


prevention

support

housing

A key to the door, Review 2007

Homeless Agency Partnership Action Plan on Homelessness in Dublin 2007-2010



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Vision

By 2010, long-term homelessness and the need for people to sleep rough will be eliminated in Dublin.

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The risk of a person or family becoming homeless will be minimal due to effective preventative policies and services.

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Where it does occur, homelessness will be short-term and all people who are homeless will be assisted into appropriate housing and the realisation of their full potential and rights.

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- Strategic Aim 1 – Prevent people from becoming homeless
- Strategic Aim 2- Provide effective services in each local area to address the accommodation, housing, health and other relevant needs of people who are homeless in that area
- Strategic Aim 3 – Provide sufficient long-term housing, with appropriate supports as required, for people who are homeless, especially single person households.

About the Homeless Agency

The Homeless Agency Partnership was established as part of the government strategy on homelessness in 2001. The partnership is comprised of voluntary and statutory agencies, working together to implement agreed plans for the delivery of services to people who are experiencing homelessness, assisting them to move to appropriate long-term housing and independence. The Homeless Agency is responsible for the planning, coordination and administration of funding in relation to the provision of quality services to people who are homeless in the Dublin area, and for the development of responses to prevent homelessness.

Our Mission

We have a three-part mission:

- We address the current gaps and deficiencies in services and accommodation, including long-term housing, for people who are homeless in Dublin
- We ensure that mainstream policies and services focus on preventing people from becoming homeless
- We ensure that people who are experiencing homelessness can get the services they need, and we work to ensure that they spend as little time as possible homeless, and are helped access sustainable long-term housing and independence

Our Values and Principles

We work according to the values and principles below:

- Homelessness is solvable and preventable
- Homelessness has as much to do with social exclusion as with housing
- Every household is entitled to a place they can call home that is secure and appropriate to their needs and potential
- People who become homeless are entitled to services of the highest quality
- Each person is unique and must be valued as such
- People who become homeless have the right to be treated with dignity and respect and to have their beliefs and choices respected
- We value the skills, experience and expertise of people providing services to people who are experiencing homelessness
- Each person's input is important to how services are planned and developed
- People who are homeless should be involved in decisions that affect them

Foreword



The year 2007 saw a period of social and economic change in Ireland, with the slowdown of the housing and construction industry. It also was a period of political change with the election of a new government in June 2007. These changes came into place as the Homeless Agency Partnership were beginning to implement the first year of their four year action plan *A Key to the Door 2007-2010*. Notwithstanding these changes, the partnership worked towards the realisation of meeting their Vision of eliminating long-term homelessness and the need for people to sleep rough by 2010.

The work of the partnership over the past year and over the next three years has been agreed under the three strategic aims of prevention, support and housing. During the consultation process for the action plan ten 'core actions' were identified which will ensure the effective implementation of each of these aims. The work of the Homeless Agency Partnership is piloted by the direction of these core actions.

This document outlines the work that has taken place during 2007 and progress of each core action, highlights from the work plan of the Homeless Agency executive and also an outline of the critical priorities for 2008. Significant successes that impacted on the delivery of homeless services for the future were achieved in 2007, including the development of the Care and Case Management Strategy, the roll out of the Holistic Needs Assessment and the preparation and foundations for *Counted In, 2008*, the periodic assessment from a weeklong survey of people experiencing homelessness in Dublin.

The Care and Case Management Strategy is focused on improving structures and systems within services to ensure that services can work together to meet the needs of a person who is experiencing homelessness. The Strategy involves the development of a range of case management tools and processes, which will improve the collaborative delivery of services. One of these important tools is the Holistic Needs Assessment, which facilitates the care planning process for a person who is homeless ensuring that they are afforded the optimum opportunity to engage in a process of planning and action, which is person centred and as a process, creates the space within which the individual can determine their own pathway out of homelessness.

Noteworthy progress took place in 2007 in evidencing the need for the delivery of homeless services through the development of the Rough Sleeper Count in the Dublin City Council area in November 2007 and the groundwork for *Counted In, 2008*, the third periodic assessment of homelessness in Dublin and subsequent Rough Sleeper Counts across all four Dublin Local Authorities, which will take place in 2008.

The partnership approach, developed between the voluntary and statutory agencies working with people who are homeless is effective and ongoing and the support provided to date by Government has been crucial in helping work towards the Vision of eliminating long-term homelessness and the need to sleep rough in Dublin by 2010. Given the range of service provision required, from crisis intervention through to long-term support, there is an obligation on both service providers and funding commissioning bodies to ensure current and future service development is in keeping with this Vision.

Arising from this review of progress in 2007, the Board of the Homeless Agency Partnership has determined a set of critical priorities for 2008 including measuring and evidencing need and projected requirements, developing and agreeing a model of service delivery for homeless services in Dublin and reviewing current expenditure on homeless services. The implementation of these priorities will steer the work of the Homeless Agency Partnership for 2008.

Kathleen Holohan

Chair of the Board of the Homeless Agency
Director of Housing, Dún Laoghaire-Rathdown County Council

Highlights from Homeless Agency in 2007

The executive of the Homeless Agency comprises of a Director and staff who are responsible for the implementation of the Action Plan for Dublin 2007-2010. This involves monitoring the implementation of the plan as well as carrying out actions allocated directly to the staff of the Homeless Agency

The work of the Homeless Agency executive compliments the work undertaken by the Board, Consultative Forum and other bodies that form part of the partnership structure. It provides the administrative structure and support necessary for the Homeless Agency Partnership to function.

The Homeless Agency executive reports, through the Board, to the Cross Departmental Team on Homelessness, which in turn reports to the Minister for Housing, Urban Renewal and Developing Areas and to the Cabinet Subcommittee on Social Inclusion, chaired by An Taoiseach. An advisory body, the Consultative Forum, which comprises statutory and voluntary sector members also reports to the Board whose key responsibility includes development and implementation of *A Key to the Door*.

The workplan of the Homeless Agency Executive takes place under the guidance of *A Key to the Door*. The workplan of each team is guided by specific core actions in the action plan. The teams include;

- Management
- Research and Information
- Communications and Information
- Learning and Performance
- Service Integration
- Finance

The following is a review of core activity that took place within the Homeless Agency during 2007, addressing the three strategic aims of *A Key to the Door*. The work of each team is guided by a core action and in some case the activity is guided by two or more core actions.

Management

The Management Team provides direction to all partners in the implementation of *A Key to the Door 2007-2010*.

It provides strategic guidance to the work of the teams of the Homeless Agency executive including Research and Information, Communications and Information, Service Integration, Learning and Performance and Finance.

In addition to steering the work of all teams, the Management team also manages specific projects, an example of this in 2007 was the Pathways Emergency and Transitional Housing and Support Service Evaluations.

Pathways Emergency and Transitional Housing and Support Service Evaluations

In 2006, the Homeless Agency commissioned a programme of independent evaluations in terms of ascertaining the overall quality of service provision. In total, 16 emergency hostel evaluations were conducted by consultants Mr. Simon Brooke and Mr. Roger Courtney and 20 transitional housing and support services were evaluated by economic consultants Fitzpatrick Associates.

Following the conclusion of the evaluation process in early 2007, the Homeless Agency established two implementation groups comprised of stakeholders nominated from both the statutory and voluntary partners. The task of both these implementation groups over the period was to consider the overarching recommendations made by both sets of independent consultants, to explore the implications of their implementation as well as identify on a priority basis the lead actors responsible for driving and achieving implementation.

The result is the first comprehensive, in-depth and detailed evaluation of these two important forms of service provision made against a quality framework agreed between the Homeless Agency and service providers. There now exists a completed evaluation for each homeless service provider included in the process. Each evaluation gives an indication of the quality of service provision currently in place, as well as specifying ways in which quality can be strengthened to ensure improved outcomes for service users.

The suite of evaluations resulted in an agreed set of recommendations in terms of service reconfiguration and the direction of future development of emergency and transitional housing and support services in Dublin.

The Homeless Agency Partnership response to these recommendations was set out in the 2007 publication *Pathways to Home*, which emphasised three steps requiring action in terms of developing quality standards, investment to build and finance 'places of change' alongside the development of support programmes and mainstreaming of service provision

The three steps include;

Step 1 – Quality standards for homeless services

It is proposed to develop a revised comprehensive standards-based approach to the delivery of quality homeless service provision, underpinned by appropriate and agreed financial regimes to support delivery. This will mean developing further the scope and range of quality standards originally set out in *Putting People First* upon its inception in 1999. Therefore, work towards a revised edition of *Putting People First* will be undertaken in order to ensure that minimum, good and best practice standards are developed and in place to underpin the development of homeless services in Dublin.

The second edition of *Putting People First*, containing good practice guidelines will be revised to incorporate both the individual services' and sectoral overarching recommendations arising from both series of evaluations.

The Homeless Agency Partnership will explore an agreed monitoring and reporting framework in order to facilitate organisations to align their service provision with best practice quality standards. Such monitoring mechanisms could include peer review processes.

Step 2 – Investment to build and finance places of change

Dedicated capital investment programmes to build social and affordable housing and tackle social inclusion are in place alongside stated output targets for housing and accommodation provision that can meet the needs of Irish society. Policy aims to ensure individuals and households in need are offered options tailored to their need. A second aim is delivery of a services based approach that is both client-centred and based on a lifecycle approach.

Within this context the Homeless Agency proposes a targeted programme of frontloaded capital investment is undertaken alongside appropriate innovation in the delivery of a revenue finance model to support the development of best practice models of service provision in Dublin. This investment programme must support the building and financing of an array of housing and accommodation types inclusive of emergency, transitional, supported and wider social housing options.

To enable emergency and transitional services to become real places of change, the Homeless Agency will agree a classification of housing and accommodation types and care models to be developed across homeless services. This includes two major tasks. Firstly, charting the care pathways and accommodation and housing options for service users from emergency accommodation into transitional, supported or sustained independent living. Secondly, to conduct a capacity audit of current homeless service provision taking into consideration the findings and recommendations made in the evaluations for individual services to include a detailed analysis of current spend.

This dedicated programme of investment to develop and deliver places of change for service users will also support the advancement of the Homeless Agency's core action on localising housing, accommodation and support services that respond to the needs of individuals and families within their locale and community.

Lastly, this investment programme will require model development guidelines for both new build and renovation to ensure the resulting housing and accommodation types are fit for purpose.

Step 3 – Support programmes and mainstreaming service provision

As part of an individual's progression route out of homelessness, it is essential for best practice accommodation and care models to deliver holistic support packages accessible to individuals from their point of entry in particular into emergency services through transitional services and then onto supported and sustained independent living.

Holistic support packages are key to quality emergency and transitional service provision. Client centred programmes that deliver the care and supports that are required to successfully move people out of homelessness and into independent living. Support programmes integrate health, welfare, education, training and employment aspects for the service user.

Again, *A Key to the Door* clearly states the Homeless Agency Partnership's commitment to achieving the delivery of care required to undertake a pathway out of homelessness. Core action 4 commits to: 'Implement the Holistic Needs Assessment and Care and Case Management approach across homeless services sector'.

Within emergency services, support packages should focus on improving an individual's capacity to move away from crises and where necessary should allow them to stabilise adequately so that they can move to the next stage of rehabilitation.

It is envisaged that emergency services will continue to deploy the Holistic Needs Assessment developed by the Homeless Agency. This is a basis for determining the appropriate accommodation pathway and care plan required by individual households experiencing homelessness. Individuals moving into transitional accommodation services would be able to expect a support package tailored to their needs as indicated by their holistic needs assessment. Transitional providers would be responsible for reviewing assessments and modifying the care plan accordingly.

Further to this, transitional services would continue to take on the role of identifying and securing move on accommodation and social housing options through three main delivery mechanisms.

Research and Information Team

The work of the Research and Information team is guided by a number of core actions in the action plan. The following is an overview of some of the key activity carried out by the team over 2007.

LINK

The Research and Information team manage and coordinate the Dublin Link System, which is a Homeless Client Database, shared throughout Homeless Services in Dublin, and is used to assist in providing a continuum of care to people experiencing homelessness. LINK records summary information of Homeless Service Providers interaction with people experiencing homelessness.

Independent consultants, Datability Ltd, completed a review of LINK during 2007. During the review over 100 questionnaires were completed with Project Workers and Managers from homeless services, along with focus groups and interviews with Homeless Agency staff and LINK's developers, Resource Information Service (RIS).

In order to streamline the information being entered into the system by project workers, modifications were made to the LINK action set to significantly reduce the number of actions available to users. This provided significant benefits by allowing for faster data entry and producing more consistent client records.

The LINK 'Train-the-Trainer' course was rolled out during 2007. This course provides services with the opportunity to up skill their staff's LINK skills to the point whereby they can provide their own in-house LINK training.

During 2007 LINK was modified to work in conjunction with the Holistic Needs Assessments. A completed assessment is now followed by project workers logging the existence of the assessment on LINK. This ensures that service users do not complete multiple assessments in different services.

Rough Sleeper Count

A rough sleeper count took place on the night of November 20th 2007 between 1.30am to 5am throughout the five functional areas of Dublin City Council, helping to determine the number of people who were sleeping rough in Dublin.

A total of 140 volunteers including experienced outreach team members took part in the count with the gardai providing local support for teams on the ground. Two/three person teams were formed to survey approximately sixty divisions of the Dublin area.

A total of 104 persons were found to be sleeping rough. This is a definite, minimum number of people observed sleeping rough.

The Homeless Agency Partnership recognises that a single count only tells part of the picture; rough sleeping is a rather dynamic situation, whereby some people only sleep rough occasionally, while others have been sleeping rough for a more extensive period of time. The November 2007 count is better understood in this context and repeat counts over time will increase the reliability of this information.

A steering group was convened to oversee the count and was comprised of Dublin City Council, South Dublin County Council, Fingal County Council and Dún Laoghaire–Rathdown County Council, the Gardai Síochána, the Homeless Network (represents voluntary organisations working to address homelessness in Dublin), Homeless Agency an elected Councillor, who is a member of Dublin City's Housing Strategic Committee.

The method used in the count has been substantially tested in other administrations and provides a robust and reliable count of those found sleeping rough on the night. In order to capture information about this in a wider context, night shelter accommodation services were contacted in order to see how many people with a recent history of rough sleeping were in accommodation on the night of the count. This represents a group of people who are likely to sleep rough in the future so proposed assistance to prevent rough sleeping must also take account of their needs. A full report on the findings of the count will be issued in early 2008. Rough Sleeper Counts will take place in April 2008 across Dublin City Council, South Dublin County Council, Fingal County Council and Dun Laoghaire- Rathdown County Council

EU 10 Assessment of Need

Background to the project

Merchants Quay Ireland, on behalf of the Homeless Agency carried out a count of people accessing homeless services in Dublin in order to provide an updated and more accurate figure of the number of people from EU10 countries presenting to services. The assessment also gathered information on the needs that are emerging for this group in the context of their use of homeless services.

Since May 2004 over 338,000 Personal Public Service Numbers (PPSN) have been issued to people from the ten new member countries of the European Union (EU10). More than 200,000 of these were issued to Polish nationals, more than 49,000 to Lithuanian nationals and just over 24,500 to Latvian nationals. While most of these new workers have integrated well into the Irish economy, a small number have fallen on hard times often in the form of homelessness. The Homeless Agency report *Away from Home and Homeless* estimated that in September 2005 between 60-120 people were accessing homeless services. Similar figures emerged from *Counted In, 2005* where it was found that approximately 9% (n=113 households) of households that responded to a question on citizenship (n= 1071) were non-Irish citizens. The non-response rate of the question on citizenship among the entire household count (n=1,361) was high (21%, n=289). This may well suggest that the overall percentage of foreign national households experiencing homelessness could be higher than what is detailed in the report.

While estimated and anecdotal numbers of rising numbers were being reported, no actual numbers of the target group were available. In order to inform ongoing service planning, it is important to monitor trends not only in term of the number of EU 10 nationals presenting to the various services, but also to identify the key needs that are emerging for this group.

The key objectives of the project were:

- To carry out an updated and accurate count of the number of people from the EU10 countries presenting to homeless services in Dublin
- To profile the study population's demographics, length of time in Ireland, housing status, work status, use of homeless and other services
- To carry out a needs assessment focusing on the core issues of physical and mental health status and addiction
- To examine participants language abilities, work and employment histories, sources of income and contacts with homeless services
- To review individual expectations against the reality of living and working in Ireland
- To examine the reasons why people from the EU10 countries are using homeless services
- To identify participants informal and formal networks
- To examine the barriers experienced by service providers in the provision of services to this group

- To outline the approaches to homelessness adopted by EU10 embassies
- To identify the number of people from EU10 countries accessing social welfare payments
- To detail the number of people from EU10 countries repatriated by the Reception and Integration Agency

The core aim of the EU10 Assessment of Need was to get a more accurate picture of the number of people from the EU 10 countries accessing homeless services. In addition, the project set out to profile the target group along with an examination of key issues arising in the context of their use of homeless services. The research focused on a broad range of areas including housing status, language abilities, work status, service use and service need. Barriers experienced by service providers in the provision of services to this group were also explored.

Methodology

The methodology utilised five strands including:

- All homeless services were asked to fill in a questionnaire and identify whether people from the EU10 countries were accessing their services. Those who were meeting the target group were included in the weeklong count
- A survey of people from EU10 countries who accessed homeless services during the week of December 4th – 10th 2006 was carried out. Surveys were distributed in Polish, Lithuanian, Latvian and Russian as well as English
- A non-response sheet was used to record identifier details of those who did not have surveys available to them in their languages, and those who chose not to fill in a survey
- Two discussion groups were carried out with clients from Poland who were accessing homeless services
- Interviews with Embassy Representatives were held

Profile/Count

- A total of 283 people from the EU 10 countries were using homeless services during the week of the count in December 2006. This equates to approximately 0.8% of the total number of people from the EU10 countries living in Dublin
- 65% (n=165) were Polish; 10% (n=29) were Lithuanian; and 9% (n=27) were from the Czech Republic.
- Men accounted for 83% of respondents
- The majority (55%, n=108) were in the 26-39 years age group. This was followed by those in the 40-49 years age group (25%, n=48)

Dublin City Rapid Needs Assessment

The Dublin City Centre Rapid Needs Assessment arose from a gap in knowledge around the profile and service needs of individuals engaging in street drinking and drug use in city centre areas. The research was commissioned by the Homeless Agency and carried out by Merchants Quay Ireland. The aims of the research were to identify the service needs of the target group and to promote awareness and encourage engagement with existing services.

The objectives of the research were to work with services and agencies on both sides of the inner city to identify target groups, develop a profile of the group, assess support needs of participants and dependents and to identify gaps in services and whether more appropriate responses can be developed. The methodology for the research included consultation with a steering committee and emergency network/contact workers. The research included quantitative and qualitative methods using a questionnaire with open and closed questions.

Key Findings

- 156 people took part in the study
- 68% were male
- Average age of participants 29.2 years and the majority were noted to be in 26-39 years age group
- 50% (n=77) had children, and 17% (n=14) said children lived with them
- Majority from Rep. of Ireland (90%, n= 120)
- Majority were single

Accommodation Status of the Target Group

- 73% (n=114) were accessing statutory accommodation
- 78% (n= 121) were accessing non statutory accommodation

Drug Use of the Target Group

- Alcohol/ methadone/ heroin use
- Polydrug use
- 86 people identified the park or streets as places where they used alcohol or drugs

Preferred Sites of Use of the Target Group

- 12% (n=18) wet centres, identified a need for safe well managed wet centres, a day drop in centre where people could have a drink
- 33% (n=52) consumption/safer injecting rooms, identified a need for somewhere safe clean and private for people to use

Day- time Hours- Outdoors

- Evenings 79%, n=123
- Afternoons 74%, n=116
- Mornings 63%, n= 98
- Night-time 31%, n=48
- Early morning 30%, n=46

Recommendations

- Repeat survey – validate compare and contrast findings from survey period 1
- A local area action plan for homeless day services
- Emergency accommodation access and standards
- A feasibility report into the issue of an increase in 'wet room' provision
- An Garda Síochána and the Homeless Agency to develop and deploy a pilot enforcement programme to the target group congregating in specific public places
- Adequate resources for the provision of information and advice on homelessness and related services to support the work of the local area action plan
- Communications strategy specific to the work of the local area action plan
- Homeless Agency to develop a policy paper for consideration of the Homeless Agency Board on issues related to harm reduction among drug and alcohol users, including the provision of wet rooms, drug consumption rooms and other relevant issues

The following 'service response' recommendations were put in place by the Homeless Agency Steering Group on Dublin City Centre Rapid Needs Assessment in 2007

- Local action plan was required to ensure a quick and appropriate response to divert and reduce the incidence and extent of congregation by plugging the gaps in day service provision and ensuring greater choice and access to services for this survey population
- A comprehensive evaluation of all emergency accommodation service providers funded by the Homeless Agency Partnership The findings of this study in relation to access to emergency accommodation, issues of health and safety, standards and facilities and overall management practice are of particular relevance to the work of this Implementation Group (Evaluations on emergency accommodation providers took place in 2006 with overarching report published in 2007)
- The resources required for the adequate provision of information and advice on homeless and related services are enforcement, diversion and prevention

Communications and Information Team

The work of the Communications and Information Team is guided primarily by Core Action 3, which outlines;

Implement an Information and Awareness Strategy

The Homeless Agency Partnership will develop, implement and review an information awareness strategy to inform the public, Government and target groups, which will include information, communications, media and public relations initiatives. The strategy will; enhance the public's understanding of the nature, causes and responses to homelessness; target information at groups who are currently homeless or at risk of homelessness, ensuring that all information about homeless services is accessible to all groups, across literacy and/or language barriers and; continue to advise and inform Government based on research and best practice, through the Cross Departmental Team on Homelessness.

Launch of the Homeless Agency Partnership Action Plan on Homelessness in Dublin 2007-2010 A Key to the Door



The Communications and Information team planned and coordinated the launch of *A Key to the Door*, Action Plan on Homelessness 2007-2010 on Tuesday February 6th 2007 in City Hall, Dame Street, Dublin 2. The launch was attended by 160 people from voluntary and statutory organisations working with people who are homeless in Dublin, representatives from statutory organisations working with homelessness throughout Ireland also mainstream services in Dublin that would be accessed by people who are experiencing homelessness in Dublin.

Speakers at the launch included leading authorities working with homelessness from an Irish, European and United States perspective including Mr. Noel Ahern T.D., Minister for Housing, Urban Renewal and Developing Areas, Mr. Philip Mangano, Executive Director, United States Interagency Council on Homelessness, Mr. Freek Spinnewijn, Director of FEANTSA, the European Federation of National Organisations working with the Homeless, The Lord Mayor of Dublin, Councillor Vincent Jackson, Ms. Kathleen Holohan, Chair of the Board of the Homeless Agency and Dr. Derval Howley, Director of the Homeless Agency.

Ms. Kathleen Holohan, Chair of the Board of the Homeless Agency and Director of Housing in Dún Laoghaire/ Rathdown County Council gave an overview of the consultation process and partnership approach that took place in the formation of the action plan.

Mr. Noel Ahern T.D., Minister for Housing, Urban Renewal and Developing Areas officially welcomed the action plan and gave an overview of the work that has taken place to address homelessness over the past 6 years and the measures that need to be put in place to accomplish the vision of the partnership.

Dr. Derval Howley, Director of the Homeless Agency gave an overview of the three strategic aims of the action plan; Prevent people from becoming homeless; Provide effective services in each local area to address the accommodation, housing, health and other relevant needs of people who are homeless in that area; Provide sufficient long-term housing, with appropriate supports as required, for people who are homeless, especially single person households. Dr. Howley also looked at the challenges and the opportunities that exist within the action plan for the Homeless Agency Partnership in addressing homelessness in Dublin.

Mr. Freek Spinnewijn, Director, FEANTSA spoke about homelessness from a European perspective and focused on the role Ireland and the city of Dublin could play in setting the homelessness agenda in the European Union. According to Freek, Dublin has one of the most progressive and effective homelessness strategies in Europe. He said that the Homeless Agency should profile itself more on a European level and promote its approach to homelessness abroad.

Mr. Philip Mangano, Executive Director, United States Interagency Council on Homelessness (USICH) looked at homelessness from a United States perspective and gave an overview of the 10-year plans of the USICH to end chronic homelessness in the United States. He highlighted that their goal is to implement agreed plans and work together to

address homelessness on a national level with local solutions with over 200 communities across the country, 49 states and three territories.

The Lord Mayor of Dublin Councillor Vincent Jackson formally closed the launch of the action plan.



Pictured from l-r

Mr. Freek Spinnewijn, Director, FEANTSA, Kathleen Holohan, Chair of the Homeless Agency, Mr. Noel Ahern T.D., Minister for Housing, Urban Renewal and Developing Areas, Dr. Derval Howley, Director, Homeless Agency, Mr. Philip Mangano, Executive Director, United States Interagency Council on Homelessness

Voter Registration Drive for Service Users Experiencing Homelessness

The Communications and Information team issued application forms to all service managers in residential services with a letter outlining the necessary procedure for a person who is experiencing homelessness to be added to the Supplement for the Register of Elections to enable them to have a vote in the 2007 elections.

All nominated candidates for election, councillors and political party press offices were contacted with a detailed factsheet from the Homeless Agency outlining accurate information in relation to homelessness in Dublin including the Vision of the Homeless Agency Partnership, three strategic aims of the action plan and also facts relating to the number of people experiencing homelessness in Dublin from *Counted In, 2005*.

The factsheet also highlighted the remaining challenges for people who are homeless and also provided an overview of emerging issues that were impacting on homeless services in Dublin.

Safetynet



(l-r)

Mary Harney T.D., Minister for Health and Children and Dr. Austin O' Carroll, GP and Chair of Safetynet Steering Group

The Communications and Information team worked with *Safetynet* and the Health Service Executive to announce the launch of Safetynet, Primary healthcare for people who are homeless, in the Homeless Agency, Parkgate Hall, 6-9 Conyngham Road, Dublin 8.

Mary Harney T.D., Minister for Health and Children on Friday May 4th officially launched the new service from *Safetynet* and speakers at the launch included leading professionals working within homelessness in Dublin; Dr. Austin O' Carroll, GP and Chair of the Safetynet Steering Group, Mr. Frank Mills, National Planning Specialist- Social Inclusion, Health Service Executive and Mr. Cathal Morgan, Director, Homeless Agency.

The aim of the *Safetynet* programme is to offer a comprehensive primary health care service targeted at people who are experiencing homelessness in Dublin and to make health services more accessible to people by locating medical and social support services in the agencies and services where people who are homeless can attend for support.

The following services are available; general nursing assessments, vaccinations, dentist, counselling, chiropodist, wound management, general health problems, blood testing, sexual health, safer injecting/harm reduction information and referrals to hospitals.

The service is currently operating in over ten locations throughout Dublin in voluntary and statutory organisations and General Practices including the Capuchin Centre, Crosscare – Longford Lane Night Service, Depaul Trust – Aungier Street, Depaul Trust- Back Lane Hostel, Depaul Trust- Tus Nua, Depaul Trust- Clancy Night Shelter, Depaul Trust – Bluebell Road, Dublin Simon- Detox, Dublin Simon – Emergency Shelter, Merchants Quay Ireland Open Access Primary Health Care Unit. Other key partners include Health Service Executive, Mountjoy Family Practice, Inchicore Family Practice, Assertive Community Care Service (ACCES), Multidisciplinary Healthlink Teams, Mental Health Service and Dental Services for people who are homeless.

The project is described as '*Safetynet*' because it offers essential medical support to people who are homeless and who may not be in contact with mainstream services. The service is primarily targeted at people experiencing homelessness who are not linked into or in contact with medical services. The service also works to improve links and access to mainstream health and social services for people who are experiencing homelessness.

Working Together to Make it Happen Seminar

A seminar on delivering solutions to problem drug and alcohol users experiencing homelessness in Dublin



'Working Together to Make it Happen' seminar, took place on Monday December 10th in 2007 in the Royal Hospital Kilmainham and was officially launched by Mr. Pat Carey T.D., Minister of State at the Department of Community, Rural and Gaeltacht Affairs with responsibility for the National Drugs Strategy and Community Affairs.

'Working Together to Make it Happen' was organised and hosted by the Homeless Agency in collaboration with the National Drugs Strategy Team in partnership with Drug Task Forces and the Health Service Executive Social Inclusion, Office of the CEO. Other partners in the delivery of the seminar are Safetynet (Primary Healthcare for People who are Homeless), the Homeless Network and the Department of Community, Rural and Gaeltacht Affairs

The seminar arose from recommendations made in response to a recent assessment of the needs of persons engaged in street drinking and drug misuse in the city centre, conducted by Merchants Quay Ireland on behalf of the Homeless Agency and Dublin City Council. Specifically, the seminar heard how a city-centre based response is being developed for those experiencing homelessness and with complex needs in terms of addiction.

The main focus of the day included informing the Homeless Agency Partnership Care and Case Management Initiative through the development of care pathways for problem drug and alcohol users experiencing homelessness; to further develop interagency working across homeless and addiction services through Case Conferencing

Sessions; to support and inform the development and roll out of the Health Service Executive Primary Care Teams and to facilitate sharing of expertise and experience amongst frontline professionals.

Over 180 people attended the seminar from the following services; homeless and addiction services, housing and residential services, health and social welfare services, training, education and employment services, probation and community gardai. The seminar heard from a range of expert speakers on topics related to delivering solutions for addiction service users experiencing homelessness.

Case Conferencing Sessions

Case conferencing sessions took place in the afternoon, whereby the participants were divided into groups of ten with a representative from homeless or addiction services facilitating each group. The sessions were very practical in nature with each group receiving a case study of an individual or family who is experiencing homelessness in Dublin. The aim of the case conferencing session for the purposes of the workshop was to provide participants with an opportunity to take part in a 'case conference' or 'interagency case meeting' on the basis of a pre-determined case study/ needs assessment.

Guidelines on how to convene a 'case conference' were taken from a section of the Interagency Protocols for Homeless and/or Drugs services. Each facilitator was provided with these in order to help them coordinate the meeting and support them in acting as the 'Case Manager'.

Session Aims

- To explore interagency responses to a range of complex needs in working with problem drug/ alcohol users who are experiencing homelessness in Dublin
- To identify barriers/solutions to issues raised through joined-up working
- To gain familiarity with one aspect of the Interagency Protocols: case meetings
- To review a particular case with a view to agreeing a lead agency/ case manager, a complete care plan responding to all issues identified including actions to be taken, person/ organisation responsible for these actions, target dates for these actions and long term goals for this case

Feedback from Sessions

Lead facilitators Joseph Doyle, National Drugs Strategy Coordinator, Office of the CEO, Health Service Executive and Mary Martin, Manager of Services for Social Inclusion, Health Service Executive Dublin North Central provided an overview of the feedback from each case conferencing facilitator, highlighting the following key points;

- Case Conferencing Sessions were useful when dealing with complex cases
- Group knowledge was positive and supportive when trying to create solutions and care plans for people who are experiencing homelessness
- Participants found it empowering to be able to make decisions there and then
- Provided a platform to learn and understand the views and priorities of other services
- Allowed clarification of roles when a number of organisations were working with one individual
- The concept of role playing allowed participants to be more empathetic to the needs of the person in their case study
- The time constraints of Case Conferencing Sessions were useful as people were forced to operate and deliver solution within a specific timeframe

Dr. Brion Sweeney, Dublin North East Addiction Services, Health Service Executive, conducted the plenary session and examined the key outcomes from the Case Conferencing Sessions including;

- Care and Case Management is crucial in the process of providing solutions for people
- It is important when planning a Case Conferencing Session that there is one lead person/organisation who will work to coordinate the work of group
- Planning for client is important right from the beginning from when a person presents as homeless
- There is an identified need for more move on accommodation option

Learning and Performance Team

The work of the Learning and Performance Team is guided by a number of core actions in the action plan and works to support the training needs of staff working in homeless services.

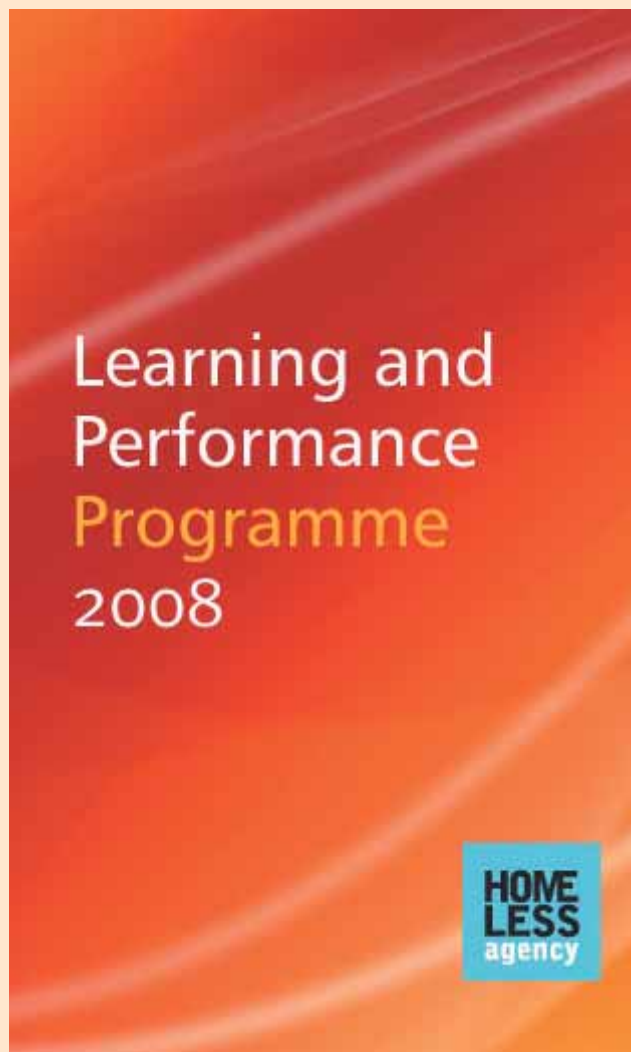
Choices

The Learning and Performance Team organised Choices on Wednesday April 4th in the City Hall, Dame Street, Dublin 2 from 9.30am to 2pm. Choices focused on the Training, Educational and Employment options available to people who have experienced or who are at risk of homelessness in Dublin. The main objective of the day was to offer an opportunity to those working in homeless service provision and to people who are experiencing homelessness to learn about the Training, Education and Employment options available and also to provide a source of information, support and advice.

Choices opened with a number of presentations from people who are experiencing homelessness and also homeless service providers including; Homeless Agency, FEANTSA, Focus Ireland Spokes Project, Business in the Community Ready for Work Programme and the City of Dublin Vocational Educational Committee (CDVEC) Foundations Project.

The following organisations provided information and advice at Choices: Homeless Agency, FAS, Focus Ireland - Spokes Project, Merchants Quay Ireland, PACE, Eve Holdings, CDVEC, Dolebusters, National Learning Network - Fresh Start, Liberties College - Solo Project, Business in the Community (Ready for Work Programme), Local Employment Services, Volunteering Ireland, Citizen Information, Combat Poverty Agency, National Adult Literacy Agency, Dublin Adult Learning Centre, Library Council of Ireland, MABS Money Advice and Budgeting Service, Refugee Information Service and CentreCare.

Learning and Performance Programme 2007



Over 2007 the Learning and Performance Programme saw the introduction of a number of new policies, practices and procedures. These were designed to ensure the sustainability of the programme, by ensuring that participant fees were recouped, as well as simplifying and automating a number of the administrative processes, which to date had been quite cumbersome and very time consuming. These changes included the introduction of online booking, automated invoicing and the issuing of certificates for participants who complete modules. These new departures helped to ensure more efficient and smooth running of the programme while also ensuring that participants who completed modules received credit for it.

In early 2007, following the circulation of the questionnaire to all homeless services and local authorities throughout Ireland work was completed on collating a national profile for Learning and Performance, the outcomes of which were reviewed with the Department of the Environment, Heritage and Local Government.

At its core, the work of Learning and Performance Team is strengthened through the ongoing support, dedication, collaboration and shared expertise of the Learning and Performance Network. Throughout 2007 the Network met to steer the rollout of the Competency framework into the recruitment and selection processes as well as the development of the content for the managers programme (which was integrated with the relevant competencies from the competency framework) and the ongoing monitoring and review of the Learning and Performance Programme. The continuity of the network was somewhat hampered in 2007 due to a significant number of network members moving out of the sector.

Following the completion of cycle 1 of the Learning and Performance Programme, work began to review all modules. This included a review of all assessment feedback from participants, trainers, Learning and Performance Network and workers/managers from the sector. Once completed the outcomes were forwarded to all trainers, giving an overview of all the feedback, what worked well and where relevant, areas that needed to be reviewed to address the emerging needs of the sector.

In June 2007 work began to develop the Learning and Performance programme for 2008. This brought a number of new additions to the programme, such as the provision of modules in "working with gay, lesbian, bisexual and transgender service users" and the Competency Framework. Through the development of links with the Irish Association of Counselling and Psychotherapy (IACP) the Learning and Performance Team were able to secure places for sectoral workers on the "Help for the Helper" workshop which will be facilitated by Babette Rothschild, best selling author who has written extensively on Vicarious Trauma and compassion fatigue.

2007 also saw the redesign of the Learning and Performance brochure in A5 booklet format which made it possible to host important new innovations within the homeless agency including details regarding the upcoming care and case management training and key worker training as well as information on the competency framework and the Effective Managers for the Homeless Sector Programme.

Throughout 2007 the Learning and Performance Team worked in conjunction with the Wheel Training Links Programme towards the development of the content of the on line sectoral induction programme and the implementation of the Effective Managers for the Homeless Sector programme which will facilitate 20 new and existing managers throughout the homeless sector through 2008.

In 2007 work began on assessing how learning and performance might begin the process of assessing its future direction with a view to exploring the feasibility of moving towards the provision of accredited training options for sectoral workers. This saw the development of a sectoral questionnaire, which aimed to assess existing training provision within the sector and so to inform the next steps in the process. This will be built on into 2008 and beyond.

In addition to its ongoing work the Learning and Performance Team was involved in the Service User Participation Pilot, which aimed to address current innovations within the sector while also making recommendations for the future for the sector.

Competency Framework

The rollout of the Homeless Services Sector Competency Framework has proven to be a great example of the sector's commitment to working together in partnership and mutual sharing and support in building a lasting sectoral resource. The integration of the Competency Framework into the recruitment and selection processes will help to ensure that people who experience homelessness are met by workers who have the skills and capacity to address their needs.

Through its use it is envisaged that individuals and organisations will become increasingly confident in the knowledge that workers entering the sector will have the required competencies to effectively support service users as they move towards more independent living. It will also raise the awareness of prospective workers of the competencies that are expected to work in the sector.

In 2007 much dedication, work and participation took place throughout the sector to bring the framework to life. This participation took many forms including: the establishment of an active steering group, the nomination of trainers/facilitators to facilitate both the process and the jobholder sessions and the organisational hosting and active participation/facilitation of the job holders sessions.

Once trained in the use of the recruitment and selection tools, the trainers will co-host sessions for hiring managers throughout the sector (who may not have already been trained in the use of the tools). A manual will also be developed which will facilitate the ongoing training of persons who will be involved in the recruitment and selection of staff throughout the sector.

The roll out of the Competency Framework takes full cognisance of the following roles as determined in the report 'Work Worth Doing' which reviewed staffing in 140 homeless services throughout Ireland: project manager, project leader, project worker, assistant project worker, night worker and childcare worker. The rollout aligned the Framework competencies for all levels of those roles across the sector.

The long-term success of the implementation of the Framework is reliant on the continued commitment and enthusiasm of all individuals and organisations working within homeless services.

Service User Participation Pilot

The 1999 Homeless Initiative publication *Putting People First* played a key role in recognising the importance of participation and consultation with service users. The 2005 report Review of Participation Structures noted that there is very little participation of service users in Homeless Agency structures. In that year, a working group was set up by the Homeless Agency to examine Service User Participation (SUP) in homeless services and work was undertaken the following year to encourage self-advocacy of users at three services in the city. In 2006, the Service User Participation Pilot was put out to tender and a steering group was put in place and work commenced on the pilot in 2007.

Integrated Services Team

The work of the Integrated Services Team is primarily guided by Core Action 4

Implement the Holistic Needs Assessment and the Care and Case Management approach across homeless services

The Homeless Agency Partnership has committed to the implementation of a Care and Case Management system across homeless services. Case Management is a process, which is used to holistically provide multiple services to an individual/family, through the use of a detailed assessment and development of a care plan relevant to their distinct

needs. The Case Manager is responsible for planning and management of individual cases within and across relevant organisations. Care Management is the support provided to the case management process through sector wide planning, monitoring, evaluating and ‘trouble shooting’. The Care Manager is responsible for co-ordination, and supporting case managers, dealing with barriers and blockages across and between sectors.

Care and Case Management Strategy

The Homeless Agency Partnership committed to the implementation of a Care and Case Management system across homeless services in Dublin, as outlined in Core Action 4 in *A Key to the Door: The Homeless Agency Action Plan on Homelessness in Dublin 2007-2010*. The establishment of a clear and workable framework underpinning Care and Case Management is vital to the partnership achieving its vision, which is about eliminating long-term homelessness and the need to sleep rough by 2010.

All services funded under the Homeless Agency arrangements have committed to implementation of the Holistic Needs Assessment and to work within a Care and Case Management Approach.

In the absence of agreed standardised ways to collaborate, the Care and Case Management Strategy sets out to develop agreement across services about how they can collaborate more effectively. This Strategy involves 4 key stages:

1. **Conception:** Agreement is to be achieved on a conceptual model of the journey through Care and Case Management: the continuum of care, supporting people out of homelessness
2. **Development:** Development of policies, processes, and protocols which support this continuum of care, or Model of Care and Case Management
3. **Application:** Implementing the model, policies, processes and protocols and analysing effectiveness
4. **Mainstreaming:** Ensuring the model, policies, processes, and protocols are adopted universally across the sector.

The Case Management Strategy involves the development of a range of case management tools and processes, in consultation with service providers, which will improve the collaborative delivery of services. The following tools are either currently in place or will be developed to support interagency work:

- Holistic Needs Assessment
- Risk Assessment
- Care Plan
- Job description of Care Manager and Case Manager
- Interagency protocols including; referral protocol, responsibilities and accountability agreement, case conference protocols, confidentiality agreements and data protection protocol, gaps and blocks protocol detailing external and internal supports, monitoring and evaluation mechanism, service user feedback mechanism and outcome measurement

These tools and processes provide supports to the case management process and promote clarity, consistency and accountability in the responses of services to service users who may have a range of high support needs.

With regard to Care and Case Management, the Homeless Agency has responsibility for coordinating the development of structures and processes, which will support effective case management at both policy and practice levels. The Homeless Agency will not actively participate in Case Conferences but will respond in a strategic manner if the Case Management process is met with blocks and barriers. This will take place through a range of mechanisms, but in particular through the Care and Case Management Steering Group, and the Homeless Agency's Integrated services Coordinator.

The role of the Care and Case Management Steering Group is to oversee the process of development and implementation of the Case Management Model across homeless services. The Steering Group has representatives from the Voluntary and Statutory Sectors. The Steering Group has initiated a number of Subgroups, which focus on specific tasks.

These subgroups pull together expertise on particular issues and develop proposals to improve current structures for the Steering Group. In 2007 the subgroups focused on:

- Developing a continuum of care model
- Developing tools for interagency work
- Prison discharge processes
- Provision of accommodation and supports for sex offenders

Care and Case Management Thematic Subgroups

Three subgroups were in operation since June 2007, with an additional two starting since the Steering Group met in October 2007. One subgroup has completed its task: development of the draft Interagency Case Management Protocols, ready to be piloted.

Each of these subgroups has voluntary and statutory representation relevant to the brief of the group. The subgroups are time-limited and have the brief of developing proposals for the Steering Group, which have been agreed at subgroup level.

Subgroup 1: The Model of the Continuum of Care Subgroup

This Subgroup has initiated the development of a Continuum of Care Model. The draft documentation includes a proposed definition of Continuum of Care, and outlines stages in this continuum. Within each stage there are actions that are expected to occur.

Definition of Continuum of Care: A Continuum of Care involves:

- Continued care at each stage
- Recognised pathways for particular groups
- Coordination of pathways

Key Stages in a Continuum of Care:

There are 4 general stages involved in a Continuum of Care: At-Risk, Crisis, Transition, Settlement. Crisis can happen at any stage. Supports are required at each stage, tailored to individual needs, and at the level required.

Key Actions in a Continuum of Care:

There are 4 expected actions at each stage in the Continuum of Care: Assessment, Planning, Implementation, Move-On. These actions should occur at each stage, but at a level relevant to that stage.

The subgroup began to focus on what specific pathways through this continuum of care exist for a number of different target groups. Six templates were developed which sought to clarify progression routes for a range of groups:

- General overview
- Single men
- Single women
- Families in private emergency
- Young people 18-25
- Young people under 18

This subgroup was guided by the Interagency Protocols Subgroup in defining roles and functions of a key worker, case manager, care manager, and Steering Group for Care and Case Management. These roles and functions have been drafted.

Outstanding areas:

- The “stages” of the continuum are to be defined, and further clarified.
- The structure of the continuum is to be provided in a flow-chart/ diagram
- The templates are to be revisited
- Clarify further the differentiation between who needs to be ‘case managed’ rather than ‘key’ worked
- Clarify further the ‘care management’ role both within an organisation and external to an organisation

Subgroup 2: The Interagency Protocols Subgroup :

This subgroup has developed a set of draft Case Management Interagency Protocols, which build on the work of the Holistic Needs Assessment Pilot to-date. The protocols outline how numerous services can be co-ordinated effectively to help service users achieve their care plan goals. These protocols provide guidance on good practice regarding key aspects of case management. The protocols cover:

- Initial Assessment / Establishing Lead Agency
- Referral Process
- Guidelines for Interagency Case Meetings
- Confidentiality and Data Protection
- Reporting of Gaps and Blocks Protocols
- Grievance Procedure for Service Users
- Grievance Procedure for Service Providers

Services will be invited to participate in a Pilot Project to review the use of these protocols in practice. Any service participating in the Interagency Case Management Protocols Pilot should be using the Holistic Needs Assessment in their service.

This subgroup involved over 20 organisations with close collaboration between homeless and drug services.

The subgroup completed its task in 2007. The Interagency Protocols were ready to be piloted by services engaged in case management. A new Thematic Subgroup was initiated to oversee the Interagency Protocols Pilot. The Interagency Protocols Pilot subgroup will report to the Steering Group

Services will be invited to participate in a Pilot Project to review the use of these protocols in practice. Any service participating in the Interagency Case Management Protocols Pilot should be using the Holistic Needs Assessment in their service. The Pilot will be initiated in February 2008.

Subgroup 3: The Prison Discharge Subgroup:

This subgroup aims to improve interagency collaboration regarding prison discharge. The subgroup consists of service providers with a brief within prison and/or externally, in the community.

Initially the subgroup is focusing on women in Dochas who have a sentence of over 3 months, have a Dublin address, and are not immigration cases. At a later stage, this subgroup will focus on other prisons.

Work undertaken, or in progress, by this subgroup:

- A mapping exercise of services providing in-reach into Dochas Prison has been conducted.
- Consulted the Emergency Network (i.e. Outreach Service Managers) to progress the mapping exercise.
- Will explore case studies of individuals leaving Dochas and rough sleeping/ entering into unstable emergency accommodation
- Will explore of community and prison-based roles
- Will explore LINK usage, which will support prison discharge planning

Subgroup 4: Subgroup on Care & Case Management for Women with High/ Multiple Needs:

The Women's Service Development Group requested a new thematic subgroup to focus on case management of women with High/ Multiple needs. This group was initiated in November 2007.

This subgroup will be exploring a set of issues requiring attention, which were highlighted by the Women's Services Development group. The subgroup will identify;

- Relevant current initiatives
- Required actions
- Timeframes
- Roles and Responsibilities

Subgroup 5: Care and Case Management for Repeat Nightbus Service Users:

A new subgroup will be convened in December 2007 to develop proposals regarding Care and Case Management for Repeat Nightbus Service Users.

Subgroup 6: Accommodating Sex Offenders:

An existing group: the Multi-Agency Group on accommodating sex offenders has been invited to initiate a new thematic subgroup. This group is seeking funding for a new Coordinators position, which will provide a Care Manager for this target group. This group has not yet convened, and the composition is to be agreed by the Multi-Agency Group on accommodating sex offenders.

The Care and Case Management steering Group will meet in February, to review reports and proposals from all subgroups. Subgroups that have completed their tasks will cease to operate.

It is envisaged that two further subgroups will be initiated in February 2008, to focus on:

- Children in Families
- Hospital Discharge planning

Holistic Needs Assessment Pilot

The Holistic Needs Assessment is a common assessment tool, which facilitates the care planning process for an individual who is experiencing homelessness. The need for and agreement to develop a common assessment tool is identified as a core action within *A Key to the Door The Homeless Agency Action Plan on Homelessness in Dublin 2007-2010*. The HNA is seen as a vital element to ensure that those experiencing homelessness are afforded the optimum opportunity to engage in a process of planning and action, which is person centred and as a process, creates the space within which the individual can determine their own pathway out of homelessness.

The pilot to date

The Holistic Needs Assessment pilot was drawing to a close at the end of 2007. The pilot saw a number of phases and a review took place in June 2007.

While the first phase of the pilot ran from January to December 2006 involving four services the current phase of the Holistic Needs Assessment (HNA) Pilot commenced in January 2007. The assessment was piloted in a number of homeless services in Dublin, concentrating on single people and involving 17 organisations. A mid-term review took place in June and July 2007, which took the form of a consultation with all stakeholders involved in the pilot including service users and service providers. The mid-term review was very useful in informing how to move forward and work towards completion of the pilot. The pilot was extended to include transitional, settlement and ancillary services including couples and families.

At this point there were 19 organisations currently involved in the pilot, which includes almost 40 different services. Over 250 staff received training in the HNA across homeless services in 2007. An independent evaluation will take place at the end of the pilot in early 2008.

The Homeless Agency would also see the HNA as an important aid for the frontline professional in that the domains, which are featured act as a reference point to the professional in terms of exploring areas of concern which are well recognised as being significant factors which lead into to or impinge on the individuals capacity to prevent or exit from a state of homelessness (e.g. mental health, problem drug/ alcohol use, ex-offending, etc). Further to this, it is well recognised that having agreement on one common assessment tool relieves the need for a person who is experiencing homelessness to have to engage in multiple assessment processes, which can lead to duplication of effort in terms of service provision and be very frustrating for the recipient of a service in that 'the story' gets repeated time and again.

The HNA will ensure that when an individual is experiencing homelessness that they go through the process of assessment once. A care plan will be drawn up as a result of the assessment and will be consistently updated by the staff involved in the support of the individual from their entry into homeless services to settlement. In the event that a service user moves from one service to another the assessment and care plan will be transferred to ensure that a continuum of care is in place.

The Homeless Agency has taken a partnership approach in terms of the development and deployment of the HNA. A steering group, comprising of senior statutory and voluntary representatives is in place, which represents a strong governance feature in terms of making sure the steps we are taking in this area are appropriate and measured. People who are accessing homeless services have been consulted as part of the development of the Holistic Needs Assessment Pilot and their feedback has been instrumental in improving the assessment process.

In addition to this, an implementation advisor is identified in each service involved in the pilot. The role of the implementation advisor is to support the effective implementation of the HNA in their service. This individual has responsibility for ensuring there is effective communication between the Homeless Agency and their service so that the pilot is supported appropriately in all services.

Principles of the assessment

A number of key principles underpin the HNA process.

With regard to the service user:

- Engagement in the assessment process is voluntary
- It is carried out at a time and place that is agreeable to the service user and the assessor
- There is respect for the service users story
- The assessment and care plan is person centred – it focuses on the person and their needs
- The empowerment of service users is at the core of the care plan

With regard to the service provider:

- It is a requirement that all staff engaged in assessment participate in a one-day training course on the HNA
- Professional and legislative requirements for the sharing of information are adhered to at all times i.e. Data Protection Act, policies and procedures on confidentiality, professional code of conduct for all employees etc.
- Provision of services is not dependant on the completion of the HNA
- In the event that a service user does not wish to engage with HNA the service must provide an alternative process of engagement
- There is commitment to coordinate appropriate interventions
- There is commitment to maintain frequent contact with the service user
- There is commitment to effective communication between stakeholders
- The contribution of different professionals involved in the assessment and care plan is valued

Service User Confidentiality

All service users need to be informed of the purpose and process of the assessment and care plan so that they can make an informed decision as to whether they wish to engage with the HNA. The HNA is preceded by a request for permission from the service user to share information with other workers involved in their care. It is a requirement that this is signed by the service user before any information in the HNA is shared. All information communicated between services should go to specified post holders only on a need to know basis.

The Homeless Agency have met with the Office of the Data Commissioner to ensure that responsibilities in relation to data protection are observed appropriately.

Feedback from the midterm review

The midterm review has been very helpful and productive in terms of exploring the use of the HNA to date and its potential into the future. The contribution from services on all aspects of the HNA was gratefully received as it was crucial to the development of the pilot. From the feedback received there has been significant endorsement of the assessment and careplan. The steering group has agreed a number of recommendations coming out of the review such as;

- It is recommended that a section at the top of each domain should be included to explain the rationale for each section and certain questions
- It is recommended that there should be an amendment of the 'Agreement to share information' to include a timeframe

- It is recommended that there should be additional training to address assessment skills, keyworking, care planning and case management
- It is recommended that a glossary should be included to explain terms used in the assessment and care plan

Going Forward

An independent evaluation will take place at the end of the pilot period in early 2008. This will provide an opportunity for extensive consultation with all stakeholders involved in the pilot. This will be followed by a revised version of the HNA to take account of all recommendations coming out of the evaluation. Training in the HNA will be incorporated into the Homeless Agency Learning and Performance programme 2008. In addition to this there will be additional training available to services covering assessment skills, key working, care planning and case management.

The HNA is but one essential strategy being developed by the Homeless Agency Partnership as part of a wider care and case management initiative, which is essentially about ending, as opposed to managing, long-term homelessness and the need to sleep rough.

Women's Services Development Group Seminar on Services For Women With High Support Needs

The Women's Services Development Group hosted a seminar in early March 2007 in Haven House, Morning Star Avenue, Dublin 7 from 9.30am until 1.30pm. The Seminar was chaired by Liz Lennon, Director, Focused Solutions and was attended by over 50 people from a range of services. The focus for the group was to examine specific recommendations for the development of services for women with high support needs who are experiencing homelessness in Dublin.

There were three presentations from representatives of the Women's Services Development Group: Samantha Priestley from Depaul Trust, Ger Kane from the Multi-disciplinary Health Team and Caroline Maher from Dublin Simon Community. They discussed the objectives of the group, research recommendations, the number of people with high support needs and also a map of services for women with high support needs.

Dr. Catherine Comiskey provided an overview of the Dochas Report: Hazardous Journeys to Better Places and examined the positive outcomes and negative risks associated with the care pathways before, during and after admittance to the Dochas Centre, Mountjoy Prison, Dublin, Ireland. Kate Richardson and Kirsten Jones provided an overview of the 218 service in Glasgow. The 218 service is provided by Turnaround, an experimental Turning Point Scotland project, which works with women with high support needs.

The Women's Services Development Group was formed in mid 2006 to develop and improve the capacity of services to respond effectively to women with high support needs. The objectives of the group are to identify what services and bed capacity are available for women, to map high and low threshold services for women, to identify what gaps exist in service provision and policy for women, to support the implementation of the Holistic Needs Assessment and Care Planning in women's services and to identify issues affecting women in homelessness. Members of the group include representatives from voluntary and statutory accommodation and support service providers.

There were four workshops held, which discussed domestic violence and violence against women, mental health and dual diagnosis, health issues, sexual health, sexuality and pregnancy, drugs/ alcohol addiction.

Initial feedback has been very positive and the seminar was regarded as being very successful. Recommendations generated in these workshops will form the basis of a seminar report and a strategic plan for the development of services for women with high support needs.

Finance Team

The core activity of the Finance Team in 2007 was as follows;

Coordinate and Deliver the Annual Budget to Services

In 2007 the Finance Team in the Homeless Agency distributed €43,505,673 million of State funds to voluntary and statutory service providers for people who are experiencing homelessness in Dublin. This funding comes from the Health Service Executive and the Department of the Environment, Heritage and Local Government. The finance team in the Homeless Agency has fulfilled this role since the approval of its first action plan in 2002. Over 70 different services were funded through the Homeless Agency, which were provided by over 30 voluntary and statutory service provider organisations.

Call for Funding for New and Expanded Services

The Homeless Agency Partnership issued a call for submissions for new or expanded services who were seeking funding for the period of 2008.

Documentation was sent relating to the funding application process to directors of organisations that have been both previously funded by the Homeless Agency and also those who have not received funding through the Homeless Agency funding allocations.

Managed the Internal Budget of the Homeless Agency

The Finance Team in the Homeless Agency managed the Homeless Agency internal budget of €1,515,161.00.

Board Members 2007

In 2007, the Homeless Agency Board set the strategic policy framework to address homelessness in Dublin. It proposes plans to the Cross Departmental Team and also to the relevant Local Authority Strategic Policy Committees and Councils: to the Health Service Executive and other statutory agencies, which are partners in its arrangements.

The members of the Board are as follows:

Kathleen Holohan – Chair	<i>Director of Housing, Dún Laoghaire- Rathdown County Council</i>
Anne O'Connor	<i>Local Health Manager, Health Service Executive, Dublin North West</i>
Bernadette Sproule	<i>Adult Education Officer, CDVEC</i>
Ciaran Mc Namara	<i>Assistant City Manager, Dublin City Council</i>
David Fitzgerald - Independent	<i>Chair of the Consultative Forum</i>
Dick Brady	<i>Director of Housing, Fingal County Council</i>
Dermot Kavanagh	<i>Assistant Director, Merchants Quay Ireland, Homeless Network</i>
Donal Mc Manus	<i>Executive Director, Irish Council for Social Housing</i>
Fergal Black	<i>Local Health Office Manager, Health Service Executive, Dublin West</i>
Frank Mills	<i>National Planning Specialist, Social Inclusion, Health Service Executive</i>
Frank Nevin	<i>Acting Director of Housing, South Dublin County Council</i>
Mark Wilson	<i>SPWO, Acting Regional Manager, Probation Service</i>
Orla Barry	<i>Director of Services, Focus Ireland, Homeless Network</i>
Sam Mc Guinness	<i>Chief Executive, Dublin Simon Community, Homeless Network</i>

Former Members of the Board in 2007

Alan Carthy	<i>Director of Housing, Fingal County Council</i>
Alice O'Flynn	<i>Assistant National Director, Social Inclusion, Health Service Executive</i>
Brendan Kenny	<i>Assistant City Manager, Dublin City Council</i>
Leonie O'Neill	<i>Director of Social Inclusion, Health Service Executive, Dublin North East</i>
Eddie Matthews	<i>Director of Social Inclusion, Health Service Executive, Dublin North East</i>
Philomena Poole	<i>Director of Housing, South Dublin County Council</i>
Pat Doherty	<i>Chief Executive, DePaul Trust, Homeless Network</i>
Declan Jones	<i>Chief Executive, Focus Ireland, Homeless Network</i>

Consultative Forum Members 2007

In 2007, the Consultative Forum had the task of monitoring the implementation of the action plan from a service delivery and operation perspective. The Forum provided a mechanism for the promotion and development of partnership between organisations and sectors, which underpins the approach of the Homeless Agency.

David Fitzgerald	<i>Chair, The Institute of Certified Public Accountants in Ireland</i>
Sr. Angela Burke	<i>Director, Vincentian Housing Partnership- Rendu Apartments</i>
Anne Helferty	<i>Snr Housing Welfare Officer, Dublin City Council</i>
Bernie Doherty	<i>Senior Executive Officer, Dublin County Council</i>
Brendan Hynes	<i>Homeless Coordinator, South Dublin County Council</i>
Bob Jordan	<i>Director, Threshold</i>
Ciaran Dunne	<i>Executive Manager, Dublin City Council</i>
Clare Schofield	<i>Education Coordinator, CDVEC</i>
Eamonn Martin	<i>Joint Chief Executive, Sophia Housing</i>
Gerry Benson	<i>Probation Officer, Probation Service</i>
Joe Mc Gloin	<i>Superintendent Community Welfare Officer, Homeless Persons Unit</i>
Kerry Anthony	<i>Director of Services, Depaul Trust</i>
Len Stroughair	<i>Community Services Officer, FAS</i>
Lisa Cuthbert	<i>Director, PACE</i>
Liz Clifford	<i>Homeless Coordinator, Dún Laoghaire- Rathdown County Council</i>
Mary Martin	<i>Social Inclusion Manager, Health Service Executive</i>
Mick Carroll	<i>Homeless Coordinator, Fingal County Council</i>
Patricia Cleary	<i>Executive Director, HAIL Housing Association</i>
Patricia O' Connor	<i>Director, National Drugs Strategy Team</i>
Paul Conlon	<i>Director, Coolmine Rehabilitation Services</i>
Seamus Sisk	<i>Deputy Director, Irish Prisons Service</i>
Sharon Cosgrove	<i>Director, Sonas Housing Association</i>
Theresa Dolan	<i>Assistant Director, Capuchin Day Centre</i>
Carmel Terry	<i>Social Inclusion Manager, Health Service Executive</i>

Former Members of the Consultative Forum in 2007

Don Comiskey	<i>Director, Aids Fund</i>
Yvonne Fleming	<i>Manager, Centre Care</i>
Orla Barry	<i>Director of Services, Focus Ireland, Homeless Network</i>

Homeless Agency Networks

To promote effective partnership and coordination between services, the Homeless Agency has established service specific networks, which include representatives from relevant organisations working in partnership to address their areas of service. Emerging issues are identified at these networks and proposals to provide solutions are developed on an operational and strategic level.

The networks, which were coordinated by the Homeless Agency in 2007 included:

- Emergency Outreach
- Emergency Accommodation Providers
- Transitional Accommodation
- Settlement
- Family
- Information
- Learning and Performance

Homeless Agency Steering Groups

The Homeless Agency commissions a wide range of research into various aspects of homelessness within the context of its action plan. Steering groups are established to work together to address particular issues. Projects often involve time limited steering groups including representatives from the voluntary and statutory sectors. In 2007 the following working groups included:

- Rapid Needs Assessment Steering Group
- EU 10 Assessment of Need Steering Group
- Holistic Needs Assessment Steering Group
- Care and Case Management Steering Group
- Emergency Evaluations Steering Group
- Transitional Evaluations Steering Group
- Dublin City Tenancy Sustainment Steering Group
- Competency Framework Steering Group
- *Working Together to Make it Happen* Seminar Steering Group
- Rough Sleeper Count Steering Group
- *Counted In, 2008* Steering Group

Cornerstone Advisory Group

The role of the Cornerstone Advisory group is to support and assist the editor of Cornerstone in forward planning for articles. The group is comprised of representatives from voluntary and statutory organisations.

Assessment Panel

The Assessment Panel consists of the Director and Head of Finance of the Homeless Agency, a representative from each of the local authorities and three representatives from the Health Service Executive. Funding of homeless service is shared on an agreed basis between the local authorities and the Health Service Executive. Each year the Homeless Agency invites expressions of interest from homeless services for developments in line with the action plan.

Homeless Network

The Homeless Network is the umbrella body representing community and voluntary sector organisations that provide services to people experiencing, or at risk of homelessness. It is the only network of its kind in the Republic of Ireland devoted exclusively to homelessness.

- The 23 members encompass a wide range of services: including day-centres, accommodation providers, housing associations, as well as information, outreach and advocacy services. All members are in the Dublin area, and some of the larger organisations also have a national presence.
- It provides a mechanism to nominate / elect representatives to sit on a wide range of fora: including the Consultative Forum and Board of the Homeless Agency, Dublin City Council local homeless fora, as well as a variety of working groups convened by the Homeless Agency. As nominated representatives of the community and voluntary sector, these representatives feedback to the Network on a regular basis.
- It agrees written policy positions by consensus on issues relating to homelessness.

Irish Council for Social Housing (ICSH)

The ICSH is the representative body for voluntary housing associations who collectively provide up to 30% of all new social rented housing. The ICSH has over 300 members, including housing associations who specifically provide housing related services for people who are homeless in the Dublin region. The ICSH is a social partner and has a dedicated Special Needs sub-committee, which deals with issues relating to homelessness. The ICSH is also a key component of the Department of the Environment, Heritage and Local Government's Voluntary and Co-operative Housing Working Group as well as the National Housing Forum.

Funding

Funding through the Homeless Agency arrangements allows for the provision of services for those at risk of homelessness such as tenancy sustainment services, information, advice and advocacy services. The funding also provides frontline support and accommodation for people who are homeless such as street outreach, emergency accommodation, food and day services, practical support, nursing and GP services, detox and rehabilitation and support for people leaving homelessness including transitional, settlement and long-term permanent accommodation.

Funding Allocations – Homeless Services Budget 2007

Organisation	HSE	LA 2007	Other Services 2007 (Probation, Addiction)	2007 Total Allocation
	€	€	€	€
Access Housing Unit (Threshold)	0	289,965	-	289,965
AIDS Fund	0	85,917	411,829	497,746
Capuchin Day Centre	121,164	341,831	-	462,995
Crosscare	384,796	388,768	0	773,564
Daisyhouse	0	94,186	-	94,186
DePaul Trust	2,548,290	1,939,245	0	4,487,535
Direct HSE Service Provision	4,250,000	0	-	4,250,000
Dublin City Council	482,292	2,752,248	0	3,234,540
Focus Ireland	1,273,004	3,985,999	0	5,259,003
HAIL	143,194	116,942	-	260,136
Haven House	568,350	384,872	-	953,222
Legion of Mary	92,125	0	0	92,125
Little Flower	0	21,961	-	21,961
Local Authority Services	0	400,000	0	400,000
Merchants Quay Ireland - Faltiu Centre	629,090	1,014,089	-	1,643,179
Miss Carr's	84,900	52,505	-	137,404
Novas Women's Emergency Shelter	434,000	548,968	-	982,968
Peter McVerry Trust	123,535	92,774	180,000	396,309
Crosscare/Private Premises - Abbey Street	0	466,930	-	466,930
Crosscare Private Premises - Sancta Maria	226,725	602,968	-	829,693
Respond	554,140	229,976	-	784,116
Salvation Army	2,322,416	2,346,981	57,000	4,726,397
Dublin Simon Community	2,658,387	1,873,669	0	4,532,056
Sisters of Our Lady	181,379	362,783	0	544,162
Sonas	483,986	410,971	0	894,957
Sophia Housing	448,872	448,348	0	897,220
Tallaght Homeless Advice Unit	0	154,329	-	154,329
Teach Mhuire	101,846	164,705	-	266,551
Tenancy Support Services	0	891,941	-	891,941
Vincentian Housing Partnership - Rendu	329,565	245,249	-	574,814
Vincentian Refugee Centre	103,000	130,810	-	233,810
YMCA (New 2005)	315,558	390,008	-	705,566
Bentley House	820,650	447,377	-	1,268,027
BOND	162,307	162,307	86,879	411,493
Dun Laoghaire West Pier Project	51,500	51,500	-	103,000
Homeless Network	41,898	41,898	-	83,796
Holistic Needs Assessment Project	44,000	44,000	-	88,000
Subtotal	19,980,969	21,977,020	735,708	42,693,697

Local Authority Section 10 Funding				
Aoibhneas	0	268,180	-	268,180
Iveagh Hostel	0	276,225	-	276,225
Life	0	42,665	-	42,665
Bru na bhFiann	0	188,336	-	188,336
Vergemount	0	36,570	-	36,570
Subtotal Local Authority Section 10 Funding	0	811,976	0	811,976

TOTAL	19,980,969	22,788,996	735,708	43,505,673
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Homeless Agency Expenditure 2007

Salaries and Wages	775,555.00
Homeless Agency Operational and Action Plan Programme Costs (to include the following cost centres)	621,410.61
* Research, Report Publications and Dissemination	
* Care and Case Management/Holistic Needs Assessment	
* Board, Consultative Forum and Network Meetings	
* Communications, Library and IT Supports (i.e. LINK, Website)	
* Parkgate Hall Facilities	
* Administrative Overheads (i.e. Post, Telephone, Stationary)	
* Temporary Staff Costs	
Learning and Performance Programme (i.e. Training costs for Homeless and related service provision service staff)	118,195.39

TOTAL	1,515,161
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Looking Ahead

Critical Priorities for 2008

Following the review of progress made in 2007, the first year of *A Key to the Door*, The Homeless Agency Partnership Action Plan on Homelessness in Dublin 2007-2010, three high level priorities have been determined to meet the strategic Vision of eliminating long-term homelessness and the need to sleep rough by 2010.

The three critical priorities for 2008 are:

1. Measure and evidence need and projected requirements
2. Develop and agree a model of service delivery for homeless services in Dublin
3. Review current expenditure on homeless services and develop and propose a capital and revenue funding mechanism to be agreed as part of a revised funding regime

The three priorities are interdependent and are not stated in a hierarchical sense. For example, the outcome and any recommendations arising from the review of finances will need to take cognisance of and relate to evidence of need and projected requirements in terms of investment.

1. Measure and evidence need and projected requirements

In order to effectively plan and deliver the Vision of the Homeless Agency Partnership, it is necessary to have up-to-date evidence, which illustrates the extent of need and demand arising for both service responses and required level of housing provision.

Several core actions within *A Key to the Door* require the Partnership to demonstrate the evidence of need, including;

Core action 1:

Identify people and households at risk of homelessness and intervene appropriately with a co-ordinated multi-agency approach

Core Action 4:

Implement the Holistic Needs Assessment and the Care and Case Management approach across homeless services

Core Action 10:

Evaluate and review existing levels of long-term housing supports and seek appropriate revenue funding streams for the implementation of best practice for people who have been homeless

Action H.1:

Requires that the Homeless Agency conduct research into the number and types of housing units required as well as the supports required with the aim that the outcome of same will be considered for incorporation into the Local Authority Social and Affordable Housing Action Plans. This will generate the targets to be achieved under Core Actions 7,8 and 9 (i.e. the provision of social rented housing, private rented housing and the Rental Accommodation Scheme).

In terms of this priority, the following outlines the way in which the Homeless Agency Partnership will be able to evidence the need for planning purposes;

1. Counted In, 2008
2. Rough Sleeper Counts
3. ETHOS (the European Typology on Homelessness and Housing Exclusion)
4. Evaluation of remaining Homeless Services
5. Holistic Needs Assessment Data
6. Local Authority Administrative Data (e.g. Housing/ Homeless Lists)

2. Develop and agree a model of service delivery for the homeless sector in Dublin

Core Action 4 of *A Key to the Door* mandates the partnership to implement the Holistic Needs Assessment and Care and Case Management approach across the homeless services sector. It is recognised that there needs to be in place a seamless approach to the delivery of services with clear roles and responsibilities aligned to both voluntary and statutory services.

Specifically, the following areas will ensure the development of a model of service delivery for homeless services in Dublin.

a) Care and Case Management

As the Homeless Agency initiates its Care and Case Management Steering Group, a key issue is to ensure clarity regarding the concepts behind Care and Case Management, and roles in relation to this strategy.

Care Management involves the co-ordination of services at management and policy level, while Case Management involves the collaboration of service providers at client level in the delivery of individually tailored care plans. Care and Case Management, when implemented effectively has been shown internationally to significantly improve the delivery of services to clients, meeting of clients needs and achieving positive outcomes with clients.

Role of the Care and Case Management Steering Group

The role of the Care and Case Management Steering Group is to oversee the process of development and implementation of the Case Management Model across homeless services. The Steering Group has representatives from the Voluntary and Statutory Sectors and has initiated a number of subgroups, which focus on specific tasks. These subgroups pull together expertise on particular issues and develop proposals to improve current structures for the Steering Group. Currently there subgroups in place working on:

1. Developing a continuum of care model (Integrated Model of Service provision based on a Pathways approach)
2. Developing tools for interagency work
3. Prison discharge processes
4. Provision of accommodation and supports for sex offenders
5. Inner City Interagency pilot based on the proposed continuum of Care Model (with agreed accredited educational and training inputs to underpin change and development of frontline staff roles)

b) Evaluation of Services to be conducted and completed in 2008

As stated under Critical Priority 1, the evaluation of remaining homeless services will 'measure the extent to which service providers currently deliver pathways out of homelessness'. Further to this, the evaluation will also assist the partnerships desire to develop and agree a model of service delivery for Dublin as a further aim of the evaluation is to seek to identify current best practices that support and realise a pathways approach out of homelessness for service users and to categorise and clarify the role of each service type under the evaluation process.

3. To review current expenditure on homeless services and develop and propose a capital and revenue funding mechanism to be agreed as part of a revised funding regime

In 2007, expenditure on homelessness is significant in terms of Government commitments. €43,505,673.00 was allocated to homeless services through the Homeless Agency funding arrangements.

The need to ensure that resources currently committed are utilised in order to meet the aim of the Vision of *A Key to the Door* is important in terms of ensuring quality outcomes for the service user. Likewise, there is an obligation on central government and statutory agencies to ensure value for money and cost effectiveness for monies spent, particularly in order to support the 'business case' for additional requirements in the future. In addition it is vital that the pathways model of integrated services that will be developed to meet identified need (i.e. Critical Priorities No. 1 & 2) is underpinned by an appropriate funding regime.

Measurement of Progress of A Key to the Door for 2007

A Key to the Door 2007 Timelines, Status and Blocks/Gaps

Key

- C** Action due for completion
- B** Background work due for completion
- I** Strategy/Action to be implemented
- R** Action to be reviewed
- ➡** Action continues after 2010

Indicators of status at end of 2007

- Action is complete
- Action is nearly complete or is underway as per *A Key to the Door's* schedule
- Action is underway with a revised schedule
- Action is delayed
- Action is not progressing

Action	Summary	Duration	2007			
			Q1	Q2	Q3	Q4
Core 1	Identify risk of homeless	Continuous				
Core 2	Mainstream services	Continuous			R	
Core 3	Information strategy	Continuous				
Core 4	Care and Case Mngt.	Continuous				
Core 5	Localisation	Continuous				
Core 6	Service user participation	Continuous				
Core 7	Social rented housing	Continuous				
Core 8	Private rented housing	Continuous				
Core 9	Rental Accommod. Scheme	Continuous				
Core 10	Housing supports model	One-off				
Prevention 1	Policy-proofing	Continuous				
Prevention 2	LA tenancy sustainment	One-off			C	
Prevention 3	Settlement strategy	Continuous				B
Prevention 4	Prevention protocols	One-off			R	
Prevention 5	Education of kids in B&Bs	Continuous				B
Prevention 6	Short-term use of PEA	One-off				
Prevention 7	Pop. health assessments	One-off		C		
Prevention 8	Information gathering	Continuous				B
Prevention 9	T/E/E strategy	Continuous			B	
Prevention 10	A Vision for Change	Continuous				
Prevention 11	Local grants budget	One-off		C		
Prevention 12	Local prevention plans	Continuous				B
Prevention 13	LA TS + housing welfare	Continuous				
Prevention 14	SD outreach	Continuous				
Prevention 15	DLR outreach	One-off				C
Services 1	Low needs fast-track	One-off				
Services 2	CCM assessment training	One-off		B		C

Services 3	HPU initial assessments	One-off				C
Services 4	LA + HPU protocols	One-off				
Services 5	Probation multi-d. team	Continuous				B
Services 6	Expand HPU in DLR	One-off				C
Services 7	HPU localisation	One-off				C
Services 8	HPU rent deposits	One-off				C
Services 9	Non-English speakers	One-off			C	
Services 10	Assess l-t residents	One-off				C
Services 11	Quality of services	Continuous				I
Services 12	Reconfiguration of EA/TA	Continuous				
Services 13	Service user charges	One-off				
Services 14	LA definitions + lists	One-off				
Services 15	Barriers to services	Continuous				
Services 16	Minority awareness	One-off				R
Services 17	L&P intercultural	Continuous			B	
Services 18	HSE intercultural strategy	One-off				C
Services 19	Women's refugees plan	One-off			C	
Services 20	HA research coordination	Continuous				
Services 21	National Drugs Strategy	One-off				
Services 22	GP primary care	One-off		C		
Services 23	Access to health services	Continuous				
Services 24	Dental service	Continuous				
Services 25	Detox and rehab plan	Continuous		B		
Services 26	Mental health resources	Continuous				I
Services 27	Mental health in DLR	Continuous				
Services 28	Respite beds	One-off				
Services 29	Localisation resources	One-off			C	
Services 30	LA homeless forums	Continuous				B
Services 31	City centre day services	One-off		C		
Services 32	DC long-term housing	One-off				
Services 33	Finglas services study	Continuous				B
Services 34	Ballymun model of care	One-off				
Services 35	Ballymun alcohol service	One-off				C
Services 36	Ballyfermot service study	Continuous				B
Services 37	DLR West Pier Travellers	Continuous				
Services 38	DLR VEC study	Continuous		C		
Services 39	DLR refuge study	Continuous				
Services 40	DLR housing drugs/meth	One-off				
Services 41	FCC PEA	One-off				
Services 42	FCC refuge Blanch.	One-off		C		
Services 43	FCC information service	Continuous				
Services 44	FCC relocate BOND	One-off				
Services 45	SD EA Tallaght	One-off				
Services 46	SD EA Clondalkin	One-off				
Housing 1	HA housing research	One-off				C
Housing 2	Sex offenders policies	Continuous				
Housing 3	Move from bedsits	Continuous				
Housing 4	Rationalise the HA Development Process	Continuous				
Housing 5	Service charges	Continuous				
Housing 6	Rural resettle't +transfers	Continuous				
Housing 7	Social housing +transition	Continuous				
Housing 8	FCC integ' housing	Continuous				
Housing 9	SD long-term housing	Continuous				
Housing 10	FCC review Donabate	One-off		C		
Housing 11	FCC expand transitional	Continuous				
Housing 12	FCC Lusk supp. Housing	One-off				
Housing 13	LA settlement services	Continuous				

Review of Progress of A Key to the Door for 2007

Strategic Aim 1 – Prevent people from becoming homeless

The Homeless Agency Partnership Vision suggests that by 2010 the risk of someone becoming homeless will be minimal due to effective preventative policies and services. It is important to recognise the vital work of preventative services in ensuring that people's circumstances do not reach such a crisis point that their ability to maintain their home is endangered.

The following have been identified as areas that require preventative intervention, that can reduce the risk of someone becoming homeless:

- Mental health problems
- Addiction (drug, alcohol)
- Dual diagnosis (addiction and mental health)
- Challenging behaviours
- Personality disorders
- Learning disabilities
- Meaningful occupation (education, training and employment)
- Landlord and tenant disputes

The following services have been identified as vital part of the delivery of effective prevention:

- Primary healthcare
- Mental healthcare (including person centred psychiatric, psychological and multidisciplinary services)
- Family mediation
- Medical cards
- Adult education and literacy services
- Training and employment services
- Advice, support and advocacy for tenants at risk of homelessness

In addition, prevention services must take account of the needs of people with physical and/ sensory disabilities, as well as people's language and/ literacy needs.

Core Action 1.

Identify people and households at risk of homelessness and intervene appropriately with a coordinated multi-agency approach

Progress

Dublin European Typology of Homelessness and Housing Exclusion (ETHOS) project underway on a pilot basis in Dublin's North West area.

ETHOS has been developing a definition of Homelessness and Housing Exclusion. This has been developed as a result of recommendations made by the Social Protection Committee that "as a matter of urgency the [European] Commission should examine different approaches to the definition and measurement of homelessness and precarious housing in a comparable way across Member States and see whether a Level 1 indicator can be developed for use in the EU monitoring process"

The European Observatory on Homelessness and the FEANTSA Working Group on DATA Collection and Homeless Statistics have been working over a number of years to develop a conceptual and operational definition of homelessness. It is the intention that homelessness and the broader definition of housing exclusion can be counted and the gaps in the existing data collection can be identified.

The approach has moved from a conceptual model to an operational definition that can be used across the Europe and is also applicable at national level. This is the third stage of the development of the typology where the measurement of the each of the generic categories of the definition. This process will allow further refinement of the typology. As each country follows this process it will allow further comparison and refinement across Europe.

While data collection is very important it is not the purpose of the typology. The goal is to provide the information, which is necessary to improve service provision and prevent homelessness.

Counted In, 2008

The National Housing Needs Assessment derives from Section 9 of the Housing Act 1988. Housing Authorities are required to make periodic assessments of the need to provide housing for persons who cannot provide their own accommodation.

In 2007, the project plan for *Counted In, 2008* a weeklong survey of people experiencing homelessness in Dublin was put in place. It provides vital information for the planning of responses to the needs of people who are homeless and is an essential tool for achieving the Homeless Agency Partnership Vision of eliminating long-term homelessness and the need for anyone to sleep rough.

A survey will take place during the week of Monday 10th March to Sunday 16th March 2008. This will provide the information required for both *Counted In, 2008* and the Housing Needs Assessment (with respect to the count of people who are homeless in Dublin).

The survey will be led by the Homeless Agency in partnership with the four Dublin local authorities (Dublin City Council, Dún Laoghaire - Rathdown County Council, Fingal County Council and South Dublin County Council).

The survey will be conducted in all homeless accommodation, homeless day services and other places where people who are homeless are likely to be met (e.g. hospital A&E departments).

Rough Sleeper Count

A rough sleeper count organised by the Homeless Agency took place on the night of November 20th 2007 between 1.30am to 5.00am throughout the five functional areas of Dublin City Council. Its aim was to determine the number of people who were sleeping rough in Dublin as well as guide the response mechanism to address their needs.

A total of 140 volunteers (including experienced outreach team members took part in the count with the Gardai providing local support for teams on the ground). Two and three person teams were formed to survey approximately sixty divisions of the Dublin area.

Repeat counts of the numbers of people sleeping rough will be carried out across all four local authority areas during the months of March and April 2008. These figures will be used to supplement the findings from the *Counted In, 2008* survey.

Core Action 2.

Ensure access to mainstream health services and other services for people and households at risk of homelessness

Progress

In 2007 the HSE continued to progress the roll out and development of primary care teams in each local health area. The Homeless Primary Care Team, Safetynet continued to expand in terms of linking in with homeless services and onward linkage to mainstream healthcare provision. The aim of the Safetynet programme is to offer a comprehensive primary health care service targeted at people who are experiencing homelessness in Dublin and to make health services more accessible to people by locating medical and social support services in the agencies and services where people who are homeless can attend for support.

The following services were available; general nursing assessments, vaccinations, dentist, counselling, chiropodist, wound management, general health problems, blood testing, sexual health, safer injecting/harm reduction information and referrals to hospitals.

The service operated in over ten locations throughout Dublin in voluntary and statutory organisations and General Practices including the Capuchin Centre, Crosscare – Longford Lane Night Service, Depaul Trust – Aungier Street, Depaul Trust- Back Lane Hostel, Depaul Trust- Tus Nua, Depaul Trust- Clancy Night Shelter, Depaul Trust – Bluebell Road, Dublin Simon Community- Detox, Dublin Simon Community – Emergency Shelter, Merchants Quay Ireland Open Access Primary Health Care Unit. Other key partners include Health Service Executive, Mountjoy Family Practice, Inchicore Family Practice, Multidisciplinary, Healthlink Teams, Assertive Community Care Evaluation Services (ACCES), Mental Health Service and Dental Services for people who are homeless.

Healthlink Teams, Assertive Community Care Evaluation Services (ACCES) Mental Health Service and Dental Services for people who are homeless, Liberties Primary Care Team and Dr. Kieran Harkin GP, Inchicore Medical Centre.

The Multidisciplinary Mental Health Team continued to operate but was limited to Dublin's southside area.

Working Together to Make it Happen, a seminar on delivering solutions to problem drug and alcohol users experiencing homelessness in Dublin took place on Monday December 10th, 2007 in the Royal Hospital Kilmainham. It was aimed at developing pathways for this service user group further assisting in the linking of homeless addiction services with Primary Care Teams/ mainstream health services. The seminar was organised and hosted by the Homeless Agency in collaboration with the National Drugs Strategy Team in partnership with Drug Task Forces and the Health Service Executive Social Inclusion, Office of the CEO. Other partners in the delivery of the seminar were Safetynet (Primary Healthcare for Homeless People), the Homeless Network and the Department of Community, Rural and Gaeltacht Affairs.

Core Action 3.

Implement an Information and Awareness Strategy

Progress

The Communications and Information Team continued to develop its information and awareness work through information tools and media outlets available to the team including Cornerstone (journal), Update (newsletter), Homeless Agency website, publications and library. Information in relation to homelessness is disseminated widely to key stakeholders in homeless and mainstream services and to the general public.

The ongoing work of the Communications and Information teams work is to address a variety of issues and perceptions of homelessness that appear in Irish media (broadcast and print) to ensure accuracy of information and 'right of reply' and ensuring that the 'voice' of homeless service user and homeless service is heard and recognised.

P.1 – The Homeless Agency Partnership will provide expert advice and policy proofing on request from the Cross Departmental Team on Homelessness, the four Dublin local authorities and the Health Service Executive in regard to any new and/or potential policies.

Progress

The Homeless Agency participates as a member on the National Homeless Consultative Committee (NHCC) which is tasked with, on a consultative basis, supporting the Cross Departmental Team on developing the revised National Strategy on Homelessness. In addition the Homeless Agency provides representation on the NHCC Data Subgroup.

P.2 – The four Dublin local authorities will further develop referral protocols with tenancy sustainment services, to homeless proof estate management services (e.g. link estate management with tenancy sustainment service) and to develop links between local authority rent sections and tenancy sustainment services to minimise the risk of households becoming homeless. This will include agreed procedures to deal with individuals and families at risk of eviction from local authority housing and for those evicted. One aspect of this will be seeking court orders to deduct rent at source of income.

Progress

Dublin City Council, Direct Service Provision (DSP) commenced a pilot in 2007 with the Department of the Environment, Heritage and Local Government to move families and individuals from private emergency accommodation into private rented under the rental accommodation scheme. DSP worked with Dublin City Tenancy Sustainment (DCTS) Service to provide tenancy support for clients.

The contract with DCTS has been committed to for a further two years with a revised set of objectives.

- Dún Laoghaire-Rathdown County Council – tenancy sustainment officer continued working since commencement of post in 2006.
- South Dublin- two tenancy sustainment officers commenced work in 2007.
- Fingal County Council – tenancy sustainment officer commenced work in 2007.
- Tenancy sustainment service will be evaluated as part of the Pathways evaluation process in 2008.

P.3 – The Homeless Agency Partnership will identify and agree the continuum of care to be provided by settlement and tenancy sustainment services (e.g. link estate management with tenancy sustainment services) and to develop links between local authority rent sections and tenancy sustainment services to minimise the risk of household becoming homeless. This will include agreed procedures to deal with individuals and families at risk of eviction from local authority housing, and for those evicted. One aspect of this will be seeking court orders to deduct rent at source of income.

Progress

The Care and Case Management steering group through the Continuum of Care subgroup are actively pursuing the issue of the role of settlement/tenancy sustainment in the model of the continuum of care.

P.4 – The Health Service Executive, Prison Service, Probation Service, the four Dublin local authorities, homeless services and the Asylum Seekers Unit will agree joint protocols for interagency work to identify individuals and families at risk of homelessness, and to put in place Care and Case Management to prevent them from becoming homeless. These will include protocols for people prior to release from state care and institutions including residential, childcare, prisons, hospitals and psychiatric services, as well as people moving out of direct service provision (asylum seekers)

Progress

The Care and Case Management steering group is working on the agreement of joint protocols for interagency work to identify individuals and families at risk of homelessness, through the prison discharge sub group and through the planned hospital discharge sub group.

The impact of migration on homeless services has been monitored through the Homeless Agency networks. It has also been monitored and evidenced through research carried out by Merchants Quay Ireland on behalf of the Homeless Agency, and research will continue into 2008. Work on protocols remains to be developed.

The issue of the movement of young people from the care system into adult homelessness has been highlighted by the research *Young People's Pathways* carried out by the Children's Research Centre Trinity College Dublin. The recommendations from Phase 2 of this research are due to be launched in 2008 and will highlight the policy responses and protocols that are needed to address this issue.

P.5 – The Health Service Executive with the four Dublin local authorities, voluntary bodies, Department of Education and Department of Social and Family Affairs will establish a high level management structure, or work with an existing structure, to coordinate education, health, welfare, and developmental needs of children and families resident in temporary/private emergency accommodation, especially children that become homeless with their parents.

Progress

Counted In, 2008 will provide information on the numbers of families and children resident in emergency accommodation. This will be followed up with a survey around the needs of these residents with the information collated to provide valuable evidence for planning services to respond to the needs of people experiencing homelessness.

The Office for the Minister for Children was asked to act as a host for the progression of this action. The background work should be completed in early 2008.

P.6 – The four Dublin Local Authorities will implement the recommendation set out in the Review of the Government Strategy, that households only stay short-term (less than six months) in private emergency accommodation.

Progress

Private emergency accommodation will be evaluated in as part of the suite of service evaluations to be completed in 2008.

P.7 – The Health Service Executive is committed to carrying out needs assessments in each local area office to inform the development of primary care teams. These needs assessments will take account of all sections of society, including the needs of people who are experiencing homelessness.

Progress

In 2007 each local Health Office in the HSE completed a mapping exercise to support the development of Primary Care Teams. This initial exercise identifies all facilities and services within each area, including those for people experiencing homelessness. Additional information regarding services will be inputted on an outgoing basis e.g. number of beds.

The steering group responsible for overseeing the roll out of the Primary Care Teams nationally is in discussion with population Health regarding Needs Assessment. Work is underway to agree a common national approach to these assessments.

P.8 – The Homeless Agency, the four Dublin Local Authorities, Health Service Executive and all homeless services will develop more effective mechanisms to collate and share information (subject to data protection) on individuals and families presenting as homeless to ensure more integrated homeless service provision, through;

- a. 100% usage of the Homeless Agency's LINK client database
- b. Integrating client databases across homeless services including those maintained by statutory and voluntary sector homeless services such as the Homeless Persons Unit's Assessment and Care and Case Management database
- c. Implementing the social work information system to collect data on child protection and the safeguarding of children resident in homeless and private emergency services
- d. Implementation of the Homeless Agency's sectoral induction website and linking website across homeless services
- e. Developing and providing information in both suitable language (based on National Adult Literacy guidelines) and different languages (to meet the needs of new communities to Ireland)

Progress

- a. The LINK system has been comprehensively reviewed and the development of proposals are underway to improve LINK and ensure 100% usage
- b. The LINK review examined an issue of a system that allows two existing databases to communicate and the conclusion was that this would be prohibitively expensive and complex and thus should not be undertaken, however work on integrating the Homeless Persons Unit database is being examined with the Department of Social and Family Affairs
- c. The Homeless Agency is investigating the implementation of the social work information system with the Office of the Minister for Children
- d. The development of the Homeless Agency Sectoral Induction website is proceeding.
- e. Providing information in different languages is being progressed as part of Core Action 3

P.9 – The Homeless Agency Partnership in consultation with the Department of Enterprise and Trade, FÁS, Department of Education, CDVEC, Business in the Community and other bodies will develop a strategy for implementing targeted training, education and employment initiatives for people experiencing homelessness. This work will be completed in the first six months of 2007 and will be undertaken over the duration of the action plan and within the context of national plans to engage people in training, education and employment

Progress

This action has been progressed with the ongoing work of the Training, Education and Employment Network. The purpose of this Network is to provide a support and information exchange forum for frontline workers involved in the direct delivery of services to homeless people. The Network will meet to discuss education, employment and training initiatives and to raise awareness of what relevant services are available within the homeless sector or are coming on stream for homeless people in terms of education and employment.

P.10 – The Health Service Executive is implementing the recommendations and findings from *A Vision for Change* as part of Government Strategy and will ensure the full implementation of those recommendations relevant to people who are experiencing homelessness.

Progress

A National Implementation Group was established to oversee the implementation of the recommendations in *A Vision for Change*. Their remit is to ensure all recommendations are implemented as resources become available. Each Local Health Office has now established a Local Vision for Change Group to ensure that actions agreed nationally are implemented locally. These groups are currently mapping mental health services and conducting a gap analysis between services on the ground and the recommendations in the report. Specific service requirements in relation to people who are experiencing homelessness will be identified within this exercise.

P.11 – The Homeless Agency will seek the allocation of a small grants budget to fund specific prevention initiatives in each of the eight local areas (the detail of these initiatives will be provided in the local area implementation plans)

Progress

A budget line was identified by the Homeless Agency, which is managed through the assessment panel process. The Homeless Agency secured these funds in 2007, however action P.11 has been delayed, so these funds have not been drawn on by the Local Homeless Forums.

P.12 – All eight Local Homeless Forums will develop and implement specific prevention initiatives as part of the implementation plans for their local areas.

Progress

The consideration of preventative initiatives was ongoing throughout the year and in some cases was awaiting recommendations from research undertaken.

P.13 – The four local Dublin authorities will continue tenancy sustainment services and housing welfare services.

Progress

Tenancy sustainment and housing welfare services are fully operational and continuing. Information outlined under P2.

P.14 – South Dublin will continue outreach service and will work closely with existing housing welfare and social welfare teams

Progress

Outreach service is in operation and is linked to Housing Welfare and Social Work teams.

P.15 – Dún Laoghaire–Rathdown County Council will establish the extent/remit of existing outreach services (eg. Barnardos, family support workers). On the basis of this study, the current outreach service will be expanded as necessary.

Progress

Survey was carried out in 2007 to assess the level of outreach in the Dún Laoghaire – Rathdown County Council area, however funding was not available for new outreach services.

Strategic Aim 2- Provide effective services in each local area to address the accommodation, housing, health and other relevant needs of people who are homeless in that area

The Homeless Agency through the Service Level Agreements made with every funded service, is working to ensure that best practice is delivered in all homeless services and that the assessment and care planning process is rolled out across services.

The Homeless Agency is also constantly reviewing the needs of people experiencing homelessness and the availability of services, with the goal of providing an appropriate level of service in every local area to replace the current over concentration of services in the city centre.

The immediate need of a person who presents as homeless is to have his or her homeless status verified and to be given access to emergency accommodation. A person presenting as homeless should have the full range of his or her accommodation and support needs assessed. Following on from assessment, a care plan needs to be drawn up and agreed between the Project Worker and the person who is experiencing homelessness.

Core Action 4.

Implement the Holistic Needs Assessment and the Care and Case Management approach across homeless services

Progress

The Care and Case Management Strategy involves the development of a range of case management tools and processes (in consultation with service providers), that will improve the collaborative delivery of services. The following tools are either currently in place or are being developed to support interagency work: Holistic Needs Assessment, Risk Assessment, Care Plan, Description of Care and Case Manager, and Interagency Protocols.

The Care and Case Management initiative advanced at a significant pace with the following thematic subgroups in addition to a high level steering group being established and led by the Homeless Agency in 2007. **1)** Prison Discharge **2)** Interagency Protocols **3)** Women with multiple or high support needs **4)** Accommodating sex offenders **5)** Care and Case Management for repeat night bus service users **6)** Continuum of Care model.

The Interagency Protocols include; referral protocol, responsibilities and accountability agreement, case conference protocols, confidentiality agreements and data protection protocol, gaps and blocks protocol detailing external and internal supports, monitoring and evaluation mechanism, service user feedback mechanism and outcome measurement.

The Holistic Needs Assessment is a common assessment tool, which facilitates the care planning process for an individual who is experiencing homelessness. Roll out of the Holistic Needs Assessment continued on a pilot basis and preparation for evaluation of the process was ongoing for 2008.

Core Action 5.

Continue the localisation of mainstream and specialist homeless services

Progress

Following a call for funding submissions in 2007, the Assessment Panel concluded the assessment of projects and prioritised the need to localise service provision. The mapping process will continue with the Homeless Agency linking in with both the Health Service Executive and Dublin City Council in terms of mapping services provided by these statutory agencies along with services provided under the Homeless Agency arrangements. Strategic information will continue to be developed to localise service provision, particularly outside of Dublin city centre in 2008.

Core Action 6.

Increase Service User Participation

Progress

In 2006, the Service User Participation Pilot was put out to tender and a steering group was put in place with work commencing by independent consultant on the pilot in 2007.

S.1 – All homeless services will assess newly homeless persons and households within a period of four weeks. Each individual and/or family who presents as homeless will have a care plan in place within this four- week period.

Progress

The Holistic Needs Assessment pilot was drawing to a close at the end of 2007. The pilot has seen a number of phases and a review took place in June 2007.

While the first phase of the pilot ran from January to December 2006 involving four services the current phase of the Holistic Needs Assessment (HNA) Pilot commenced in January 2007. The assessment was piloted in a number of homeless services in Dublin, concentrating on single people and involving 17 organisations. A mid-term review took place in June and July 2007, which took the form of a consultation with all stakeholders involved in the pilot including service users and service providers. The mid-term review was very useful in informing how to move forward and work towards completion of the pilot. The pilot was extended to include transitional, settlement and ancillary services including couples and families. At this point there were 19 organisations currently involved in the pilot, which includes almost 40 different services. Over 250 staff received training in the HNA across homeless services in 2007. An independent evaluation will take place at the end of the pilot in early 2008.

S.2 – The Homeless Agency will implement training and training packs – ‘Train the Trainer’ – on the Holistic Needs Assessment, Care planning and Care and Case Management within the first six months of 2007. Training to be made available to prisons, psychiatric institutions, hospitals and social workers. This is the second phase of the needs assessment process following the pilot studies in 2006. The second phase will be evaluated after six months. The third phase will be the implementation of the assessment process by all statutory and voluntary homeless services.

Progress

Training was introduced through the Homeless Agency’s Learning and Performance Programme to support the Holistic Needs Assessment.

This action is also being progressed as part of the wider Care and Case Management Strategy (Core Action 4)

S.3 – The Homeless Persons Unit, the four Dublin local authorities and homeless services will complete assessments of need and Care and Case Management plans in a coordinated and streamlined way to ensure a comprehensive and accurate outcome for people using services. The Homeless Persons Unit will undertake initial assessments and make them available to other services, which will conduct the Holistic Needs Assessment.

Progress

This action is underway, the Homeless Persons Unit will be part of the interagency pilot under Care and Case Management. Within this, the interface between initial assessments carried out by the Homeless Persons Unit and further assessment carried out by homeless services will be developed.

S.4 – The four Dublin local authorities and Homeless Persons Unit will develop a joint protocol and process for the assessment and case management of people presenting from the local area, including a follow-up with people who present to the Homeless Persons Unit but who do not register on that local authority's housing list. Dublin City Council to develop and implement this protocol in each of its functional areas.

Progress

Action is underway with a revised schedule. *Counted In, 2008* will ask everyone using homeless services whether or not they are registered with a local authority for social housing. The Homeless Agency will follow up with this information to verify information with local authorities and to seek the registration of everyone who is eligible as well as seeking clarity on the blocks that prevent others from applying for social housing.

S.5 – The Homeless Agency Partnership will actively support the establishment of a dedicated multi disciplinary team, based on a Care and Case Management approach, located within the probation service, as recommended in the Probation Service's report *What Now! Useful things to know before and after your release*, published in 2004.

Progress

The Probation service are chairing the Multidisciplinary Group on Sex Offenders, which is one of the thematic subgroups of the Care and Case Management Strategy.

S.6 – The Homeless Persons Unit and Dún Laoghaire – Rathdown County Council will review and expand the clinic hours of the Homeless Persons Unit project

Progress

Twice weekly clinics are in place, satisfactory to meet demand but will be kept under review.

S.7 – The Homeless Persons Unit will provide regular referral and placement services in local areas to be rolled out over 2007. People experiencing homelessness will be able to access their local Community Welfare Officer

Progress

Action is underway with a revised schedule. The Homeless Persons Unit provide a weekly service in Dún Laoghaire – Rathdown, as well as a prison in-reach service. Further localised services are under consideration. The Homeless Persons Unit will be included in the evaluation of homeless services in 2008.

S.8 – Homeless Persons Unit and Homeless Agency will review the operation of the Homeless Persons Unit 'housing first' approach of providing households with rent deposits as an immediate response to presentation as homeless. This review will examine long-term outcomes and will seek the expansion or enhancement of this policy if it is successful.

Progress

Action is underway with a revised schedule. The Homeless Persons Unit will come under the Evaluation of Homeless Services in 2008, which will address the question raised by this action.

S.9 – Homeless Persons Unit, Asylum Seekers Unit and the Homeless Agency will review the accessibility of services to non-English speakers.

Progress

In 2007 research was carried out by Merchants Quay Ireland on behalf of the Homeless Agency to examine the use of homeless services by EU 10 migrants. In addition, the project set out to profile the target group along with an examination of key issues arising in the context of their use of homeless services. The research focused on a broad range of areas including housing status, language abilities, work status, service use and service need. Barriers experienced by service providers in the provision of services to this group were also explored.

Follow up research to this will take place in 2008 looking at the needs of all migrants.

S.10 – Homeless Services will assess all long-term residents in emergency and transitional accommodation by end 2007, with care plans to be put in as well. This work will be linked with the settlement and tenancy sustainment strategy for Dublin.

Progress

This was being reviewed at the end of 2007.

S.11 – The Homeless Agency Partnership will improve the quality of services through;

- a. Continued development and implementation of quality standards in specialist homeless service provision (minimum, good and best practice) and in facility management
- b. Compliance with relevant legislation including; health and safety, fire safety and Disability Act 2005
- c. Recommending the licensing and regular inspections of homeless services (e.g. through the office of the Inspector of Social Services)
- d. Continued implementation of service level agreements and service evaluations
- e. Implementation of the findings and recommendations from the Homeless Agency's *Review of Funding*

Progress

The evaluations of both transitional and emergency services took place in 2007 with recommendations on improving quality standards being made with each service provider as well as over arching recommendations, which are aimed at improving quality standards across homeless services. The overarching reports and the Homeless Agency response to the Evaluations *Pathways to Home* was officially launched in December 2007. Details of *Pathways to Home* are included in earlier section in Homeless Agency Highlights from 2007.

S.12 – The Homeless Agency partnership will agree reconfiguration of emergency and transitional services on the basis of findings and recommendations from the evaluations. This will also take account of the provision of drug and alcohol free environments and high tolerance and harm reduction services to prevent further homelessness.

Progress

The action is underway as per *A Key to the Door's* schedule.

The evaluations of emergency and transitional accommodation have highlighted the specific requirements for reconfiguration in these areas. This will be progressed as part of the Review of Funding and the revised role of the Funding Assessment Panel.

S.13 – The Homeless Agency will monitor introduction of service user charges, where they have been introduced in temporary and private temporary accommodation.

Progress

Action is underway with a revised schedule and information will be incorporated into the *Review of Funding* in 2008.

S.14 – The four Dublin local authorities will clarify and coordinate a shared definition of homelessness, in consultation with voluntary service providers and the Health Service Executive, including consideration of issues relevant to domestic violence, in relation to the policy and practice relevant to applications from homeless persons for priority on local authority housing lists.

Progress

A scoping exercise has taken place to clarify each local authority's current procedures. This part of the action is related to work progressing under Action S 4.

The Homeless Agency will seek the views of NGO's through the Health Service Executive –led Eastern Region on Preventing Violence Against Women Group.

The Dublin ETHOS Research Project will examine domestic violence as one of the risk factors that can lead to homelessness.

S.15 – The Homeless Agency Partnership will work with mainstream and specialist homeless services to identify and remove persistent barriers to accessing mainstream and specialist services including;

- Barriers to people at risk of homelessness
- Barriers to people currently experiencing homelessness, including those from EU10 and other states
- Barriers to individuals and families moving out of homelessness

Progress

Barriers to people at risk of homelessness are tackled by the Care and Case Management steering group, through the sub group on the continuum of care models.

This action is underway through the completion of research undertaken by Merchants Quay Ireland on behalf of the Homeless Agency as per S.9

The work by local homeless forums on prevention is important with respect to barriers to people at risk of homelessness.

S.16 – The Homeless Agency Partnership will ensure that all homeless services are accessible to people regardless of their ethnic origin and it will develop information initiatives to ensure that people from new communities to Ireland and ethnic minorities are aware of homeless services.

Progress

The Homeless Agency Learning and Performance programme provided training modules in respect of these areas.

Further information will be gained from the study to be carried out by Merchant's Quay Ireland in 2008 as per S.9.

S.17 – The Homeless Agency will develop training in intercultural and anti discrimination practices and human rights based approaches, as part of the Learning and Performance Programme.

Progress

The Homeless Agency Learning and Performance programme provides training modules in respect of these areas.

S.18 – The Health Service Executive is currently developing an intercultural strategy to ensure equality of access to all health services regardless of ethnic or cultural background. The Homeless Agency will feed into the development of the Strategy and ensure that homeless services are supported in its implementation.

Progress

The National Intercultural Health Strategy was completed in 2007 and was due to be launched in February 2008. Recognition of the distinct health and care needs of service users from diverse cultures and ethnic backgrounds, coupled with the transformation agenda of the Health Service Executive, resulted in the development of a National Intercultural Strategy, which aims to provide a comprehensive framework within which these care and support needs may be effectively addressed.

S.19 – The four Dublin local authorities and Health Service Executive will agree a plan for the implementation of the review of women's refuge services in local areas.

Progress

Meetings took place with the Health Service Executive and the four Dublin local authorities in November, where it was agreed to identify those, which require funding and also projects that would be completed in 2009. It was agreed that no new capital developments would be undertaken.

S.20 – The Homeless Agency Partnership will coordinate its research efforts in 2007-2010 to include a longitudinal study on pathways into and out of homelessness; including housing, healthcare and other relevant responses to homelessness and preventative and interventionist strategies. All work will take account of evidence based practice will build on that already completed under the Homeless Agency Action Plan, including a longitudinal study underway on young people who become homeless and the research being undertaken by the National Council on Ageing and Older People.

Progress

Phase 2 of the longitudinal research into youth homelessness has been carried out by Trinity Research Centre and final recommendations are due for completion in early 2008.

The research aims to generate an in-depth understanding of the process of youth homelessness, with a particular focus on trajectories into, through and out of homelessness. The study set out to document, record and understand changes in homeless young people's living situations and to capture change in their homeless experience over time. A qualitative longitudinal study was designed and the research was conducted in two waves: the first between September 2004 and January 2005 and the second between September 2005 and August 2006. During the first wave of data collection (Phase 1) life history interviews were conducted with 40 homeless young people. Contact was re-established with 32 of these young people during the second wave of the study (Phase 11) and information regarding living situations was collected on an additional five people. Information was therefore, available to the research team on 37 of the 40 people interviewed during Phase 1 of these, a total of 30 of young people were re-interviewed during Phase 11 data collection.

Phase 2 of the longitudinal research will be available in 2008.

S.21 – The Health Service Executive will implement actions 44 and 48 from the National Drugs Strategy:

Action 44

To have immediate access for drug misusers to professional assessment and counselling by health services, followed by commencement of treatment as deemed appropriate not later than one month after assessment.

Action 48

To have in place, in each local area health office, a range of treatment and rehabilitation options as part of a planned programme of progression for each drug misuser, by end 2002. This approach will provide a series of options for the drug misuser, appropriate to his/her needs and circumstances and should assist in their reintegration back into society

Progress

In relation to action 48 a range of residential, day treatment and rehabilitation programmes are provided either directly by the Health Service Executive or through grant aid to NGO's. Staff are receiving intensive training to deal with the problems of cocaine use.

S.22 – The Health Service Executive will continue a primary healthcare approach through the existing specialist multi-disciplinary health-link teams and the new primary care teams as they are established over the coming years. The Social Inclusion section of the Health Service Executive will work with the national steering group and the local co-ordinators for the Primary Care Teams to ensure that issues of access to services by homeless people are addressed.

Progress

A process has been put in place to ensure the needs of all socially excluded groups, including homeless people, are fully taken into account in the rollout of the Primary Care Teams. The specialist teams will continue their work and will be integrated into Primary Care Teams and Networks. Work continues on this process.

S.23 – The Health Service Executive will continue a primary healthcare approach through the existing specialist multi-disciplinary health-link teams and the new primary care teams as they are established over the coming years. The social inclusion section of the Homeless Persons Unit will work with the national steering group and the local coordinators for the primary care teams to ensure that issues of access to services by homeless people are addressed.

Progress

A process has been put in place to ensure the needs of all socially excluded groups including homeless people, are fully taken into account in the roll-out of the primary care teams. The specialist teams will continue their work and will be integrated into primary care teams and networks.

S.24 – The Health Service Executive will continue the specialist dental service.

Progress

Dental consultations and full dental treatment for homeless people continued to be available in 2007 in the Cornmarket Dental Clinic. Dental service was also available at Primary Health Unit, Open Access, Merchants Quay.

S.25 – The Health Service Executive and National Drugs Strategy Team (with the Department of the Community, Rural and Gaeltacht Affairs) will develop a national plan for the expansion of detox and rehabilitation services for active drug users.

Progress

The report of the Working Group on Residential Rehabilitation has been finalised and accepted by the National Drugs and Alcohol group and is currently before the National Social Inclusion Committee.

S.26 – The Health Service Executive is currently implementing recommendation 15.2.5 in *A Vision for Change*, which outlines the community mental health team with responsibility and accountability for the homeless population in each catchment area should be clearly identified. Two multi-disciplinary community based mental health teams should be provided, one in North Dublin and one in South Dublin, to provide a mental health service to the homeless population" The teams will be resourced with a crisis house and accommodation in a community mental health centre, and will be provided with day centres/hospitals as required. Note: the area covered by these North Dublin and South Dublin services cover the local authority areas of Dublin City, Fingal and South Dublin.

Progress

New community mental health teams were being put in place in 2007. All community mental health teams would have responsibility for homeless people in their area. A community based multi disciplinary mental health team for homeless people was established for the south of Dublin city. Approval has been secured for a consultant post for the North City from Comhairle na nOispideal. Discussions were taking place within mental health services on the northside as to how to implement this recommendation, the outcome of this was yet to be decided by the end of 2007.

The recruitment of all development posts in 2007 was hampered by the Health Service Executive pause on recruitment. Clarification as to whether these posts will be recruited in 2008 will not be known before May 2008.

S.27 – The Health Service Executive will continue to ensure access to appropriate mental health services for people experiencing homelessness in the Dún Laoghaire –Rathdown area. However the lack of an outreach service needs to be addressed.

Progress

People who are homeless in Dún Laoghaire are receiving mental health services within the local area.

S.28 – The Health Service Executive will implement its plans to provide respite beds for people who are homeless to prevent inappropriate use of Accident and Emergency services as well as to support people to recuperate following acute hospital stay.

Progress

Proposals to provide respite beds are at an advanced stage however developments had not proceeded due to the breakeven plan and constraints on development funding.

S.29 – The Health Service Executive will review the resources for the coordination of social inclusion in the Dublin Mid Leinster Health Service Executive area to ensure that the available resources will adequately support the localisation of homeless services in the four Dublin local authority areas.

Progress

The Health Service Executive Dublin Mid Leinster area continued to work closely with the four Dublin local authorities and the Homeless Agency to ensure that needs are continuing to be met within the allocation of resources.

S.30 – The four Dublin local authorities will continue to provide ongoing administrative support to their local area homeless forum(s). In the case of Dublin City Council, initiatives from the each of the five Dublin City local area forums will be agreed and signed off as part of one over-arching plan for Dublin City.

Progress

The local area forums continued to develop and put into operation local area implementation plans in 2007, in consultation with the four Dublin local authorities, Health Service Executive and the voluntary sector.

S.31 – Dublin City (Central, South Central and South East) will develop an initiative to identify any gaps in the current provision of day and outreach services to people experiencing homelessness who congregate in the city centre through the implementation of the findings from the Rapid Needs Assessment.

Progress

The Homeless Agency convened a high level working group to address the needs of hard to reach drug and alcohol users experiencing homelessness. The group identified the need for enhanced service provision through the development of a day- time service to support the social and health needs of those congregating in the city centre. This service was due to come into operation in 2008.

S.32 – Dublin City (North Central) will develop long-term supported housing, integrated with mental health and support services.

Progress

Meetings have taken place with Dublin City Council Housing Development with a view to accessing Part V properties for this purpose.

S.33 – Dublin City (North West) will carry out a feasibility study to ensure access to local services in Finglas rather than those in the city centre, and implement its findings.

Progress

A local area study is taking place in Finglas, which deploys methodology that will help inform the Homeless Agency on the development of ETHOS.

S.34 – Dublin City (North West) to support the work commissioned by the Ballymun Homeless Forum aimed at developing a suitable model to meet the local accommodation and holistic care needs of those experiencing homelessness. Dublin City (North West) to support the early implementation of recommended actions and to implement this model through location of sites, securing funding routes and channels and commitment from key stakeholders.

Progress

Ballymun Action Research was completed and approved in 2007, recommendations were to be implemented over a 12-month period. Dublin City Council have committed to providing a dedicated co-ordinator to oversee the implementation phase.

S.35 – Dublin City (North West) (with Depaul Trust) will continue the alcohol outreach service in Ballymun and will evaluate this service.

Progress

The evaluation report for the pilot period was completed and a report was launched in November 07.

Depaul Trust have received confirmation of funding to continue with this service into 2008

S.36 – Dublin City (South Central) will carry out a feasibility study to ensure access to local services in Ballyfermot rather than those in the city centre, and implement findings.

Progress

This needs to be progressed.

S.37 – Dún Laoghaire-Rathdown County Council (with the Health Service Executive and Crosscare) will continue West Pier Project for Travellers with high support needs.

Progress

The level of support has improved considerably and caravans have been removed.

S.38 – Dún Laoghaire- Rathdown County Council (with the Vocational Education Committee) will undertake research into the education needs of homeless adults and implement the findings.

Progress

Following on from the *Integrated Strategy on Homelessness 2000* and subsequently the *Homelessness Preventative Strategy 2002* and after consultations with stakeholders in the Dún Laoghaire- Rathdown area over a period of time in April 2006, Dún Laoghaire VEC conducted a needs assessment amongst the homeless population and service providers in the area. This needs assessment was in the form of a piece of qualitative research whereby approximately 30 service users and providers as well as other stakeholders were interviewed.

Subsequently a feasibility study was carried out which noted that homeless adults were keen to participate in education programmes that were specifically tailored for their needs. A six week pilot programme was then put in place. This pilot proved successful and in January 2007 a full time Outreach Worker was employed to coordinate this programme

S.39 – Dún Laoghaire –Rathdown County Council (with the Health Service Executive) will perform a needs/feasibility study on the need for a women's refuge, and implement the findings.

Progress

Sonass Housing Association, a member of the Refuge Development Committee, is undertaking a needs/feasibility study to assess the need for a refuge in the Dun Laoghaire-Rathdown County Council area.

S.40 – Dún Laoghaire – Rathdown County Council are investigating the need for services.

Progress

Dún Laoghaire – Rathdown County Council are linked in with the Local Drugs Task Force in addition to the Dún Laoghaire - Rathdown Community Addiction Team. Dun Laoghaire-Rathdown County Council are examining this.

S.41 – Fingal County Council will pilot local placements in one of the private emergency accommodation services in the area, and implement the findings of this pilot study.

Progress

This needs to be progressed.

S.42 – Fingal County Council (with the Health Service Executive) to support and fund the development of women's refuge in Blanchardstown

Progress

Funding was secured for the development of this refuge in late 2007. Construction is due to commence in early 2008 and is expected to be completed in early Summer 2009.

S.43 – Fingal County Council (with Threshold) will provide a weekly local information and advice clinic.

Progress

Threshold assisted 112 clients through the Blanchardstown clinic in 2007. The clinic is held every Tuesday afternoon in the offices of Fingal County Council in Blanchardstown.

S.44 – Fingal County Council (with BOND) will relocate the premise of BONDS transitional housing facility.

Progress

Alternative temporary premises have been provided for BOND for the duration of refurbishment works. Refurbishment works were due to commence at the end of 2007.

S.45 – South Dublin County Council will provide a 10/12 bed emergency assessment accommodation as part of the Respond/ St. John of God development in Tallaght by end 2009.

Progress

Funding approval for the project was received from the Department of the Environment, Heritage and Local Government. Land acquisition to be finalised by Respond. Work projected to commence in early 2008.

S.46 – South Dublin County Council will provide an emergency assessment accommodation in Clondalkin by end 2007/early 2008.

Progress

At the end of 2007 a property had been acquired by South Dublin County Council in Clondalkin with a view to using it as an emergency accommodation facility.

Strategic Aim 3 – Provide sufficient long-term housing, with appropriate supports as required, for people who are homeless, especially single person households.

In order to achieve our Vision, it is necessary to ascertain how many additional housing units will be needed by 2010. Based on existing trends, it is estimated that between 2006 and 2008, an estimated total of 6,150 homeless households will require housing.

The success or failure of the Homeless Agency Partnership Action Plan is dependent on a dramatic increase over the next three years of secure and sustainable housing for people who are homeless.

It is important to recognise that the vast majority of homeless households are single person households. There needs to be awareness among social housing providers that a proportion of social housing must be provided for single person households whose support needs are such that they are incapable of maintaining tenancies in the private rented sector.

Core Action 7.

Local authorities and housing associations to provide social rented housing to homeless households.

Progress

In 2007 this action was continuous with the four Dublin local authorities working to provide social housing, in total 241 houses were provided to people on the homeless priority list.

Core Action 8.

Identify and advocate for the removal of barriers preventing access to private rented accommodation

Progress

Meeting convened with Homeless Persons Unit and Local Government to develop a common definition of homelessness.

The Homeless Persons Unit will be evaluated as part of the Pathways Evaluations in 2008.

Core Action 9.

Maximise housing provision for people and households through the Rental Accommodation Scheme

Progress

There are three rental accommodation pilot projects in progress, these include Direct Service Provision with Dublin City Council and also in conjunction with Focus Ireland and Threshold.

Core Action 10.

Evaluate and review existing models of long-term housing supports and seek appropriate revenue funding streams for the implementation of best practice in this area for people who have been homeless

Progress

Initial work has taken place on this action, which will be developed taking into consideration the outcomes from the Pathways Evaluation of Settlement and Tenancy Sustainment services in 2008.

H1. - The Homeless Agency will conduct research into the number and type and housing units required in order to achieve the Vision by 2010 and move all people experiencing long-term homelessness into appropriate long-term housing with whatever supports they need to maintain their homes. A steering group involving the local authorities and the voluntary sector will oversee this work. This research will be completed by the end of 2007, and will be submitted to the four Dublin local authorities for consideration as part of development of their Social and Affordable Housing Action Plans (2009-2012).

Progress

A rough sleeper count took place on the night of November 20th 2007 between 1.30am to 5am throughout the five functional areas of Dublin City Council, helping to determine the number of people who were sleeping rough in Dublin and putting in place a systematic response mechanism to address their needs.

A total of 140 volunteers including experienced outreach team members took part in the count with the gardai providing local support for teams on the ground. Two/three person teams were formed to survey approximately sixty divisions of the Dublin area.

ETHOS has been developing a definition of Homelessness and Housing Exclusion. This has been developed as a result of recommendations made by the Social Protection Committee that “as a matter of urgency the [European] Commission should examine different approaches to the definition and measurement of homelessness and precarious housing in a comparable way across member states and see whether a Level 1 indicator can be developed for use in the EU monitoring process”.

The European Observatory on Homelessness and the FEANTSA Working Group on DATA Collection and Homeless Statistics have been working over a number of years to develop a conceptual and operational definition of homelessness. It is the intention that homelessness and the broader definition of housing exclusion can be counted and the gaps in the existing data collection can be identified.

H2. - The Homeless Agency Partnership will actively support the development and implementation of multi-agency policies and protocols on sex offenders who are homeless.

Progress

The Multi Agency Group on sex offenders continued to meet in 2007. The group is part of the wider Care and Case Management Initiative and is constituted as a thematic subgroup.

H4. - The Homeless Agency Partnership will support proposals from partners, in particular the Irish Council for Social Housing, that aim to rationalise the housing association development process.

Progress

The Minister for Housing, Urban Renewal and Developing Areas, in October 2007 noted that housing association capital funding arrangements would be able to receive 100% capital funding for new housing projects for people who are homeless after November 2007, this has been adjusted from 95% of the capital cost.

H5. - The Homeless Agency Partnership will consider and support appropriate proposals to resolve the difficulties social housing providers (especially housing associations) face in financing service charges paid by tenants in apartment blocks.

Progress

This action is delayed.

H7. - Dublin City Council and Dún Laoghaire- Rathdown County Council will each allocate social housing with transitional support for the variety of target groups identified, based on best practice identified by the Homeless Agency Partnership. (The existing models of transitional support operated by Sophia Housing in Ballymun and Fingal will be included as part of the review of best practice.)

Progress

The work of Dublin City Council and Dún Laoghaire-Rathdown County Council is ongoing in relation to this action.

H8. - Fingal County Council (with housing associations) will continue to develop integrated housing both through local authority allocations and housing association schemes. Fingal will work with the Health Service Executive to ensure that specific supports are provided, which target the mental health, addiction and dual diagnosis needs of people experiencing homelessness.

Progress

The work of Fingal County Council is ongoing in relation to this action.

H9. - South Dublin County Council (with Focus Ireland) will provide a new long-term housing development with transitional support (based on best practice identified by the Homeless Agency Partnership) as required.

Progress

Prospective tenants were chosen and the occupation of the accommodation commenced in December 2007.

H10. - Fingal County Council (with Sophia Housing) will review the transitional service provided in Donabate, based on best practice identified by the Homeless Agency Partnership.

Progress

Meetings were ongoing, there was no progress on this action at the end of 2007.

H11. - Fingal County Council (with Sophia Housing) will expand the current project of visiting transitional housing support in accordance with the presenting need.

Progress

The work of Fingal County Council is ongoing in relation to this action.

H13. - The four Dublin local authorities to continue to provide and/or support the provision of settlement services.

Progress

Dublin City Council and Dún Laoghaire – Rathdown County Council provide settlement services on an ongoing basis.





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