

REPORT TO: Housing Committee – 9 June 2003

REPORT ON: Dundee's Homelessness Strategy 2003-2006

REPORT BY: Director of Housing

REPORT NO.: 216-2003

**1. PURPOSE OF REPORT**

- 1.1. To seek Housing Committee approval of the corporate Homelessness Strategy for 2003-2006, to meet the requirements of the Housing (Scotland) Act 2001 and the recommendations of the Homelessness Task Force.

**2. RECOMMENDATIONS**

- 2.1. That Housing Committee approve:
- a. The content of the Homelessness Strategy 2003-2006 which equips the authority with an Action Plan to eliminate homelessness in Dundee.
  - b. The submission of the strategy to Scottish Executive and Communities Scotland, to inform the Homelessness Monitoring Group and the Director of Regulation and Inspection respectively, of the Council's planning work on homelessness during the next three years.

**3. FINANCIAL IMPLICATIONS**

- 3.1. All costs will be met from specific grant awarded by the Scottish Executive. There are no implications for the Housing Revenue Account or Council Tax.

**4. LOCAL AGENDA 21 IMPLICATIONS**

- 4.1. The proposed reflects a number of key Dundee 21 Themes, including access to good food, water, shelter and fuel at a reasonable cost, health is protected, access to the skills, knowledge and information needed to enable everyone to play a full part in society.

**5. EQUAL OPPORTUNITIES IMPLICATIONS**

- 5.1. Implementation of the new homelessness duties fulfils the Council's commitment to assist those in need by ensuring that needs are assessed and a range of accommodation is available for local people.

**6. BACKGROUND**

- 6.1. Section 1 of the Housing (Scotland) Act 2001 commenced on 1 October 2001.

- 6.2. Section 1 requires Authorities to carry out an assessment of homelessness, and prepare and submit a strategy for preventing and alleviating homelessness in its area.
- 6.3. Work to produce the corporate strategy was carried out between June 2002 and March 2003, by a Working Group involving the main stakeholders in planning, developing and delivery of homelessness services.
- 6.4. A copy of Dundee's Homelessness Strategy 2003-2006 is attached to this report.
- 6.5. The strategy consolidates and builds on the experience and successes of the single homeless and youth housing strategies. The recent achievements of the work can be seen in the following:
  - a. The quality of local accommodation has improved dramatically with the opening of three new hostels for single and young homeless people in the City Centre.
  - b. Over £2.5m of additional funding has been awarded to the Authority from Rough Sleepers Initiative, (RSI), DSS and Scottish Executive specific homelessness grant to enable partnership working to meet strategic objectives and provide local services.
  - c. A local accommodation project, for young, single homeless people has received £340,000 from New Futures fund to provide support, education and training for employment. This facility is now fully occupied and is making a valuable contribution to the local community.

## 7. **MONITORING DUNDEE'S HOMELESSNESS STRATEGY 2003-2006**

- 7.1. Accountability will be maintained by annual reports to Housing Committee.
- 7.2. These will include feedback received from the Homelessness Monitoring Group and Communities Scotland on overall progress and performance on implementation of the Homelessness Strategy 2003-2006.

## 8. **CONCLUSION**

- 8.1. Submission of the corporate strategy demonstrates continued commitment to prevention of homelessness, and to address the issues faced by all those who experience homelessness, who need more than accommodation on its own.

## 9. **CONSULTATION**

- 9.1. Comments have been sought from relevant Departments and external partners, and these have been incorporated into this report.

## 10. **BACKGROUND PAPERS**

- 10.1. Report on Use of Funding to Assist Implementation of Homelessness Sections – Housing (Scotland) Act 2001, approved by Housing Committee 17 December 2001 and Personnel Committee 14 January 2002.
- 10.2. Personnel Committee – 10 March 2003.

- 10.3. Report on Use of Homelessness Funding Allocations, approved by Housing Committee on 17 March 2003.

**ELAINE ZWIRLEIN**  
**DIRECTOR OF HOUSING**

**MAY, 2003**

# Dundee's Homelessness Strategy 2003-2006

## **INTRODUCTION – PULLING TOGETHER**

Dundee has a good reputation for partnership working, to provide quality services for individuals and communities in the City. This, our first, corporate Homelessness Strategy intends to build on that positive example to improve services to local vulnerable people.

All those involved agree that the experience of producing the strategy reflects the commitment, of the statutory and voluntary organisations, to work together. This is vital, as homelessness is normally about needing more than accommodation. The continued collaboration of all local agencies, in the implementation of this strategy, will increase services from other strategies, policies and procedures which impact on the lives of homeless people.

## **DUNDEE PROFILE**

Dundee City Council is geographically the smallest local authority area in Scotland, despite having the 12<sup>th</sup> largest population of 142,700 (*General Registrar Office 2000*).

The demographic trends reflect a number of issues. For example, unemployment varies from 1.7% to 19.2% in wards across the City, and incomes are lower than average. Five post code sectors are amongst the most deprived 10% in Scotland, with almost a third of the population in Dundee living in these areas. In addition the Criminal Justice Strategy 2002-2005 identifies that the crime rate is the third highest of all Scottish local authorities, while reported crime is falling slightly, there has been a small increase in offences under the Misuse of Drugs Act.

As highlighted in the Dundee section of the Tayside Health and Homelessness Action Plan 2002-05, areas for health improvement include reducing the amount of alcohol people drink, reducing smoking levels, especially in deprived communities and promoting a healthy diet.

There is, however, evidence of success and progress towards agreed outcomes as defined in the Community Plan 2001-06. The success stories can be described as new investment, new civil service posts and increases in the number of students attending the City's 2 Universities.

Since the Community Plan 2001-06 was originally produced, the strategic themes have been refined from 6 to 5 based on review and evaluation. The updated strategic themes are as follows:

1. Working and Learning
2. Health and Care
3. Environment
4. Communities Safety
5. Building Stronger Communities

As part of the local Housing Strategy (2004-2009), Dundee's Homelessness Strategy will contribute to achievement of the Community Plan strategic outcomes.

## **PROCESS TO DEVELOP DUNDEE'S HOMELESSNESS STRATEGY 2003-6**

At their meeting in February 2002, members of the Single Homeless Strategy Group (SHSG) agreed an outline timetable and workplan for production of the local Homelessness Strategy. At a further planning meeting in May 2002, members of and staff of other relevant statutory and voluntary services, not normally represented, endorsed the SHSG proposals to set up a short life, strategy development working group.

The remit of the group was to review the homelessness needs assessment information, and generate a draft strategy for consultation with agencies and service users, prior to submission to the Scottish Executive Homelessness Monitoring Group.

The Working Group to develop Dundee's homelessness strategy involved representatives from:

- NCH Cowan Grove
- The Wishart Centre
- Positive Steps Partnership
- Dundee Women's Aid
- Dundee Local Healthcare Co-operative
- Shelter
- Dundee City Council, Housing and Social Work Departments

Members of the strategy development working group met between June and April 2003 to devise this strategy, and agree the consultation approach, to make sure homeless people in Dundee have opportunities to influence future services.

The group adopted the Homelessness Task Force's definition of homelessness for the strategy, see Appendix 1, and agreed the following as vulnerable groups of clients:

- Mental Health
- Disabled – Physically/Learning
- Prison Discharges
- Hospital/Institution Discharges
- Fleeing Violence
- Young People – 16+
- Older People
- Drugs/Alcohol/Dependencies
- Intentionally homeless, including rent arrears
- Single Parents
- Rough Sleepers
- Harassment (Neighbour) Problems
- Financial Problems
- Those "care of"/with friends/relatives
- Those excluded

Participants at the planning meeting also agreed that the strategy development working group would select the chair, membership and terms of reference for a new Homelessness Co-ordinating Group, to oversee implementation of the local Strategy 2003-06. The existing Youth Housing and Hostel Sub Groups would continue, and would extend their role to include consultation with service users.

The Dundee Health and Homelessness Group was convened in August 2002 and information and progress reports are shared between the 3 operational groups.

Consultation with service users on this strategy has been limited due to staffing difficulties and has focussed on health and youth issues. Several planned events, combined with staff of other agencies did not take place, however, these have been rescheduled for Autumn 2003.

## **HOMELESS NEEDS ASSESSMENT**

### **INTRODUCTION**

This section of the strategy will provide the evidence to support the objectives and actions which we propose.

As well as work which has been committed specifically to draft this strategy, we have utilised information gathered for complementary strategies. For example, joint needs analysis was done with the Council's Supporting People Team for the Supporting People Strategy.

Information has been collected and analysed for each of the groups identified in our 'Definition of Vulnerability'.

In addition we have considered the broader context of relevant issues in the city.

In the citywide context, Dundee has suffered considerable population decline for many years. It is not expected that the outflow of population will abate in the near future. One of the results of this population loss is a surplus of housing. This surplus has been evident in Council housing for some time, but is now clearly a problem at the bottom end of the private owner and private rented sectors.

Though there is no net shortage of houses, there are problems of access to housing (often owing to behavioural issues and ability to live independently). There is also a problem with the quality of housing which is available and which vulnerable people have access to.

A further important issue is that our population decline can largely be attributed to the loss of economically active people, hence there are concentrations of poverty in many parts of the city, poverty having a direct bearing on homelessness.

### **HOUSING PROVISION**

Dundee is possibly in an unenviable position – having surplus housing combined with population decline.

The Housing Department aims to ensure that quality housing is provided for the people of Dundee, in a safe and healthy environment. High standards of accommodation and services are set by involving and consulting with tenants and other service users, through a network of groups, Dundee Federation of Tenants Associations and Dundee Association of Council House Owners.

### **DUNDEE HOUSING STOCK**

The Housing Market Context Statement, issued by Communities Scotland in 2001, identifies a total of 71,647 households. This indicates a 9% increase in households from 1998's total of 65,282. (Mid year household estimates, Scottish Executive 2000). Tenure type is broken down as follows:

**DUNDEE TENURE BALANCE**

Year	Owner Occupied		Private Rented		Social Rented		Total
	No	%	No.	%	No.	%	
2001	39,288	55	5,715	8	26,644	37	71,647
1998	27,398	42	4,825	7	33,059	51	65,282

Dundee City Council Housing Department stock (at 31 March 2002) was 18,478, in the following house types:

House	High Rise	Tenement	4-in-a-Block	Flat/Mais.	All Types	Letting Stock
4,145	2,958	8,156	1,363	1,856	18,478	17,510

Due to falling demand for particular areas and house types, the department has a progressive demolitions programme, and success in stock transfer, through New Housing Partnerships. This has been based on tenant participation and collaboration with new landlords, such as Sanctuary Scotland Housing Association.

**HOUSING ASSOCIATIONS' STOCK****Dundee Housing Association Stock as at 31 March 2002**

	TOTAL
Abertay HA Ltd.	1,751
Angus HA Ltd.	219
Beechwood Housing Co-operative Ltd.	116
Bield HA Ltd.	393
Cairn HA Ltd.	44
Gowrie HA Ltd.	506
Hillcrest HA Ltd.	1,687
Home in Scotland Ltd.	1,252
Kellyfield Housing Co-operative Ltd.	63
Margaret Blackwood HA Ltd.	89
Ormiston People's Housing Co-operative Ltd.	220
Sanctuary (Scotland) HA Ltd.	1,466
Scottish Veterans HA Ltd.	56
Servite HA	602
Soroptimist Housing (Dundee) Ltd.	17
<b>TOTAL</b>	<b>8,481</b>

(Source: Communities Scotland Annual Performance and Statistical Returns 2003)

## A PICTURE OF HOMELESSNESS IN DUNDEE

A general overview of homelessness in the city can be gained from statistical returns from the Council's homeless service. Homeless applications topped 1,000 per year between 1997/98 and 2000/01, in 2001/02, 929 applications were received. It is expected that in 2002/03 applications will again rise above 1,000 owing mainly to extended duties brought about by the Housing (Scotland) Act 2001.

Rough sleeping is not a major problem in the city but it is persistent. Street counts have shown continuing low levels of rough sleeping. George Street Research 2<sup>nd</sup> Report 2003, shows a reduction of 2 between May 2001 and October 2002, in the weekly average number of people sleeping rough in the area. Outreach and Resettlement Team ensure that rough sleepers are aware of services and accommodation.

## WHO ARE HOMELESS?

It is difficult to typify homeless people, their circumstances and characteristics are diverse. Table 1 displays applicants to the homeless service in the categories defined by the Scottish Executive's statistical returns for homeless persons.

**TABLE 1: Homeless Applicants by Category of Priority Need 2001-2002**

	Applications) Year 2001/02	
Emergency (fire/flood/storm)	18	(2%)
Learning Disability	7	(1%)
Mental Illness/Handicap (includes discharges)	80	(8%)
Old Age	16	(2%)
Other Special Reason (includes discharges)	121	(13%)
Physical Disability (includes discharges)	37	(4%)
Youth	143	(15%)
Pregnant	26	(3%)
Not in Priority Need	147	(15%)
With Dependant Child (includes domestic abuse)	275	(30%)
Medical Condition	7	(1%)
Drink/Drug Problem	4	(1%)
Fleeing Domestic Violence/Abuse (individuals)	46	(5%)
Fleeing Non-Domestic Violence Outside the Household	1	(0%)
Discharged From Institution (inc. Prison/Hospital)	1	(0%)
TOTALS	929	(100%)

**(Source: HL1 Returns)**



The greatest number of applicants are from households with dependant children (30%). There are a significant number of people who are vulnerable due to a physical/mental/learning disability or other infirmity (16%). Other areas of concern are the numbers who are vulnerable because of youth (15%) and the number of families fleeing domestic violence (5%).

The numbers of people who are homeless but not in priority need are significant (15%). We know that many of these people are repeat homeless, single males.

## **HOMELESSNESS ACCOMMODATION FRAMEWORK 2002**

The current accommodation models and services for homeless people in Dundee are well established and used. These have evolved over the last 10 years, in response to demand – 929 homeless applications in 2001/2, (*see needs assessment*) and as a result of the strategic approach adopted by statutory and voluntary providers since 1992. The focus of much of this work has been to meet the needs of single homeless people, combined with local implementation of the Code of Guidance 1997, as a result of the Rough Sleepers Initiative (RSI) and the DSS (*now DWP*) Resettlement Programme.

Standards of accommodation for homeless people have improved dramatically in the Council's properties and local hostels, with 10 projects operating from new build or fully refurbished premises. Having been unsuccessful in a partnership bid for RSI resources in 1999, the Council continue to liaise with the Salvation Army staff to explore refurbishment and redevelopment opportunities for their Strathmore Lodge and Clement Park House hostels.

In addition to hostel provision for homeless people, a number of agencies operate dispersed supported accommodation, and the RSI funded Outreach and Resettlement Service have assisted 130 former hostel clients to sustain their own tenancies since 1998.

The 2002 needs assessment exercise has provided an accurate total of accommodation available for homeless people, aged over 16, in Dundee. Provided in a wide range of locations and a variety of models, 360 rooms/flats are managed by the Council and our partners, most linked to support or health services, see page 7.

Despite this level of provision, operational difficulties exist for roofless clients, who need immediate direct access accommodation, rather than long term, residential projects.

Dundee City Council, Housing Department's Lily Walker Centre offers a one door, advice, information and accommodation service. This facility provides an effective crisis response and is staffed on a 24 hour basis. The Department also operates 2 supported accommodation units, network and furnished flats, providing 100 units of Council accommodation.

Working in partnership with local statutory and voluntary organisations as well as Housing Associations, the Single Homeless Strategy Group has co-ordinated hostel and dispersed accommodation for 260 single homeless people since 1993. Members of this group also collaborated to arrange accommodation for approximately 40 homeless people who were among 60 Housing Benefit claimants, living at a dilapidated 100 bed hotel which was closed in 2000.

**HOMELESS ACCOMMODATION IN DUNDEE – AUGUST 2002**

<b>HOSTEL/PROJECT</b>	<b>NUMBER OF ROOMS/FLATS</b>
<b>DCC</b> Lily Walker Centre Supported Accommodation Unit Single Persons Flats Network Flats	(16 single rooms; 4 apartments; 1 bedsit) (8 apartments; 2 bedsits) 10 (2-apt. flats) 61
<b>NCH</b> Dundee Families Project (Referrals) Cowan Grove (Referrals)	6 (3 x 2-bed. flats, 3 dispersed flats) 8 (6 + 2 bedsits)
<b>CYRENIANS</b> Brewery Lane (Direct Access) Soapwork Lane (Direct Access) Seagate Project (Referrals)	20 32 15
<b>DSG</b> Foundry Lane (Direct Access) Flats (Referrals)	14 10
<b>JERICHO BROTHERS</b> Artillery Lane (Referrals)	10
<b>SALVATION ARMY</b> Strathmore Lodge (Direct Access) Clement Park House (Referrals)	45 21
<b>POSITIVE STEPS</b> Flats (Referrals)	56
<b>CAROLINA HOUSE TRUST</b> Training Flats (Referrals) Management Flats	4 4
<b>WOMENS AID</b> Refuges	14 (bedspaces in 3 refuges)
<b>TOTAL</b>	<b><u>361</u></b>

The Council monitors use of the direct access homeless hostels managed by partner agencies. The majority of these service users would have been classed as non priority homeless applicants or intentionally homeless. Table 2 displays the characteristics of the hostel population.

**TABLE 2: Hostel Occupancy Statistics Snapshot December 2000 & 2001**

	December 2000		December 2001	
	Average	Percentage	Average	Percentage
Available Bed Spaces	4,417	100	4,416	100
Occupied Bed Spaces	3,875	87.7	3,907	88.5
Men Occupancy	3,347	75.7	3,401	77
Women Occupancy	528	12	506	11.5
Men 16-25	466	10.5	544	12.3
Women 16-25	131	3	162	3.6
Men 26-65	2,453	55.5	2,395	54.2
Women 26-65	346	7.8	283	6.4
Men 66+	428	9.7	462	10.5
Women 66+	51	1.2	61	1.5

**(Source: Dundee Hostels 2000-2002)**

It can be seen that the vast majority are males aged 25-65, though approximately 10% each are males over 65 and males 16-25.

In overall terms the main clients who need assistance are:

- The number of people who are vulnerable due to mental/physical/learning disability.
- Young (16-25) people.
- Families with dependant children.
- Families fleeing domestic violence.
- Non-priority homeless.

Some of the issues identified above will be considered in more detail later when we look at particular vulnerable groups.

## WHY DO PEOPLE BECOME HOMELESS?

A study of the reasons for homeless applications taken from the Council's homeless service statistics (*refer to Table 3*) reveal that the majority (41%) are living with friends and relatives who can no longer accommodate them. These people, often referred to as the hidden homeless are a considerable cause for concern. Many are young single people, some are families.

**TABLE 3: Reasons For Homelessness**

	2000/2001		2001/2002	
	Parents/friends/relatives no longer able/willing to accommodate	339	31%	379
Disputes with spouse /cohabitee				
♦ Violent	185	17%	169	18%
♦ Non Violent	83	8%	84	9%
Other reason for loss/threatened loss	371	34%	172	19%
Discharged from institution, e.g. prison/hospital	46	5%	60	6%
Action by Landlord – Notice to Quit	54	5%	65	7%
<b>TOTAL APPLICATIONS</b>	<b>1,078</b>	<b>100%</b>	<b>929</b>	<b>100%</b>

(Source: HL1 Returns)

It is also significant that nearly 20% of those who gave a reason for homelessness stated the cause as a violent dispute with their partner.

Discharge from a prison or hospital accounted for 7%. Though comparatively small in number these events can be planned for by relevant agencies which highlights a problem of poorly co-ordinated responses.

Action by landlords (*i.e., evictions or notices to quit*) are again small in percentage terms but significant in numbers (60+). Though there are situations where eviction is inevitable this is an indicator of underlying problems. The majority of evictions carried out by the City Council last year was 82 which were rent arrears, 3 were for anti-social behaviour.

It is clear that problems of debt/poverty and of anti-social behaviour are considerable threats to housing stability and thus need to be tackled.

The main issues which need to be tackled to deal with the causes of homelessness can be summarised as:

- Helping people out of insecure accommodation (*hidden homelessness*).
- Domestic violence.
- Unplanned discharge from hospital/prison.
- Debt/poverty.
- Anti-social behaviour.

## IDENTIFYING THE NEEDS OF VULNERABLE GROUPS

In preparing this strategy, the Homeless Strategy Group agreed to focus on a number of groups of people who we see as being particularly vulnerable. We will assess the circumstances of each of these groups in turn.

### (i) People with Mental/Physical/Learning Disability

As previously noted, in 2001/02, 87 people with a mental illness or learning disability presented themselves as homeless at the Council's homeless service.

In February 2003, there were 389 active cases of people with mental health issues in contact with the Social Work Department.

A working group involving Health, Housing and Social Work staff was set up by the Council to look at Organic Brain Disorder in 2001. This was set up because an increasing number of people with organic brain disorder (particularly but not exclusively alcohol related dementia) were coming to the attention of the Homeless and Social Work Services. An assessment of the population who Social Work, the Housing Department and Voluntary Direct Access Hostels support was undertaken. This assessment identified four categories of need (see Table 4).

**TABLE 4: Dundee Hostel Clients – Alcohol Needs**

<b>GROUP A</b>	People who can reasonably manage with some support (people who need support to sustain their tenancy). People who can manage when sober but become difficult to manage when intoxicated.	60
<b>GROUP B</b>	People who have had their own tenancy but who are or who have become homeless.  They are hard to place, their alcohol use exacerbates other problems – may attend, set fires, vulnerable and at risk.	15
<b>GROUP C</b>	People who are cognitively impaired and who have mental health problems – who need more intensive supported accommodation.	23
<b>GROUP D</b>	A small number of people who have intense mental health needs for whom there is no suitable resource, e.g. nursing homes cannot cope with their aggressive behaviour.	13
<b>ALL GROUPS</b>	<b>TOTAL CLIENTS</b>	<b>111</b>

(Source: Dundee Hostels November 2001)

Owing to the significant numbers of people with mental/learning disability identified in the Supporting People Needs Assessment who are homeless, it can be assumed that some people are not gaining access to support, care and health services which they need.

In 2001/2 there were 25 homeless applicants who had a physical disability, on occasions this has caused difficulty in securing suitable temporary accommodation.

Examination of the 64 referrals to RSI projects between April – September 2002, confirms the following health and addiction problems:

Problem	No
Alcohol	12
Mental Health	11
Learning Disabilities	5
Physical Health	12

**(Source: Glasgow Homelessness Network Core Data Report December 2002)**

The main issues which need to be tackled are:

- Timely assessment of people for community care/health services.
- Provision of sufficient temporary and permanent accommodation with ancillary care, support and health services.
- The implementation of hospital discharge protocols to ensure that people with mental/physical/learning disabilities are not discharged to a homeless situation or one where they are vulnerable to homelessness.
- The development of special accommodation and care for the most challenging people with organic brain disorders.
- The provision of temporary homeless and hostel accommodation for people with a physical disability.

#### (ii) **People Discharged from Hospital**

People in this category fall into two broad groups:

- People coming from acute hospital beds/accident and emergency
- People coming from long stay institutions.

Though the number of people discharged directly to a homeless situation from hospitals are few in number, those few which are encountered are often the most difficult cases to deal with due to drug/alcohol dependencies and violent behaviour.

Research commissioned by the Council in 2001 titled "Pass the Parcel", An Investigation into the Hospital Discharge Arrangements for Homeless People, identified inadequacies in the quality or timing of community care assessments for homeless/potentially homeless being discharged from hospital. Table 5 shows the number of people discharged from hospital who then entered homeless/direct access hostels between 1 April 2000 and 31 March 2001.

**TABLE 5: Homeless People Discharged from Hospital 2000/01**

<b>Hospital Type</b>	<b>DCC Homeless Service</b>	<b>Other Hostel</b>
Acute	16	4
Long Stay Mental	11	12
<b>TOTAL</b>	<b>27</b>	<b>16</b>

**(Source: Investigation into Hospital Discharge Arrangements for Homeless People)**

Though the numbers of homeless people discharged from hospital are not great, the problems which many of these people exhibit require significant resources to manage, which, without adequate care planning and support/care services are:

- Implementation of mutually negotiated discharge protocols.
- Timely community care assessment.
- Provision of more detoxification services.
- Better access to drug/alcohol rehabilitation.
- Better communication between hospitals, Homeless Services and Social Work.

### **(iii) Prison Discharges**

Stays in prison are both a cause and symptom of homelessness. The upheaval caused when an individual is given a custodial sentence often results in a loss of accommodation and employment.

On being released from prison, many ex-offenders find it difficult to find employment or accommodation and a downward spiral of social exclusion begins.

It is also the case that some homeless people fall into patterns of offending for a number of reasons including alcohol, drug and other substance abuse. Homelessness and offending are often symptomatic of each other and are in themselves symptoms of other social problems.

Between April 2002 and March 2003 a minimum of 14 people entering Dundee Cyrenians accommodation were from prisons. In the same year 36 people using the Council's homeless service were from prison.

In addition to these there are special problems caused by Schedule 1 offenders. It is estimated that between 5 and 10 Schedule 1 offenders per year contact the Council's homeless service. Funding appropriate accommodation for these people where the threat posed by and to them is difficult to overcome.

The main issues which need to be tackled with regard to ex-offenders are:

- Provision of support services prior to and post discharge.
- Implementation of prison discharge plans.
- Provision of accommodation/support for Schedule 1 offenders.

(iv) **People With Drug and Alcohol Dependencies**

Of the people who were categorised as priority homeless between April 2000 and March 2002, 4 people or 1% stated that they had a drink or drug problem. We know that these problems are severely under-recorded.

More generally, there are 899 known drug users in the City but it is estimated that there are approximately 2,700 in actuality. The Drug and Alcohol Team currently support 21 clients with a waiting list of 14.

There are 430 people known to Social Work Services who have an alcohol problem and the Drug and Alcohol Team support 19 clients. In 1998, a survey of direct access hostel clients showed 44% to have a significant problem owing to alcohol abuse.

People are banned from direct access hostel accommodation due to alcohol abuse and drug abuse. The Scottish Executive's RSI Monitoring Report 2002 identified that drink and drug problems are two of the main issues which prevent rough sleepers funding accommodation in Dundee. This is reinforced by the Core Data Report 2002, which reveals 23 clients between April and September 2002 had problems with drug and alcohol, of this group, 9 had slept rough.

The main issues which need to be tackled with regard to alcohol and drug dependencies are:

- Access to drink/drug detoxification and rehabilitation services.
- Provision of temporary accommodation for people who are under the influence of drink/drugs

(v) **Young People**

Over 30% of applicants to the Council's homeless service are aged between 16 and 25. Significant numbers of applicants are single parent females (see Table 6).

**TABLE 6: Statutory Homeless Household Types By Age Group 2000-2002**

Lily Walker Centre 2001/2002	929 Applications	
	2001/2002	(%)
Single Person < 18	132	(14)
Single Person 18 – 24	164	(18)
Single Person 25 – Retirement	204	(21)
Single Person Retirement +	16	(2)
Married/Cohabiting with Children	52	(5)
Married/Cohabiting no Children	35	(4)
One Parent H/Hold Under 25	79	(9)
One Parent H/Hold 25+	241	(26)
Other	6	(1)
<b>TOTALS</b>	<b>929</b>	<b>(100)</b>

(Source: HL1 Returns 2001/2002)



Approximately 14% of applicants between 2000 and 2002 were categorised as in priority need because they were young and vulnerable.

Reference to Table 2 shows that an increasing number of direct access hostel clients are young men or women aged 16-25, indeed there was an 18% rise in the number of bed spaces occupied by this age group between 2000/01 and 2001/02.

Tayside Furniture Project provide essential furnishings to people setting up home who would otherwise have difficulty in affording these. In the last calendar year 38% of their clients were aged between 16 and 24, a total of 271 people. Many of these people would have been homeless or potentially homeless.

Specific issues which need to be tackled for young homeless people are:

- Increasing numbers of people who are becoming homeless or where the local authority has a duty to them under housing legislation.
- The requirement for furnishings and white goods for young people setting up home.
- The need for support services to help prevent young people being evicted for rent arrears or anti-social disputes.

(vi) **Older People**

Population projections suggest that Dundee's population will continue to decline, however, the proportion of people aged over 65 will remain broadly constant. The numbers of people aged over 75 are expected to proportionately increase.

Numbers of people applying as homeless and being prioritised as vulnerable due to old age is low at less than 3% (see Table 1). In direct access hostels, 13% of available bedspaces in 2001/2002 were taken by people aged over 65. Many of these people have alcohol related problems and would pose problems to resettle. This is because many have lived in hostels for many years and know no other way of life. Older homeless people often suffer severe health problems and have difficulty in gaining access to health services. Issues to be addressed for this group area:

- Access to GP and acute healthcare services.
- Providing suitable long-stay hostel accommodation.
- Ensuring access to alcohol/advice.
- Provision of "wet hostel" accommodation.

(vii) **People Suffering Harassment and Fleeing Violence**

Tackling domestic abuse is a national priority and many victims end up homeless. In 2001/2002 47 households were assessed as priority need homeless applicants representing 5% of all priority need cases (see Table 1). However, a significant proportion have been recorded in the "with Dependent Child" category of priority need.

Between April 2001, and March 2002, Dundee Womens' Aid Collective admitted 83 women and 109 children to their supported accommodation.

Issues to be addressed for these groups of people are:

- Additional supported womens refuge accommodation.
- Effective referral between agencies to ensure support and accommodation is provided timeously.

(viii) **Single Parents**

During 2001/2002, 34% of homeless priority applicants were from single parent households. Though the provision of adequate accommodation is crucial for this group, there are wider concerns. The general well-being of parents and their children must be catered for. This required multi-agency working with Social Work, Voluntary Sector providers and health services.

The main issues to be addressed for this group are:

- Liaising with Social Services to ensure proper and timeous assessment of care and support to vulnerable parents and children.
- Providing support to ensure single parent households tenancies are not jeopardised.

(ix) **People Living “Care Of” (Hidden Homelessness)**

There is strong evidence that hidden homelessness is particularly a problem for younger people. Table 7 shows the number of Council applicants living at “care of” addresses. This shows that 55% of people applying from “care of” addresses are aged 16-25.

Table 7 shows the number of people on the Council’s housing waiting list who were living care of another family, when investigated in June 2002. This is based on a total of 3,328 housing applications and reflects a significant population in insecure accommodation.

**TABLE 7: Housing Waiting List/Applicants Living Care Of (c/o) By Age/Gender**

Age Range	Gender	C/o Applicants	
		Number	Percentage
16-21	F	320	10%
16-21	M	207	6%
22-25	F	88	3%
22-25	M	88	3%
26-65	F	231	7%
26-65	M	310	9%
65+	F	17	1%
65+	M	20	1%
<b>TOTALS</b>		<b>1,281</b>	<b>40%</b>

(Source: DCC Housing Management Systems 25.06.02)

**(x) Intentional Homelessness**

Analysis of the Council's homelessness statistics shows that 8 households or less than 1% of homeless applicants were homeless, but owing to their own actions. It is suspected that many other people who are unintentionally homeless do not apply for housing through the homeless services. Many will be among the hidden homeless noted above.

The experience and success of the Dundee Families Project has highlighted the benefits of finding alternatives to eviction.

**(xi) Financial Problems**

One of the main reasons why people are categorised as intentionally homeless is because they have been evicted for rent arrears or have abandoned with rent arrears. Research carried out in 2001 by the Housing Department showed that of 638 tenancies issued by the local authority to 16-24 year olds, 93 were subsequently either abandoned or evicted for rent arrears.

The main issues which need to be addressed with regard to hidden homelessness, intentional homelessness and debt problems are:

- Early referral to debt and money advice.
- Provision of housing support services to help prevent debt and to give pre. tenancy advice.

**(xii) Street Begging**

Reports by those who are concerned about people asking for money in the street because they are hungry and homeless, are backed up by evidence from Tayside Police and the authority's "ambassadors". (The ambassadors are Council staff working in the City Centre during the day to direct the public to facilities, attractions and provide information on Dundee's history).

Tayside Police Street Nuisance Reports were accessed for 2001 and to gain a snapshot view over 2 months in 2002, as follows:

<b>MONTH</b>	<b>ACTIVITY</b>	<b>INCIDENTS</b>
September	Begging	4
October	Begging	2

The city ambassadors' Topics Report, accounted for 80 incidences of the category which includes people asking for money, in the period January to December 2002.

No information confirms the age range of this group, however, there are genuine concerns about those who appear to be under 25, who are at risk of exploitation while on the streets and those who are unable to or choose not to access services.

## RESOURCES FOR HOMELESSNESS – 2001/2002

Based on the template in Guidance Material, a review of the authority's capital and revenue expenditure for the period 2001/2002 was conducted. This helps identify resources that have been provided for prevention and alleviation of homelessness, summarised as follows:

### Dundee City Council

Housing Department

**Internal Expenditure** **£1,703,848**

### External Expenditure

Grants to partner agencies: NCH, Cyrenians, Womens Aid, Dundee Survival Group **£577,643**

### Neighbourhood Resources Development Department

Grant to The Corner, Young People Health and Information Project **£97,531**

### Social Work Department

Grants to partner agencies: The Wishart Centre, Homestart, One Parent Families, Citizens Advice Bureau, Carolina House Trust **£456,612**

**EXTERNAL EXPENDITURE TOTAL** **£1,131,786**

**OVERALL EXPENDITURE ON HOMELESSNESS** **£2,835,634** **2001/2002**

### Health

A breakdown of the investment by NHS Tayside appears in the Health and Homelessness Action Plan 2002-2005. Resource transfer payments are made to partner organisations to contribute to operating costs of projects providing support to homeless and vulnerable people in Dundee. The estimated expenditure is £109,146. Further revenue covers staff costs of £34,354 however elements of this expenditure are time limited.

### Rough Sleepers Initiative – Local Outcome Agreement

Resources from the above initiative covered the revenue costs of 3 projects for 2001/2002, totalling £239,833. The Cyrenians and Resettlement Service, Rent Deposit Guarantee Scheme and NCH Supported Living Project provided services in line with performance targets set out in the Local Outcome Agreement for the period.

### Social Inclusion Partnership

Two local projects received a total of £153,286 in 2001/2002 from Dundee's Social Inclusion Partnership funding to assist and support clients with a range of needs including housing.

## **RESOURCES FOR DUNDEE'S HOMELESSNESS STRATEGY 2003-2006**

Resources available to implement the strategy include:

1. Funding (capital and revenue) in 2003/04.
2. Clients and staff knowledge and experience.
3. Information (research, existing data and users views).
4. Existing premises.

The total allocation from the Scottish Executive for Dundee City Council for Homelessness Strategy implementation 2001-2004 is £918,900. This is being used to fund staff posts, research projects and capital projects.

In tandem with preparing the strategy, work has been carried out to attempt to secure Scottish Executive, Communities Scotland and Supporting People capital and revenue funding as a priority for provision of 82 units of additional temporary supported accommodation.

The full cost and resource implications of the strategy are unknown at present, as a number of projects are being developed and have still to produce detailed proposals. These will be reported to the Homelessness Co-ordinating Group during 2003/2004.

It is expected, however, that the Council will have to find resources from existing budgets to fund a number of the Action Plan projects. This is due to limitations and lack of growth in the Supporting People budget, combined with the legislative requirements to provide additional housing support services to an increasing number of homeless households.

Best use will be made of all available resources, by the Council and partner agencies to fund the priority projects, achieve the objectives of Dundee's Homelessness Strategy 2003-2006, and contribute to the Local Housing Strategy.

## **RESOURCE REQUIREMENTS 2004-2006**

### **ROUGH SLEEPERS INITIATIVE**

To continue to achieve the outcomes of effectively resettling homeless clients in secure accommodation of their choice, and ensuring tenancies are sustained, RSI annual revenue of £239,833 is required. Plans are in place to review Local Outcome Agreement targets for each of the three projects to maximise their contribution to local strategy and national objectives.

### **SUPPORTING PEOPLE**

Resources will be required to cover housing support services for homeless people on a recurring basis for projects in Dundee. The Supporting People contract value for Year 1, 2003/2004 for this service is £3,161,200. Continuation funding is essential for these projects, delivered by our partners – Womens Aid, Cyrenians, Carolina House Trust, Dundee Survival Group, NCH, Positive Steps Partnership, Jericho House, Salvation Army and the Council's own support service.

## **FURNITURE PROJECT**

Details from Tayside Furniture Project confirm that a minimum of £90,000 revenue is required in 2003/2004 to continue their services for homeless people, specifically in Dundee. We are eager to collaborate with this partner organisation in the provision of furnished tenancies, resourced via Communities Scotland, to ensure a sustainable long term service.

## **HEALTH AND HOMELESSNESS ACTION 2003/2004**

Based on bids, prepared to implement priority projects in the Dundee Action Plan, as reflected in the NHS Tayside Health Plan, the resources required are as follows:

2003/2004 Bid 1 (Tayside wide)	£38,200
2004/2008 Bid 2 (service provision)	£342,900

This will address health needs assessment, health promotion, including staff training, and crucial work on hospital discharge protocols to be undertaken. These activities involve close collaboration with neighbouring authorities in Angus and Perth & Kinross.

## **HOMELESSNESS STRATEGY TEAM**

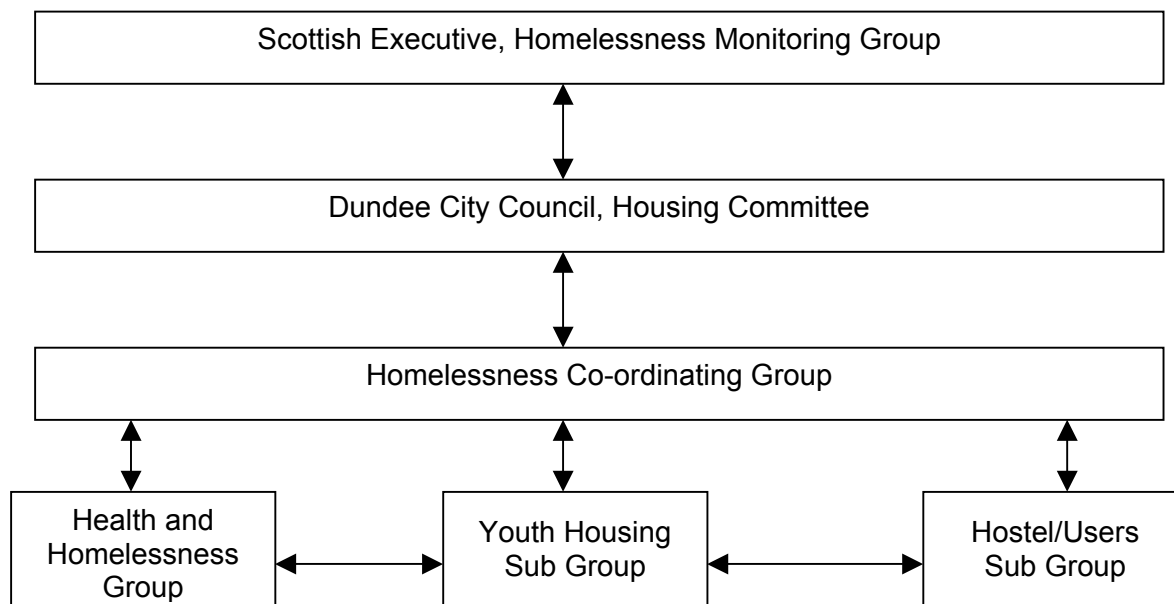
To continue implementation of the strategy action plan resources will be required for revenue costs during 2004/2005 and 2005/2006. This will ensure the development of additional temporary accommodation and consultation with service users is co-ordinated effectively.

These are estimated as follows:

2004/2005	£122,364
2005/2006	<u>£126,035</u>
	<u>£248,399</u>

## HOMELESSNESS STRATEGY IMPLEMENTATION FRAMEWORK 2003-6

The following structure will be adopted to implement Dundee's Homelessness Strategy between 2003 and 2006.



The new Homelessness Co-ordinating Group will replace the Single Homeless Strategy Group, and will convene quarterly meetings, resulting in an annual report to Housing Committee. Following Housing Committee approval, progress reports will be sent to the Homelessness Monitoring Group and Communities Scotland, Regulation and Inspection.

The terms of reference for the Homelessness Co-ordinating Group are as follows:

1. To provide a strategic forum to plan, co-ordinate and deliver accommodation and support services for homeless people in Dundee, in partnership with other agencies.
2. To quantify resource implications, develop a financial framework for homelessness services and seek Dundee City Council Housing Committee approvals on use of resources.
3. To review implementation of the strategy, agree annual progress reports for Housing Committee and Homelessness Monitoring Group.
4. To agree and clarify priorities for action, and ensure cohesive and shared actions to address Dundee's priorities on homelessness.
5. To oversee and support the implementation, monitoring and evaluation of the Strategy Action Plan through the work of the Health, Hostel and Youth Sub Groups. This includes any other short life task groups to develop services to meet assessed needs.
6. To dovetail local plans with overarching City-wide plans and strategies within the context of the community planning process.
7. To contribute to the local health and homelessness strategy in relation to prevention of homelessness and support for vulnerable groups.

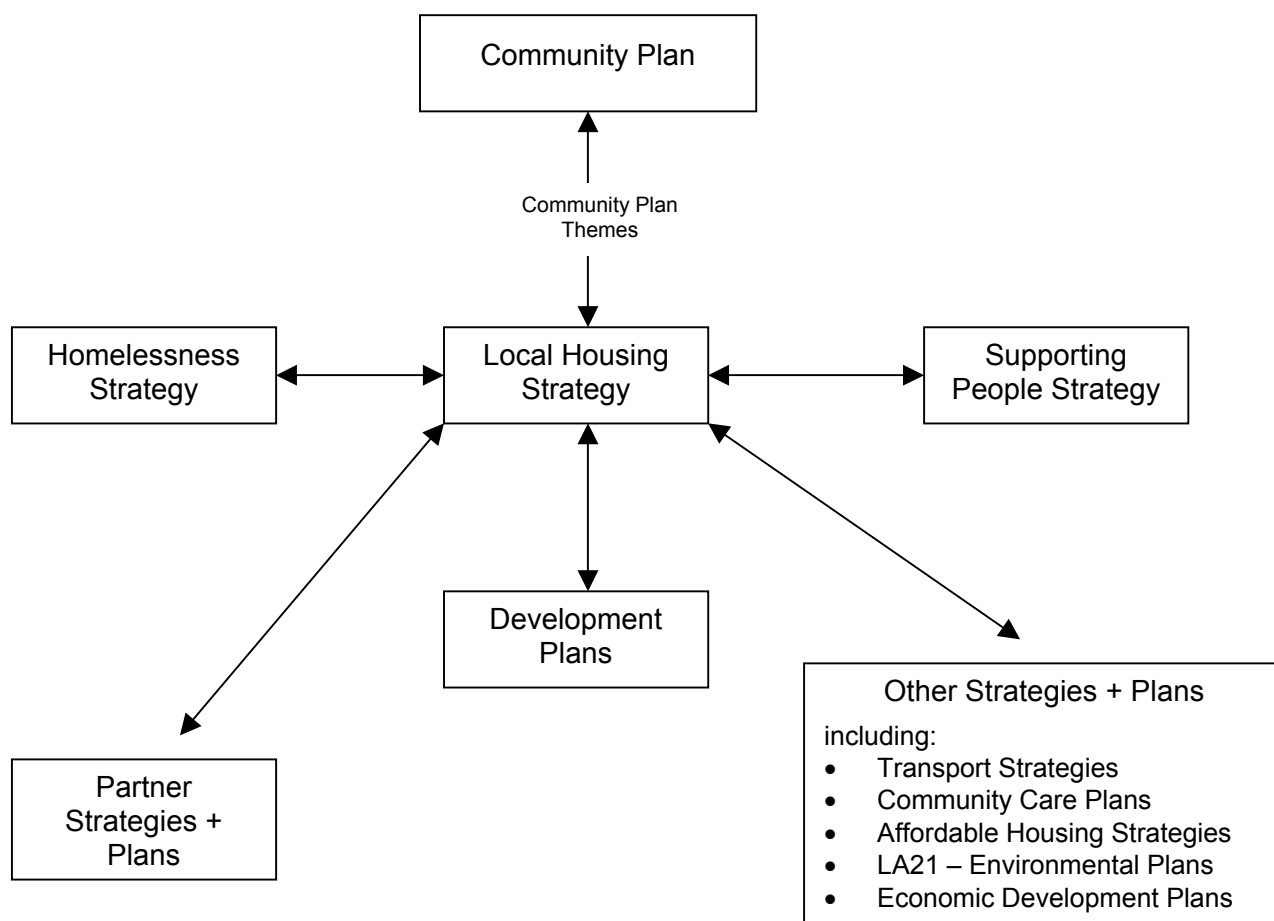
The membership of the Homelessness Co-ordinating Group will include representatives of:

Dundee City Council Housing, Supporting People, Social Work, Welfare Benefits and Corporate Planning Departments, NHS Tayside and Tayside Primary Care NHS Trust, Dundee Local Health Care Co-operative, Communities Scotland, Dundee Survival Group, Dundee Housing Association Forum, Women's Aid, Positive Steps Partnership, Dundee Cyrenians, NCH, Shelter, Job Centre Plus, Dundee Voluntary Action, Wishart Centre, Tayside Police and the Drug and Alcohol Action Team.

It is anticipated that this group will meet four times per year, rotate the chair between Housing, Health and voluntary partners, and receive progress reports from the Health, Hostels and Youth Housing Sub Groups. This will include RSI Local Outcome Agreement and Health and Homelessness Action plan updates. Strategy implementation will be monitored by evaluating the outcomes of the projects defined in the Action Plan 2003-06.

The membership of the Homelessness Co-ordinating Group will also participate in the implementation groups of relevant corporate and stakeholders plans set out in the Action Plan, in particular the Community Plan, which are linked to prevention and alleviation of homelessness. Information can be shared by members providing progress reports or ensuring notes and minutes of strategic planning and implementation group meetings are circulated.

### Making the Links to and from Local Housing Strategy



Extracted from Communities Scotland HMCS Update February 2003



## WHAT THE STRATEGY WILL DO

To set the long term direction for Dundee's homelessness strategy, the vision, aims and objectives, as follows, were agreed. These are in response to the findings of the homelessness needs assessment, and clarification of local vulnerability.

### **Vision: To eliminate homelessness in Dundee by working together**

We acknowledge that this is an optimistic vision, but feel it is essential that local preparations begin immediately for implementation of the legal framework, resulting from the Homelessness Bill.

To achieve the vision of **no homelessness in Dundee**, 6 aims and related objectives have been devised. Formulated from the needs assessment, and guidance, the aims and objectives are set out below, and are the focus of activities and projects in the Action Plan (Appendix ?) progress measured by targets or timescales.

### Strategic Aims

To help us achieve our vision, in producing a homelessness strategy we aim to:

1. Develop responses based on comprehensive, joint or inclusive **assessments** of need.
2. Maximise **resources** for homelessness projects in Dundee.
3. Develop affordable, sustainable **accommodation**. *(This aim incorporates the Executive's RSI target to remove the need for anyone to sleep rough by 2003).*
4. Co-ordinate, increase and improve access to **services** for people who are homeless.
5. **Prevent** homelessness through collaboration.
6. Involve service users in **consultation** and service reviews.

### Objectives

The following objectives underpin the Strategy Action Plan, and define the practical steps we will take to achieve our aims, in 6 key areas.

- To identify and recognise need.
- To focus on the most vulnerable and prioritise.
- To work together to quantify requirements and maximise resources towards homelessness activities.
- To ensure homelessness is a priority in stakeholders strategies.
- To implement the RSI Local Outcome Agreement(s).
- To work together on prevention of homelessness.
- To work together on consultation and user involvement in strategy reviews.
- To work together to make best use of existing resources, accommodation and facilities.
- To work together to develop sustainable accommodation and support projects.

## HOW WE WILL ELIMINATE HOMELESSNESS IN DUNDEE

The Strategy Action Plan has been generated from the conclusions of the homelessness needs assessment exercise, to define the work required to address the gaps in local provision.

This section describes the contents of the Action Plan, which lists 32 projects, and clarifies why they are necessary. The approach adopted is to undertake projects which are specific, measurable, achievable, realistic and targeted. This will help to assess local performance in strategy implementation by producing outcomes and outputs which include improved accommodation and support services for vulnerable people.

These activities have been grouped in key areas to reflect the strategic aims, as follows:

Key Area: 1.0 Assessments – Projects	1.1 to 1.4
Key Area: 2.0 Resources – Projects	2.1 to 2.5
Key Area: 3.0 Accommodation – Projects	3.1 to 3.7
Key Area: 4.0 Services – Projects	4.1 to 4.7
Key Area: 5.0 Prevention – Projects	5.1 to 5.5
Key Area: 6.0 Consultation - Projects	6.1 to 6.4

Within these key areas, the projects have been listed in order of priority.

### THE ACTION PLAN EXPLAINED:

#### WHAT WE WILL DO TO ASSESS HOMELESSNESS

To identify and recognise need, focus on the most vulnerable, prioritise and quantify requirements, we will:

- 1.1. Use available information to assist with client referrals for health needs assessments to contribute to local implementation of the Health and Homelessness Action Plan and linked projects 1.3, 2.1, 4.1, 5.5 and 6.3 to assist clients with substance misuse and mental health needs in particular.
- 1.2. Collect details of young homeless clients' support needs, from the introduction of joint assessments at the Lily Walker Centre. These will engage support service delivery for clients from Social Work Department, health and relevant agencies, ensure targeted services and contribute to projects 1.1, 2.1, 3.2, 5.4 and 6.3.
- 1.3. Ensure current information on the support needs of homeless people is collected for service planning, and that clients benefit from improved services as a result of the implementation of Single Shared Assessment. This links with projects 1.3, 2.5, 3.2, 3.5, 4.1, 5.4 and 6.3.
- 1.4. Use the information compiled in the RSI Resettlement Database to identify hostel clients ready to move on to their own accommodation, and link hostel leavers with appropriate tenancy support services.

This will produce evidence of move on rates, contribute to prevention of repeat homelessness, and complement projects 3.7, 4.6 and 5.4.

Formalising assessments will assist homeless people to access appropriate services, ensure accurate data for service planning and keep the strategy focussed on meeting needs.

## **WHAT WE WILL DO ABOUT RESOURCES**

To maximise resources, make best use of existing resources and develop sustainable projects, we will:

- 2.1. Work with health service, social work and agency colleagues to investigate relevant funding sources to contribute to implementation of Health and Homelessness Plan – new services or one stop shop. This will extend services to meet health and support needs of vulnerable and homeless household and contribute to achievement of projects assessment, prevention and consultation services.
- 2.2. Contribute to easing congestion in local hostels, and prevention of repeat homelessness, by developing proposals with the local Furniture Project (including Starter Packs Dundee) to secure sustainable revenue funding, and deliver 50 furniture packs each year to homeless households moving to own accommodation. This links with 1.4, 3.1, 3.6, 3.7, 4.1 and 4.3 in the Action Plan to assist all vulnerable groups.
- 2.3. Aim to speed up the process for clients moving on from homeless hostels to individual tenancies by campaigning for payment of Housing Benefit on 2 homes. If successful, this will ease congestion in local hostels and reduce the incidence of homeless clients commencing tenancies with arrears. This activity links with accommodation and prevention projects.
- 2.4. Assist agencies to establish sustainable support projects, by sharing information from assessments, to ensure vulnerable households receive necessary support to meet needs. This will contribute to projects 1.4, 1.5, 3.1, 3.6, 3.7, 4.1 and 4.3.
- 2.5. Improve Housing Benefit payment arrangements for all tenants through liaison meetings, to prevent homelessness due to rent arrears. This will contribute to projects 5.5, 5.6, 6.4, 6.5, 6.6 and 6.7.

This will lead to agreement on funding sources, to overcome previous difficulties experienced by clients and service providers receiving short term funding, resulting in continuity of services delivered by experienced staff.

## **WHAT WE WILL DO TO DEVELOP ACCOMMODATION**

To make best use of existing accommodation and work together to develop sustainable accommodation, we will:

- 3.1. Meet the accommodation and support needs of local homeless people by developing viable facilities offering 82 units of temporary furnished accommodation in partnership with specialist agencies. This will enhance implementation of protocols with local RSLs to accommodate homeless households. This contributes to projects 1.4, and 3.7, and will gain added value from project 2.5. Priority will be given to models which equip clients to sustain secure tenancies.
- 3.2. Ease hostel congestion by rehousing 20 long stay hostel clients, to more appropriate, supported accommodation, to be developed in partnership with statutory providers and local agencies. This activity links to 5.4 and targets those with organic brain disorder.

- 3.3. Collaborate with Social Work Department and specialist agencies to develop 5 supported lodgings places for young people coming from residential care. This will ease congestion in existing accommodation and prevent homelessness, in line with projects 1.2, 3.6, 4.4, 5.3 and 5.4.
- 3.4. Increase access to Council housing and provision of support services, to enable vulnerable people to get and keep Scottish Secure Tenancies, by reviewing Housing Department policies and procedures, and making recommendations where improvements can be made. This will include joint work with Health and Social Work, to examine the Special Needs Housing Committee, and contributes to projects 4.2 and 5.4.
- 3.5. Work with Salvation Army and supported accommodation providers to rehouse Strathmore Lodge clients, while hostel refurbishment work being carried out. This will improve standards of accommodation, privacy and security and provide drug/alcohol detox and rehabilitation facilities. This project links with 1.1, 1.4, 2.3, 3.6, 3.7, 4.1 and 5.4.
- 3.6. To extend choice, landlords willing to accommodate hostel clients will be publicised in a register, alongside details of the Rent Deposit Guarantee Scheme and Tenancy Support Services. This will complement projects 2.3 and 5.1.
- 3.7. By implementation of the RSI Local Outcome Agreement 2003/04 this action plan project will remove the need for anyone to sleep rough, by achieving specific targets, agreed with partner agencies.

Dundee's priority projects appear in the accommodation section of our Action Plan. The increase in accommodation provision will alleviate homelessness in the city.

## **WHAT WE WILL DO ABOUT SERVICES**

To ensure homelessness is a priority in stakeholders strategies, make best use of existing resources, facilities and develop sustainable support projects, we will:

- 4.1. Work with health and support agencies to implement the local Health and Homelessness Action Plan, leading to improved access to health services and better health outcomes for homeless people. Ongoing development work will focus on the introduction of improved outreach services or a one stop shop assisting clients in all vulnerable groups. To improve co-ordination, this project will link with the following projects 1.1, 1.3, 3.2, 4.3, 5.4, 5.5, and 6.4.
- 4.2. To assist existing Council tenants experiencing difficulties, a housing support service will be introduced. This will compliment other social work, health or resettlement services, prevent homelessness and link with projects 4.5, 5.4, 6.2 and 6.3.
- 4.3. Working with Council departments and other agencies, a framework of services will be established and publicised to remove the need for street begging. This will contribute to projects 4.1, 4.6 and 6.1 and focus on young vulnerable people in particular.
- 4.4. In preparation for April 2004, agencies will collaborate to agree funding arrangements to assist all those who have been looked after up to age 16. This work will overlap with project 5.4.

- 4.5. To respond to clients' support needs, collaboration with relevant agencies will take place to ensure support is available for those experiencing harassment. This will compliment projects 4.1, 4.2, 4.3, 4.4, 5.6 and 6.4.
- 4.6. To stabilise lifestyles, combat isolation and improve homeless clients' financial prospects, a training project will be established to create employment opportunities for 200 people per year. This links with projects 3.1, 5.3 and 6.4.
- 4.7. In line with new duties, a new service will be developed to record evictions by private landlords, provide information on rights and available options for households to be evicted and link with projects 4.2, 5.1 and 6.4.
- 4.8. In line with new duties, arrangements to meet the educational needs of children of homeless households will be reviewed with Council departments and relevant agencies to ensure the most effective framework is in place. This compliments projects 4.9, 5.3 and 5.5.
- 4.9. Arrangements with Council departments, health and leisure agencies will be reviewed to ensure the most effective framework is in place to meet the development needs of dependant children of homeless households. This compliments projects 4.8, 5.3 and 5.5.

Implementation of the projects in the key area of services will address the support and information needs of local homeless and vulnerable people, who require more than accommodation to stabilise their lifestyles.

## **WHAT WE WILL DO TO PREVENT HOMELESSNESS**

To ensure homelessness is a priority in stakeholders strategies, work together on prevention of homelessness, we will:

- 5.1. Bring forward a comprehensive plan for Homeless Services Unit to be accredited at Level 1 of the Homepoint national standards for advice and information including production of a directory of services, this will contribute to achievement of projects 5.5 and 6.3, and assist all vulnerable groups. In addition, evaluation procedures will be agreed to maintain quality information service.
- 5.2. Build on previous experience of presenting housing awareness sessions in local secondary schools, to keep material appropriate and deliver 4 sessions per year on tenants rights and responsibilities. This links with projects 4.3, 4.6 and 5.1, to address the needs of young vulnerable people.
- 5.3. Raise awareness of homelessness and the strategic response with staff from Council departments and local hostels when training sessions are held. The purpose of the training will be to prevent homelessness through awareness of arrears procedures, when revised, and collaboration to maximise clients' incomes. Joint training contributes to projects 3.1, 4.1, and 4.6, to assist all vulnerable groups, by improving communication and information sharing.
- 5.4. Improve the continuity of support and health service delivery for vulnerable clients leaving institutions, (armed forces, care, prison/hospital/hostels) by developing and implementing discharge protocols, which focus on rehousing clients to appropriate supported accommodation. This complements projects 1.1, 1.3, 2.3, 3.2, 4.1, 5.5 and 6.3.

- 5.5. Extend good practice and communications by developing and implementing a staff training plan on the homelessness strategy for Council, health, hostels and agency staff. This will improve outcomes for all vulnerable groups and contribute to projects 1.1, 3.4, 4.1, 4.7.

The focus on these projects is to provide information for vulnerable people, before they become homeless, to have informed staff and co-ordinated services for those who experience homelessness. These activities, linked with services, will also shorten the length of time a person is homeless for and reduce the likelihood of repeat homelessness occurring.

## **WHAT WE WILL DO ABOUT CONSULTATION**

To work together on consultation and user involvement in strategy reviews, we will:

- 6.1. Use information, of service users views, gathered by Housing and other Council departments and partner agencies to inform the strategy consultation process. This will ensure effective interagency communication, assist all vulnerable groups and contribute to achievements of projects 1.1, 2.4, 3.1, 4.1, 5.5 and 6.3.
- 6.2. Establish relationships with Council tenants, to record views on support services provided by housing support or mediation services, to ensure these are meeting needs. Assisting vulnerable clients of all ages, including intentionally homeless, this will identify service improvements, and add value to projects 2.4, 4.2, 5.3 and 6.3.
- 6.3. The homelessness strategy will be the topic of annual consultation events, to record the views of service users and ensure that strategy monitoring and planning is positively influenced by clients who have experienced homelessness.

This links with projects in all key areas and will assist all vulnerable groups and ensure corporate commitment.

- 6.4. Ensure the strategy is informed on local needs by agreeing:
- i. brief for research into hidden homelessness in Dundee. When commissioned, this research will investigate the extent and nature of those in insecure living arrangements, access the views of clients in these situations, and contribute to projects 2.3, 2.5 and 6.3.
  - ii. to assess local characteristics of homelessness and how these compare to the rest of Scotland, a research brief will be prepared for a comparative study, to include service users views, and shape future service delivery. This links to projects 2.3 and 6.3.
  - iii. research into homelessness in the minority ethnic population in Dundee, again to identify service improvements and contribute to strategy review, project 6.3.

Through involving service users, the strategy will give local homeless people a voice demonstrating that homelessness services are responsive and most significantly, prepared to change. Through monitoring and review, the Homelessness Strategy Co-ordinating Group will have responsibility to equip local services with the resources required to grow and respond to the expressed needs of vulnerable clients.

**DUNDEE'S HOMELESSNESS STRATEGY 2003-2006  
ACTION PLAN**

**Key Area: 1.0 ASSESSMENTS**

**Objectives: To identify and recognise need, focus on vulnerable and prioritise, quantify requirements and maximise resources.**

Actions (to achieve objectives) including target provision		Resources	Lead	When	Links to Plans
1.1	Co-ordinate 100 referrals to contribute to homeless clients' health needs assessment exercise.	NHS Tayside RSI/Homelessness	NHS Tayside Health & Homelessness Steering Group	June '03	<ul style="list-style-type: none"> <li>• Health &amp; Homelessness Action Plan</li> <li>• NHS Tayside Health Plan</li> </ul>
1.2	Introduce joint assessments for all under 25's at Lily Walker Centre.	DCC (Homelessness & SWD)	Homeless Services Throughcare and Aftercare Team	2003-04	<ul style="list-style-type: none"> <li>• Youth Housing Plan</li> <li>• Health &amp; Homelessness Action Plan</li> <li>• Throughcare and Aftercare Strategy</li> </ul>
1.3	Improve service delivery by extending implementation of Single Shared Assessments to all homeless clients at Lily Walker Centre and hostels.	SWD / Health	Homelessness Coordinating Group	Oct. '03-April '04	<ul style="list-style-type: none"> <li>• Community Plan</li> <li>• Community Care Plan</li> <li>• Health &amp; Homelessness Action Plan</li> </ul>
1.4	Use RSI Resettlement Database to prioritise Outreach and Resettlement support service provision for 90 hostel clients moving to own tenancies.	RSI Supporting People	Cyrenians	2003-04 quarterly	<ul style="list-style-type: none"> <li>• RSI Local Outcome Agreement</li> <li>• Supporting People Strategy</li> </ul>

**DUNDEE'S HOMELESSNESS STRATEGY 2003-2006  
ACTION PLAN**

**Key Area: 2.0 RESOURCES**

**Objectives: Maximise resources, make best use of existing resources, develop sustainable projects**

Actions (to achieve objectives) including target provision		Resources	Lead	When	Links to Plans
2.1	Explore available funding/resources to contribute to implementation of outreach support services (one-stop shop) initiated by Health & Homelessness Action Plan.	NHS Tayside Homelessness Social Work	Dundee LHCC	2003-06	<ul style="list-style-type: none"> <li>• Community Plan</li> <li>• Health &amp; Homelessness Action Plan</li> <li>• NHS Tayside Health Plan</li> </ul>
2.2	Agree funding for provision of furniture, starter packs and white goods for 150 homeless households per year on resettlement programmes moving to own tenancies with registered social and private sector landlords.	Communities Scotland, RSI, Homelessness Funding	Housing/Communities Scotland	2003-04	<ul style="list-style-type: none"> <li>• RSI Local Outcome Agreement</li> <li>• Social Inclusion Partnership/Plan</li> <li>• Temporary Accommodation Plan</li> </ul>
2.3	Explore use of Housing Benefit to investigate payments (on 2 homes) for 90 homeless households moving from hostels to own tenancies.	Homelessness Funding	Cyrenians	Nov. '03	<ul style="list-style-type: none"> <li>• Housing Benefits/Welfare Benefits Plans</li> <li>• Local Literacy Plan</li> </ul>
2.4	Liaise on implementation of Supporting People Strategy to deliver viable support services to 200 homeless households each year. (Hostels and Resettlement target).	RSI Homelessness Funding Supporting people	Housing	2003-06	<ul style="list-style-type: none"> <li>• RSI Local Outcome Agreement</li> <li>• Supporting People Strategy</li> </ul>
2.5	Collaborate with Finance staff to achieve Housing Benefit administration targets for improvements.	Homelessness Funding	Finance	2003-06	<ul style="list-style-type: none"> <li>• Housing Benefits/Welfare Benefits plans</li> </ul>



DUNDEE'S HOMELESSNESS STRATEGY 2003-2006  
ACTION PLAN

**Key Area: 3.0 ACCOMMODATION**

**Objectives: Make best use of existing accommodation, work together to develop sustainable accommodation (and support) projects**

Actions (to achieve objectives) including target provision		Resources	Lead	When	Links to Plans
3.1	<p>Implement additional temporary accommodation plan to create 82 units for vulnerable households (Priority furnished accommodation).</p> <p><b>Temporary Accommodation Plan 2003-5</b></p> <p>HSG, NCH, PSP, SWD (2003/2004) 24 units GHA, NCH, WA (17 new build) (2004/2005) <u>58 units</u></p> <p style="text-align: right;">82 units</p> <p>Implement protocols with local RSLs to accommodate homeless households.</p>	Homelessness Funding Communities Scotland Domestic Abuse Service Department Fund	Homelessness Strategy Team	2003-05  2003/04 2004/05  2003-05	<ul style="list-style-type: none"> <li>• Local Housing Strategy</li> <li>• Strategic Agreement</li> <li>• Domestic Abuse Strategy</li> <li>• Supporting People Strategy</li> </ul>
3.2	Develop accommodation solutions for 20 long stay hostel clients/challenging behaviour / those leaving institutions / Schedule One offenders.	Communities Scotland Supporting People NHS Tayside	Housing / SWD	2003-06	<ul style="list-style-type: none"> <li>• Local Housing Strategy</li> <li>• Health &amp; Homelessness Plan</li> <li>• NHS Tayside Health Plan</li> <li>• Criminal Justice Strategy</li> </ul>
3.3	Develop 5 Supported Lodgings places to contribute to temporary accommodation plan project.	Social Work	Housing / SWD	2003-04	<ul style="list-style-type: none"> <li>• Youth Housing Plan</li> <li>• Children's Services Strategic Plan</li> <li>• Throughcare and Aftercare Strategy</li> </ul>
3.4	<p>Examine DCC housing management procedures to minimise/prevent homelessness:</p> <p>Special Needs Housing Committee 2003 Allocations 2003 Use of SSST's 2005 Access 2005 Suspensions 2005 Arrears 2005 Anti-Social Behaviour 2005 Evictions 2005</p>	Homelessness Funding	Homelessness Strategy Team	2003-06	<ul style="list-style-type: none"> <li>• Community Care Plan</li> <li>• Supporting People</li> <li>• Anti-Social Behaviour Service Plan</li> <li>• Local Housing Strategy</li> <li>• Anti Poverty Strategy</li> </ul>

DUNDEE'S HOMELESSNESS STRATEGY 2003-2006  
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**Key Area: 3.0 ACCOMMODATION (Continued)**

**Objectives: Make best use of existing accommodation, work together to develop sustainable accommodation (and support) projects**

	Actions (to achieve objectives) including target provision	Resources	Lead	When	Links to Plans
3.5	Collaborate with Salvation Army / partners to accommodate clients during phased refurbishment of existing premises and extension of services: 6 detox beds/7 rehab. beds, 43 beds on completion.	Salvation Army	Salvation Army	2003-04	<ul style="list-style-type: none"> <li>• Health &amp; Homelessness Action Plan</li> <li>• Dundee Drug Action Plan</li> </ul>
3.6	Develop register of landlords willing to accommodate those on benefits, to encourage hostel clients to move on.	RSI	Cyrenians	2004-05	<ul style="list-style-type: none"> <li>• Local Outcome Agreement</li> </ul>
3.7	<p>To meet targets of Dundee Local Outcome Agreement:</p> <p>Assist 72 rough sleepers to access hostel accommodation/OAR. Create 96 hostel vacancies/OAR. Resettle 72 clients to own tenancies/OAR. Operate Resettlement Database for hostel clients/OAR. Identify 24 clients for private landlords/rent deposits/RDGS. Establish 24 tenancies with private landlords/RDGS. Provide housing support for 36 young tenants/NCH. Access support for 36 young tenants from relevant services/NCH. Establish 6 dispersed tenancies/NCH. Deliver lifeskills training for 16 young tenants/NCH.</p>	RSI Supporting People	Housing/Cyrenians NCH	2003-04	<ul style="list-style-type: none"> <li>• RSI Outcome Agreement</li> <li>• Health &amp; Homelessness Action Plan</li> </ul>

DUNDEE'S HOMELESSNESS STRATEGY 2003-2006  
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**Key Area: 4.0 SERVICES**

**Objectives:** *To ensure homelessness is a priority in stakeholders strategies, make best use of existing resources, accommodation, facilities and develop sustainable support projects*

Actions (to achieve objectives) including target provision		Resources	Lead	When	Links to Plans
4.1	Investigate feasibility of 'one stop shop'/provision of services to include medical, nursing, drugs, alcohol, mental health, advocacy and therapies.	NHS Tayside Homelessness Funding Social Work	Dundee Health & Homelessness Group	2003-06	<ul style="list-style-type: none"> <li>• Health &amp; Homelessness Action Plan</li> <li>• Children's Services Strategic Plan</li> </ul>
4.2	Introduce Housing Support Service to assist 25 Council households sustain tenancies. Examine local good practice.	Supporting People	Housing	2003-04	<ul style="list-style-type: none"> <li>• Supporting People Strategy</li> </ul>
4.3	Investigate inter-agency response to remove the need for street begging.	Homelessness Funding RSI	Homelessness Coordinating Group	2004-05	<ul style="list-style-type: none"> <li>• Anti-Poverty Strategy</li> <li>• Health &amp; Homelessness Action Plan</li> </ul>
4.4	Contribute to implementation group preparing for removal of benefits paid to those who have been looked after up to age 16.	Homelessness Funding	Social Work Department	2003-05	<ul style="list-style-type: none"> <li>• Children's Services Strategic Plan</li> <li>• Throughcare and Aftercare Strategy</li> </ul>
4.5	Liaise with agencies to arrange support for <u>any</u> victims of harassment (hostels/private/social rented sector) due to race, sexuality, health issues, belief etc.	Homelessness Funding NRDD	Homelessness Coordinating Group	2004-05	<ul style="list-style-type: none"> <li>• Corporate Policies (Race, Gender, LGBT Disabilities, Equality Schemes)</li> </ul>
4.6	Input to strategy/policy/project developments to increase education, training and employment opportunities for 200 people who are homeless	Homelessness Funding	Homelessness Coordinating Group	2004-06	<ul style="list-style-type: none"> <li>• Anti-Poverty Strategy</li> <li>• Literacy Plan</li> <li>• Community Plan</li> <li>• Temporary Accommodation Plan</li> </ul>

DUNDEE'S HOMELESSNESS STRATEGY 2003-2006  
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**Key Area: 4.0 SERVICES (Continued)**

**Objectives:** *To ensure homelessness is a priority in stakeholders strategies, make best use of existing resources, accommodation, facilities and develop sustainable support projects*

Actions (to achieve objectives) including target provision		Resources	Lead	When	Links to Plans
4.7	Develop register/response to households and private landlords reporting eviction action (required by Homelessness etc. (Scotland) Act 2003). Ensure relevant information available.	Homelessness Funding	Housing	2004-05	<ul style="list-style-type: none"> <li>• Local Housing Strategy</li> </ul>
4.8	Review arrangements with schools to have 'regard to best interests of dependent children' of homeless / vulnerable households. Section 4 of Housing (Scotland) Act 2001	Homelessness Funding	Homelessness Co-ordinating Group	2005-06	<ul style="list-style-type: none"> <li>• Children's Services Strategic Plan</li> <li>• Child Health Strategy</li> </ul>
4.9	Review arrangements with Health Service and leisure providers to have 'regard to best interests of dependent children' of homeless / vulnerable households	Homelessness Funding	Homelessness Co-ordinating Group	2005-06	<ul style="list-style-type: none"> <li>• Community Plan</li> <li>• Children's Services Strategic Plan</li> <li>• Child Health Strategy</li> <li>• Health &amp; Homelessness Action Plan</li> </ul>

DUNDEE'S HOMELESSNESS STRATEGY 2003-2006  
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**Key Area: 5.0 PREVENTION**

**Objectives: Ensure homelessness is a priority in stakeholders strategies, work together on prevention of homelessness**

Actions (to achieve objectives) including target provision		Resources	Lead	When	Links to Plans
5.1	Develop and implement Information & Advice Plan, and progress to Type 1 accreditation of Homeless Services Unit, including production of Directory of Services.	Homelessness Funding	Housing	2003-04	<ul style="list-style-type: none"> <li>• Adult Literacy Plan</li> <li>• Equality Schemes</li> <li>• Health &amp; Homelessness Action Plan</li> <li>• Youth Housing Plan</li> </ul>
5.2	Collaborate with Tenant Participation and agencies on updating and presentation of 4 housing education sessions in schools, to raise awareness of rights and responsibilities as tenants	Homelessness Funding Social Work Adult Literacy Education	Youth Housing Group	2003-04	<ul style="list-style-type: none"> <li>• Children's Services Strategic Plan</li> <li>• Community Plan</li> <li>• Adult Literacy Plan</li> </ul>
5.3	Conduct 3 joint training sessions for Welfare, Benefits, Housing Department and hostel staff to promote income maximisation to assist vulnerable households.	Homelessness Funding	Housing	2003-04	<ul style="list-style-type: none"> <li>• Anti-Poverty Strategy</li> <li>• Adult Literacy Plan</li> </ul>
5.4	Implement discharge protocols to ensure people leaving armed services and institutional care do not become homeless	Homelessness Funding Supporting People	Homelessness Coordinating Group	2003-04	<ul style="list-style-type: none"> <li>• Criminal Justice Strategy</li> <li>• Health and Homelessness Action Plan</li> </ul>
5.5	Devise and deliver necessary joint staff training plan on homelessness strategy to raise awareness, improve service delivery, share good practice	Homelessness Funding Social Work Dept NHS Tayside	Homelessness Coordinating Group	2003-06	<ul style="list-style-type: none"> <li>• Health &amp; Homelessness Action Plan</li> <li>• Wider Action Plan</li> <li>• Equality Scheme</li> </ul>

**DUNDEE'S HOMELESSNESS STRATEGY 2003-2006  
ACTION PLAN**

**Key Area: 6.0 CONSULTATION**

**Objectives:** *To work together on consultation and user involvement in strategy reviews*

Actions (to achieve objectives) including target provision		Resources	Lead	When	Links to Plans
6.1	Collaborate with agencies conducting consultation with vulnerable people (Health NCH, Corner, Tenant Participation) to access information on accommodation/support needs.	Homelessness Funding NHS Tayside Adult Literacy Fund	Homelessness Strategy Team	2003	<ul style="list-style-type: none"> <li>• Adult Literacy Plan</li> <li>• Equality Schemes</li> <li>• Health &amp; Homelessness Action Plan</li> </ul>
6.2	Agree approach to consultation with DCC tenants (Supported Tenancies / Mediation) to identify service improvements.	Homelessness Funding NHS Tayside	Homelessness Strategy Team	2004	<ul style="list-style-type: none"> <li>• Adult Literacy Plan</li> <li>• Equality Schemes</li> <li>• Health &amp; Homelessness Action Plan</li> </ul>
6.3	Annual strategy review, (reported to Housing Committee and Health & Homelessness Steering Group) to include user feedback from Consultation.	Homelessness Funding NHS Tayside	Homelessness Strategy Team	Nov. '03	<ul style="list-style-type: none"> <li>• Community Plan</li> <li>• Health &amp; Homelessness Action Plan</li> </ul>
6.4	Commission research, to inform strategy review and influence service development: (i) Hidden Homelessness (2003) (ii) Examine comparison to other cities (2004) (iii) Black and minority ethnic population (2005)	Homelessness Funding Communities Scotland	Homelessness Strategy Team	July '03 2003-06	<ul style="list-style-type: none"> <li>• Local Housing Strategy</li> <li>• Community Plan</li> <li>• Health &amp; Homelessness Action Plan</li> </ul>

## HOMELESSNESS TASK FORCE REPORT DEFINITION OF HOMELESSNESS

We identified a range of housing situations that defined the meaning of homelessness for the purposes of our work. This definition embraces the following categories, which are not mutually exclusive, but all have been specified in the interests of clarity.

1. Persons defined in current legislation as homeless persons and persons threatened with homelessness, i.e., those:
  - without any accommodation in which they can live with their families.
  - who can't gain access to their accommodation or would risk domestic violence by living there.
  - whose accommodation is "unreasonable", or is overcrowded and a danger to health.
  - whose accommodation is a caravan or boat and they have nowhere to park it.

2. Those persons experiencing one or more of the following situations, even if these situations are not covered by the legislation:

- *Roofless*  
Those persons without shelter of any kind. This includes people who are sleeping rough, victims of fire and flood and newly arrived immigrants.
- *Houseless*  
Those persons living in emergency and temporary accommodation provided for homeless people. Examples of such accommodation are night shelters, hostels and refuges.
- Households residing in accommodation such as Bed & Breakfast premises, which is unsuitable as long-stay accommodation because they have nowhere else to stay.
- Those persons staying in institutions only because they have nowhere else to stay.
- *Insecure Accommodation*  
Those persons in accommodation that is insecure in reality rather than simply, or necessarily, held on an impermanent tenure.

This group includes:

- tenants or owner occupiers likely to be evicted (whether lawfully or unlawfully).
- persons with no legal rights or permission to remain in accommodation, such as squatters or young people asked to leave the family home.
- persons with only a short-term permission to stay, such as those moving around friends and relatives' houses with no stable base.
- *Involuntary Sharing of Housing in Unreasonable Circumstances*  
Those persons who are involuntarily sharing accommodation with another household on a long-term basis in housing circumstances deemed to be unreasonable.

