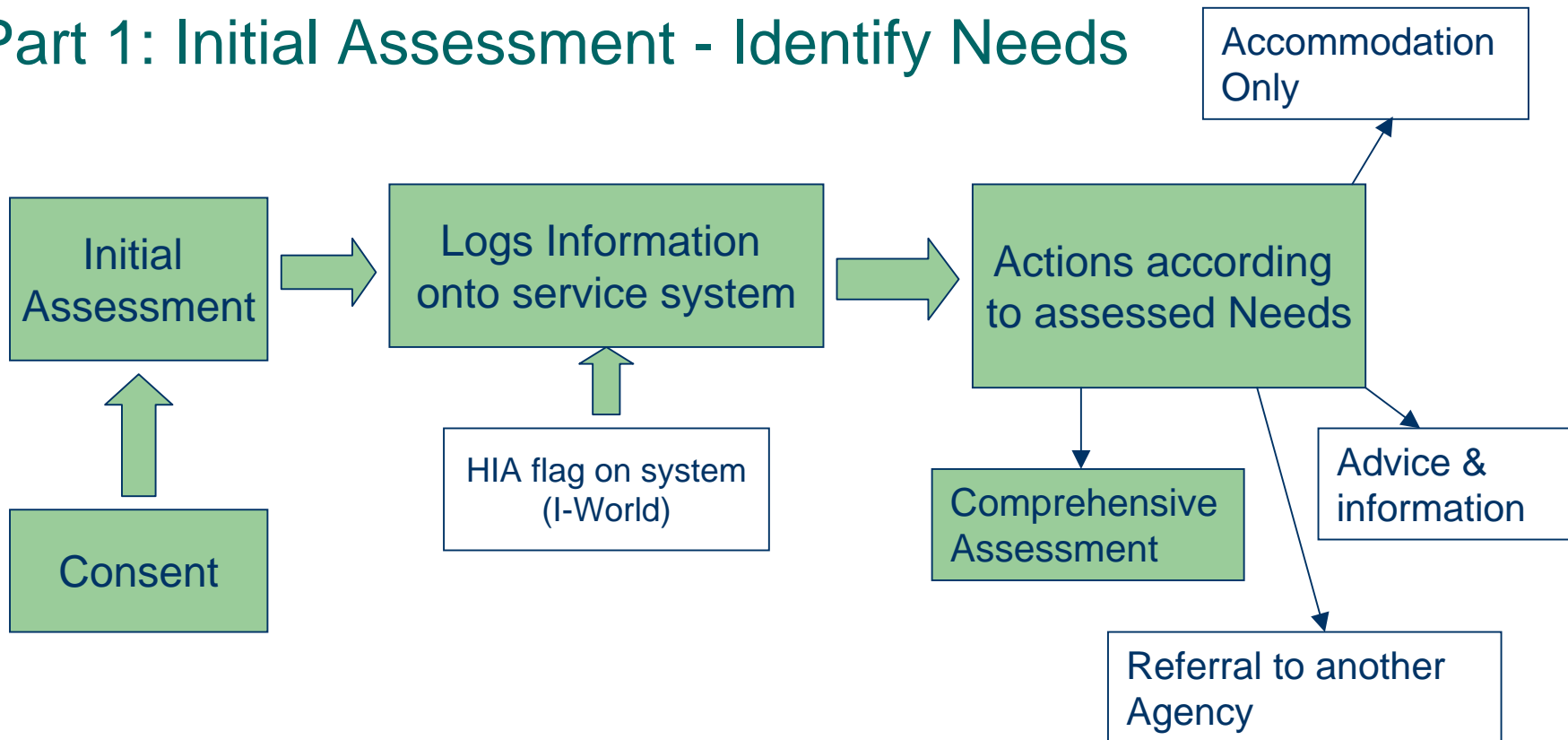
- Developed to assess need within the homeless population of Glasgow
- Supports integrated working both within homelessness and with external partners
- Encourages information sharing
- Enables the Partnership to build a better picture of homelessness within Glasgow

The Tool

- Part 1: Initial Assessment
- Part 2: Comprehensive Assessment
- Part 3: Care & Support Plan
- Part 4A & B: Formic Monitoring Forms

Role of the HIA Coordinator

Part 1: Initial Assessment - Identify Needs



Role of the HIA Coordinator: Complex Cases

Part 2:

Comprehensive Assessment

- Coordinate the response for each individual
- Refer for specialist assessments
- Collate information

Part 3:

Develop Care & Support plan with other Professionals

- Liaise with other services until outcomes are achieved and needs met

Implementation

- Implementation from May 2007
- Negotiations on change in roles alongside Pay and Benefits Review caused delays
- Rate of Implementation varies across services
- Impact of service reviews of Community Case Work Teams, Hamish Allan Centre, James McLean and Inglefield Street to improve ability to complete

PREVENTION AND TENANCY SUSTAINMENT IN MAINSTREAM



Prevention

- Working with mainstream services for early detection of potentially homeless households
- GHA Tenancy sustainment strategy
- Continuity of care audits to test the process
- Increased resources available in localities
- Homelessness responsibilities identified within CHCPs eg HHAPs, interface meetings,

GHA Tenancy Sustainment

- Research Report
- Tenancy Sustainment Events 2006
- Tenancy Sustainment Strategy & Action Plan

Who is most at risk of early termination?

- Under 25's have high risk – but relatively few are housed.
- Tenants aged over 25
- Single households
- Tenants with Community Care Needs
- Waiting list and homeless cases equally at risk

Risk Factors

- Lack of choice
- Poor property condition
- Lack of furniture
- Debt problems
- Lack of support
- Anti-social behaviour
- Lack of joined up working

Why it Matters?

- Each early termination costs GHA £1,328 in repairs, security and lost rents
- Significant costs to GCC Homelessness Partnership and other agencies
- Considerable social costs to individual

Strategy – Key Objectives

- Improve the allocations & offers process
- Identify & respond to tenants needs
- Develop & support tenancy sustainment initiatives
- Enhanced information sharing & joint working
- Monitor & evaluate

Proposed Actions

- Assessing support needs of applicants and new tenants
- Improving referrals for tenancy support
- Developing information & advice provision
- Promoting better information sharing and joint working
- Joint training events

Developments In Localities

- Essential connections group
- Homelessness Forums where support providers and services meet
- Housing forums where accommodation needs of homeless people are raised within the City Plan
- Dedicated resource in the Locality Development Coordinator role working on these issues (troubleshooting cases and working to prevent homelessness)

Developments In Localities (cont)

- Improving access to employment and training options (working with equal access colleagues)
- Bridging people from homelessness to resettlement
- Assertive outreach for mental health services
- Proactive engagement in Community Addiction Teams

FAILURE TO ENGAGE



Failure to Engage - Why?

- Meeting the challenge of the right to refuse
- Low demand for Service v High need for service
- Failure of clients to recognise own needs
- Low service user expectation

Failure to Engage - Solutions?

- Open door policy re access
- Not closing the door to people who walk away
- Ping Pong Clients - Shared care as the best option rather than pass the parcel.

SUMMARY



Success And Failure

- High level of services now available
- Assessment process developed and being implemented but isn't fully there yet
- Joint working essential
- Shared care is what works best
- Barriers and blockages slow things down
- The answer is keep moving forward

Shared Care - The Buck Stops Here

- High level of services now available
- Assessment process developed and being implemented but isn't fully there yet
- Recognise the barriers we build and dismantle them
- Take a different perspective
- Recognise where objectives meet
- Put the service user at the centre
- Value the experience of others

