



shaping the future

an action plan on homelessness in Dublin 2001–2003

**HOME
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agency

shaping the future

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contents

Foreword		i
Acknowledgements		ii
Executive summary		1
Introduction		3
Homelessness in Dublin: context and overview		5
section one	Vision, mission, and key strategic aims	11
section two	Continuum of care — the general approach	15
section three	Preventing and eliminating homelessness	29
section four	Improving access to advice, information and referral services	39
section five	Reducing street homelessness	45
section six	Developing the role of day and night centres	55
section seven	Improving emergency accommodation and addressing gaps in supply	59
section eight	Settling people in the community	71
section nine	Meeting needs for transitional housing	81
section ten	Increasing the extent and range of long term housing options	87
section eleven	Improving access to health and treatment services	103
section twelve	Improving social welfare and community welfare services	113
section thirteen	Improving access to education, training and job opportunities	121
section fourteen	The Homeless Agency — structure and role	127
section fifteen	A summary of costings	129
Appendix: Members of the Homeless Agency		131
Bibliography		133

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foreword

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Chair, Homeless Agency Board
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The sight of people sleeping in the door ways of our city stands as a stark reminder that the country's current buoyant economy has not benefited all citizens. Homelessness is a persistent and growing problem in our capital, and a complex one. However, it is a problem which can be solved, given the right response.

It is the belief of agencies working with people who are homeless that the right response is one which is both comprehensive and coordinated; coordinated because no one agency can meet all the needs of people who are homeless or at risk of homelessness, but agencies working together, as part of an organised system, can; comprehensive because all the needs of people who are homeless need to be addressed. Providing emergency accommodation without providing long term housing for instance means that people become stuck in emergency accommodation. Providing housing without providing necessary supports means that people may fall into homelessness again.

This action plan shows that the agencies involved in delivering services to homeless people in Dublin are serious about tackling homelessness in a coordinated and comprehensive way. We have already come together to agree the action plan. Many measures in this plan will continue and develop the valuable work which has been going on for many years, particularly by voluntary organisations. Others will require changes in the way services have been delivered, to ensure that they are effective in assisting people to move from homelessness. In the long term we can only make a lasting difference to homelessness by ensuring that few people become homeless in the first place and that those that do are quickly and appropriately rehoused, along with necessary supports. For this reason, prevention is a key part of this action plan.

The plan sets out tough challenges for central government agencies, for local authorities, health boards and voluntary organisations. I believe that this action plan sets out a way forward which can deliver our vision of a Dublin where no one needs to sleep in door ways and where rough sleeping has become a thing of the past.

acknowledgements

This report is the culmination of a long process in which many people were involved. The Homeless Agency wishes to acknowledge the generous and invaluable input of voluntary and statutory service providers who participated in the consultative seminars and made written submissions. Thanks are also due to the members of the Homeless Initiative Consultative Board and to the members of the Board of the Homeless Agency for their support and guidance, and to Simon Brooke for preparing a short version of the plan.

Finally grateful thanks to the members of the working group who proposed, composed, drafted and commented on drafts. They are: Frank Mills, Hugh Kane, *Eastern Health Board*; Declan Wallace, Frank Goodwin, *Dublin Corporation*; Jim Carson representing Fingal, South Dublin and Dun Laoghaire Rathdown County Councils; Orla Barry, *Focus Ireland*; Greg Maxwell, *Dublin Simon*; Dermot Kavanagh, *Merchants Quay Ireland*; Nicola Davis, Mary Higgins, *Homeless Initiative* and Roger Courtney, independent expert. The action plan was written by Mary Higgins.

executive summary

This action plan on homelessness in Dublin 2001–2003 has been produced on behalf of the four Dublin local authorities, in fulfillment of the requirement by the government in *Homelessness — An Integrated Strategy* that each local authority produce a three year action plan in order to formulate ‘coherent, comprehensive and effective response to homelessness’. The plan relates to the needs of adults who are homeless. The needs of young people who are homeless will be addressed through a separate plan to be drawn up by the Eastern Region Health Authority and which will be integrated with this.

The action plan has been based on available research and on consultation with voluntary and statutory agencies providing services to people who are homeless in Dublin. It has wide support and commitment from these services and has been adopted by the Dublin city and county councils and the Eastern Region Health Authority. The plan is ambitious, envisaging the elimination of long term homelessness and rough sleeping by the end of this decade. This plan will lay the ground for the achievement of this long term aim which will be built on by subsequent plans.

Homelessness in Dublin is a persistent problem and one which has grown in recent years, with higher levels of families, young people and rough sleepers. There are many reasons why people become homeless, but the underlying cause is usually poverty, combined with a personal crisis such as family breakdown or eviction. Once someone is homeless the lack of appropriate services or housing options can serve to keep them homeless. For instance many people who sleep on the street do so because the services available are not appropriate to their needs — they may be too young for some services, they may be barred because of drug or alcohol use or they may not like the kind of services on offer, many of which are restrictive in terms of rules and regulations. Services for people are provided by different voluntary and statutory agencies, with no overall coordination. As a result, there has been no systematic or integrated response and people must go from one agency to another in order to access different services. Furthermore, there has been no emphasis on getting people out of homelessness and many people are homeless on a long term basis.

A shortage of housing contributes to people remaining homeless for long periods of time and many hostels are full with people who have no viable housing options. This is particularly true of single people who have no entitlement to local authority housing and find it difficult to compete for private rented housing. A minority of people who become homeless have chronic disabilities such as mental ill health which make it difficult for them to manage on their own, and in the absence of other alternatives, they remain homeless. The longer someone is homeless the more difficult it is for them to get back to mainstream society. On the street, they can quickly become involved in a street life style, in hostels they can become dependent and institutionalised.

This action plan aims to address these issues. It sets out a range of measures including the establishment of a new agency to manage and coordinate services to people who are homeless in Dublin. It also provides for a radical new approach to the delivery of services to people who are homeless. This new approach which is based on the principle of continuum of care will ensure that all the needs of people who are homeless are met in an integrated way and in a way that ensures that they move from homelessness into long term housing.

Improving the access of people who are homeless to advice, information, referral and early intervention services is an important component of the plan and this will be achieved through the establishment of a twenty four hour free phone services and the development of multiple access points through out the area.

The provision of an adequate supply of housing is the key to addressing homelessness and the plan provides for additional 1500 units of long term housing. Support services will be provided as necessary to enable people to live independently.

Rough sleeping will be reduced by two thirds by 2003, through the provision of specialist emergency and other accommodation, by making existing accommodation more responsive to the needs of people who sleep rough and by improving street outreach services.

Achieving the aims in the plan will require changes in the way services are delivered and the plan emphasises the role of training and support to agencies in achieving high quality services which meet the needs of people who are homeless. Because no one agency can meet the all the needs of someone who is homeless, the plan is centred on the development of partnership working, both within the homeless sector and with other relevant bodies, including statutory agencies, local community groups and the business sector.

About three quarters of all people who are homeless are in Ireland are in the Dublin area, 95% of them in Dublin city. This is because there are no services in areas outside of the city. The plan will aim to address this issue by developing responses in local areas within and outside the city area. The lack of available and consistent information on homelessness is an impediment to the development of effective responses and the plan will ensure that research and information collection occurs on an ongoing basis.

In the long term, addressing homelessness requires the development of measures to stop people from becoming homeless in the first place and prevention is another key area of the plan. The policies and programmes of state institutions will be homeless proofed to ensure that they do not contribute to or exacerbate homelessness and programmes to identify and support groups who may be at risk of becoming homeless will be developed.

Meeting the aims of this action plan presents tough challenges to a range of agencies, both voluntary and statutory at both local and central level. The plan provides a framework for meeting these aims and ensuring that the vision of a Dublin where rough sleeping is a thing of the past can be achieved.

Background

Shaping the Future was produced by the Homeless Initiative, on behalf of the four Dublin local authorities, in fulfillment of the requirement by the government, in *Homelessness — An Integrated Strategy* that each local authority produce a three year action plan for the delivery of all services to people who are homeless, in order to formulate a ‘coherent, comprehensive and effective response to homelessness...’.

The government strategy requires that plans should be drawn up through a process of consultation and partnership between voluntary and statutory agencies and guided by the following principles:

- A continuum of care from the time someone becomes homeless, with sheltered and supported accommodation, and where appropriate, assistance back into independent living in the community
- Emergency accommodation should be short term
- Settlement in the community to be an overriding priority through independent or supported housing
- Long term supported accommodation should be available for those who need it
- Support services should be provided on an outreach basis as needed
- Preventative strategies for at risk groups should be developed

The measures in the plan are based on the best available information about homelessness in Dublin. This includes information gathered by the Homeless Initiative over the last four years; through formal research and contact with homeless service providers; other research and local area plans, which were agreed by working groups in the Dun Laoghaire/Rathdown, Fingal and South Dublin county council areas. The local area plans have been incorporated into the regional plan.

A process of consultation with front line workers and managers of services to people who are homeless in Dublin has also informed the plan. Three consultative seminars were held between June and December 2000 and written

submissions received about priorities for the plan. A representative working group prepared several drafts of the plan, which were adjusted on the basis of feedback received. This process has ensured commitment from service providers to the plan and that the measures in the plan are based on real needs.

The plan was approved by the constituent groups of the Homeless Initiative and subsequently by the Homeless Agency. The Agency was established, as part of the government strategy, to lead the implementation of the action plan and to manage the delivery of services to people who are homeless in Dublin. The action plan has also been adopted by the local authority Strategic Policy Committees and city and county councils, as well as the board of the Eastern Region Health Authority.

The Homeless Initiative was established in October 1996 to improve the coordination and delivery of services to homeless people in the then Eastern Health Board area; to develop a framework within which services to people who are homeless would be planned, coordinated and monitored and to develop responses to enable people to settle out of homelessness. It operated under the joint direction of Dublin Corporation and the Eastern Health Board. The Homeless Initiative has been replaced by the Homeless Agency.

The Homeless Agency is responsible for the management and coordination of services to people who are homeless in the Dublin area and for the development of policies and responses which will prevent people from becoming homeless. It operates under the direction of a Board comprising representatives, at senior management level, of the four Dublin local authorities, the Eastern Region Health Authority, the Northern Area Health Board (currently representing the three health boards), FAS, VEC, Probation and Welfare Services and voluntary organisations. The chair of the Agency Consultative Forum is also a member of the Board.

Document Structure

The plan is comprehensive, dealing with the range of policies and services which impact on people who are homeless or at risk of homelessness. It is divided into a number of sections, each one dealing with a different aspect of homelessness, although all areas are interrelated and the plan must be seen as a whole. Sections two to thirteen comprise the body of the plan. Each section sets out an overall aim, a context for the aim, objectives and supporting actions to achieve the aim and performance indicators. Section fourteen describes the role and structure of the Homeless Agency and section fifteen a summary of the costs of the plan.

Section one describes the long term vision for homelessness in Dublin and sets out the values and principles which have informed the plan, as well as key assumptions, strategic aims and performance indicators.

‘Homelessness in Dublin: Context and Overview’ provides a context for the plan, giving an overview of homelessness in Dublin, describing the policy context, the nature and extent of homelessness and causes of homelessness. It goes on to describe services for people who are homeless, including problems and gaps in the services and progress made in addressing them.

homelessness in Dublin

context and overview

Introduction

This section aims to set the scene for the action plan. It begins by describing the current policy context. It then discusses the nature and extent of homelessness in Dublin and the factors which put people at risk of becoming homeless. There follows a description of services currently available to homeless people, including developments which have occurred in recent times and a discussion of the problems and gaps remaining to be addressed.

Policy context

The last decade or so has seen a generally increased awareness of homelessness in Ireland, accompanied by a greater political and public commitment to tackling it. Programmes for government usually contain reference to dealing with homelessness. There have also been a number of legislative and policy responses, the most significant being the Housing Act, 1988 which, for the first time in Irish legislation, defined homelessness. The Act also identified local authorities as the bodies responsible for homeless people and expanded their powers and responsibilities in responding to the needs of homeless people. More recently, the responsibility and accountability of health boards in respect of homeless young people has been strengthened under the Child Care Act, 1991. Building on the 1988 legislation, homelessness has featured as an important target of policies on social housing issued by the Department of the Environment in 1991 (Plan for Social Housing) and 1995 (Social Housing: The Way Ahead) and which have provided opportunities for tackling homelessness.

In spite of the increased awareness of homelessness and legislative and policy developments in relation to it, there has been a general failure by policy makers and others to make the connections between homelessness and the wider world of social policy, poverty and social exclusion. Homelessness has continued to be regarded as something apart — much like homeless people themselves — and responses have tended to be ‘special’ and separate, rather than mainstream, with little focus on developing an understanding of the problem or how to prevent it. Within this policy context local authorities have had difficulty in developing responses which will

address the needs of homeless people effectively and the implementation of the 1988 Housing Act and subsequent policies have had only limited impact.

One attempt to address this problem, in the Dublin area, has been the establishment of the Homeless Initiative. The Initiative was established for an initial period of three years at the end of 1996. Its purpose was to develop an effective partnership between the voluntary and statutory agencies delivering services to people who are homeless in Dublin, Kildare and Wicklow and to put in place an effective framework within which services would be planned, coordinated and monitored. The Initiative has been effective in improving relations between agencies, identifying and filling some gaps in services, filling gaps in information and research, in facilitating the development of innovative responses to homelessness and in informing the government strategy on homelessness. The Initiative was extended for a further year at the end of 1999, to allow proposals for the framework to be put in place, and was replaced in January 2001 by the Homeless Agency which has overarching responsibility for the management and coordination of responses to homelessness in the Dublin area.

Homelessness — An Integrated Strategy signals a significant shift in government policy on homelessness and represents a unique opportunity to deal with homelessness. As well as recognising the need for a holistic and integrated approach to the delivery of services to homeless people, the strategy is clearly located in the wider poverty and social inclusion agenda. It is specific about what is required of local authorities, health boards and voluntary bodies and it recognises the need to develop settlement, rather than emergency accommodation, as the appropriate response to homelessness.

The nature and extent of homelessness in Dublin

There has never been any systematic gathering of information on the numbers of people who are homeless in Ireland, who they are or why they have become homeless. Most research on the subject has been carried out by voluntary organisations although, in recent years, a substantial body of research by official bodies, notably the (then) Eastern Health Board and the Homeless Initiative, has been carried out, in order to inform the development of more effective responses to homeless people. Various sources of information indicate that there are two broad categories of homeless people:

- those for whom poverty, combined with crisis, has precipitated homelessness (e.g. relationship breakdown, eviction) and
- those who have chronic disabilities (e.g. mental illness, alcohol dependence).

The increase in homelessness in recent years is connected with a range of issues. The cut back in community care and other public services during the 1980s has left a number of people vulnerable to becoming homeless. Similarly, the policy of care in the community for people in psychiatric institutions, implemented at the same time, failed to make adequate provision for support services and many of those people have since become homeless. Increasing levels of domestic violence and family breakdown has led to increased levels of homelessness among families and among men who have been barred from the family home. More recently, local community action against drug dealers and users has led to increased homelessness among this group.

The current shortage in housing available to low income households has left many more people vulnerable to becoming homeless. The economic boom and consequent migration into Dublin has put private rented housing out of the

reach of many low income households. Public housing is also in short supply and, in any case, does not cater to the needs of single person households, who comprise the majority of people who are homeless.

Under the Housing Act, 1988, local authorities are obliged to make periodic assessments of the extent of homelessness in their areas. The most recent national assessment of homelessness undertaken in 1999 indicates that 75% of homeless people live in the Eastern Region area. The report of the assessment, *Counted In* was carried out by the ESRI, on behalf of the Homeless Initiative. Based on a survey of homeless people over the period of one week it represents the most comprehensive official assessment to date.

Counted In identified 2,900 adults who fell into two distinct groups. One group (1,550) was registered as homeless with a local authority but did not have contact with homeless services during the week. This group was largely women with children typically staying with friends or family. The other group (1,350) were largely older men, staying in hostels, many of them for extended periods of time — half of them had been homeless for more than two years and over 400 for over five years. The assessment found that over 200 people were sleeping rough of whom one in five was aged under twenty (Williams and O'Connor, 1999).

The assessment confirmed the views of homeless service providers at the time that Dublin has a growing number of homeless people, that they are younger and there are proportionately more families and women (Street Counts, 1998, Audit of Services, 1999). In the time between the assessment and now, levels of homelessness have continued to grow, particularly among younger people and street sleepers.

By the nature of their lifestyles, homeless people are prone to health problems. A number of studies show that homeless people have high levels, relative to the rest of the population, of mental and physical ill health, depression, obesity, drug and alcohol problems, Hepatitis C and B and dental problems (Condon, 2000; Holohan, 1997; Feeney et al 2000). Homeless service providers estimate that 29% of people using services suffer alcohol dependence, 17% suffer poor physical health and 27% suffer poor mental health. Fifteen per cent are believed to suffer from other serious problems, the most common of which are the effects of social isolation and violence (McKeown & Hasse, 1999).

Understanding homelessness

An understanding of the causes of homelessness is crucial to developing effective responses to people who are homeless and to developing strategies which will prevent homelessness from occurring in the first place. While there is no universal consensus on why particular individuals and families become homeless there is an emerging convergence of opinion that it is likely to be due to the interaction of a range of factors, both personal and structural, which are examined here.

In the past, explanations for homelessness have tended to concentrate on it being an individual problem, due to personal difficulties and deficiencies. Now it is generally believed that structural issues such as poverty, unemployment and housing shortages cause homelessness. While these issues significantly affect the incidence of homelessness, not everyone who is unemployed or affected by poverty becomes homeless. Neither is the selection of who becomes homeless a random process, and there a number of characteristics in the backgrounds of homeless people which are commonly held. These have been identified in a range of research work, particularly in the UK (Anderson et al, 1993; Evans 1996; Randall and Brown, 1996; Randall and Brown, 1999) and have been usefully summarised as follows by Fitzpatrick and Klinker, 2000:

- physical or sexual abuse in childhood or adolescence
- family disputes or breakdown
- a background of institutional care
- offending behaviour and/or experience of prison
- previous service in the armed forces
- lack of a social support network
- debts, especially rent or mortgage arrears
- causing nuisance to neighbours
- drug or alcohol misuse
- school exclusion and lack of qualifications
- mental health problems
- poor physical health

In addition to these risk factors, there is a range of events or crisis points which can trigger homelessness including:

- leaving the parental home after arguments
- marital or relationship breakdown
- widowhood
- discharge from the armed forces
- leaving care
- leaving prison
- a sharp deterioration in mental health or an increase in alcohol or drug misuse
- a financial crisis of mounting debts
- eviction

Understanding these characteristics which place people at risk of homelessness and the events which might then trigger homelessness is vital in informing the development of services for homeless people and strategies to prevent homelessness. Clearly many people who become homeless will have a range of support needs, which must be addressed alongside their need for housing.

Service for people who are homeless — progress and problems

Progress

Over the last number of years, there have been many improvements in services for people who are homeless in Dublin. Arising from the legislative and policy developments referred to above, there have been a number of improvements in the quality and range of services to people who are homeless. Additional grants to voluntary bodies have enabled them to upgrade the physical condition of hostels and to develop additional transitional and permanent housing for homeless people. Street outreach, settlement, advice and information and day and night services have also been developed, with the assistance of grant aid through the Homeless Initiative. Dublin Corporation has also upgraded and increased the range of services it provides. These include emergency and long term supported accommodation and settlement services. Through the Homeless Initiative, services have come together to identify gaps in the range of services available and to agree ways of addressing them. Communication and coordination has improved as has information collection and research.

In spite of these improvements, there remain many deficiencies and gaps in the planning, development and delivery of services. Although these have now

been recognised and are in the process of being addressed, they continue to cause problems for people who are in need of services and, together with deficiencies in the mainstream system, serve to ensure that homelessness continues to grow. These are now discussed.

Problems

Mainstream Services

People who are homeless experience difficulty in accessing mainstream health, training, employment, social, support and other services, while they are homeless, before they become homeless and following homelessness. This fact is illustrated by the high level of people among the homeless population who are drug users, former prisoners, have poor physical and mental health, a history of institutional care and by the high levels of people who are long term homeless.

It is further illustrated by the high level of episodic homelessness, whereby people who do move out of homelessness into housing, subsequently return to being homeless. Tenancies are usually lost because people have difficulty in managing on their own. This is due in turn to the lack of support services available to them following settlement to assist them in managing their new lives.

In addition to difficulties in accessing mainstream services for people who are homeless, such services can also contribute to homelessness. The fact that the majority of people who are homeless are single men is clearly related to the fact that housing policies have not provided adequate responses to their needs. Homelessness is also prevalent among young people leaving institutional care and older people leaving prison or hospital, largely due to the fact there is no planned discharge. Policies and practices within local authorities, which lead to eviction also contribute to homelessness.

Mainstream services have a crucial role in helping people to move out of homelessness successfully and in preventing homelessness and it is important that these services are an integral part of any strategy to respond to the needs of homeless people.

Services for people who are homeless

An audit of services for homeless people was carried in 1997 on behalf of the Homeless Initiative (McKeown & Hasse, 1999). The audit found that there were 71 distinct services for homeless people in the Eastern Region area. The majority of services is provided by voluntary organisations and based in Dublin city. Almost half of the services provide emergency or transitional accommodation with the remainder providing food, advice, street outreach, medical, psychiatric and statutory housing or income maintenance services.

One thousand two hundred and eighty three people worked in the services, two thirds of them on a part time basis. Forty six percent of workers are volunteers, 37% are paid employees, 14% Community Employment Scheme workers and the remainder is a staff member of religious orders. Three out of four people providing services have no formal qualifications relevant to their work. The remainder have qualifications in community work, social work, counselling and psychology.

Centralisation

According to the 1999 assessment of homelessness, 95% of homeless people in the Dublin area are in the Dublin Corporation area, most of them in the city centre. Needless to say, all of these people are not originally from the Dublin city

area but come from other areas in Dublin, from other counties outside Dublin and from other countries. It is inevitable that a city centre will have higher levels of homelessness than suburban and rural areas and that it will be attractive to people from outside the city.

The situation in Dublin has been exacerbated both by the lack of services for homeless people outside the city centre and the practice of referring all homeless people to a central Homeless Persons Unit (HPU), operated by the Northern Area Health Board. The HPU provides income maintenance payments, under the Supplementary Welfare Allowance Scheme, to homeless people and referral to emergency accommodation and other services. The movement of people from their local communities into the city centre, away from family and other support networks, places additional stress on the families and individuals who become homeless. It also poses a significant risk, particularly for young and otherwise vulnerable people, who can quickly get caught up in a city street culture with its attendant dangers. It has also contributed towards the situation where local authorities and health boards outside of Dublin city provide virtually no direct services to homeless people.

Gaps in services and coordination

Current services for homeless people tend to be narrowly focused — on meeting the immediate needs of homeless people for food and shelter. There is little emphasis on linking people to appropriate services, reintegrating them into mainstream housing or preventing them from becoming homeless in the first place. This, together with the shortage of housing for people to move on to has resulted in some people living long term in hostels, effectively permanently socially excluded, and others spending extended periods in Bed and Breakfast and other temporary accommodation. While there are approximately 700 hostel beds for homeless people in Dublin, fewer than half are available for emergency use, the balance being occupied on a long term basis. At any one time there are between 500 and 600 households in Bed and Breakfast accommodation.

Traditionally, the homeless population has comprised largely single men and the provision of services reflects this. As the profile of homeless people has become more diverse, services have been slow to reflect this and there are a number of deficits in provision. Emergency accommodation and other support services for young people, families and women are severely under supplied. While there has been some improvement in the quality and range of services to homeless people in recent years, some homeless people still have nothing to do during the day time but walk the streets (Holohan, 1997).

In addition to the limited range of services, the lack of coordination and coherence between homeless services creates inefficiencies in the system and causes serious difficulties for homeless people who have to go from one agency to another in an effort to access the range of services necessary to address their needs.

It is this range of problems that this action plan has been devised to address. The ultimate aim is to ensure that homelessness is minimised and that when some one does become homeless that they have access to the range of services necessary to meet their needs and ensure that they can become settled and move out of homelessness.

Vision, mission, and key strategic aims

Introduction

This section sets out the long term vision for homelessness in Dublin which this plan will lay the ground for achieving. It also sets out the mission or purpose of the plan and the values and principles which underpin it. These are listed in order of importance. They are designed to influence the way in which the plan is implemented and will be taken into account in the evaluation of its implementation.

The section also sets out a number of key assumptions on which the plan is based. Key strategic aims and key performance indicators are also included, against which the plan will be measured.

1.1 Vision

By 2010 long term homelessness and the need for people to sleep rough will be eliminated in Dublin. The risk of a person or family becoming homeless will be minimal due to effective preventative policies and services. 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 as citizens.

1.2 Mission

The purpose of this action plan is three fold.

- to address the current gaps and deficiencies in services and accommodation, including long term housing, for people who are homeless in Dublin;
- to ensure that people who are homeless have access to the range of services necessary to reduce the length of time they spend homeless to an agreed minimum and that they are assisted to sustainable long term housing and independence
- to ensure that mainstream policies and services are focused on preventing people from becoming homeless.

1.3 Values and principles

A number of values and principles have informed the development of this plan, and will underpin its implementation. These are listed here in order of importance:

- Homelessness is solvable and preventable
- Homelessness has as much to do with social exclusion as with bricks and mortar
- Every household is entitled to a place they can call home which 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
- The skills, experience and expertise of people providing services to people who are homeless is valued and will be used to inform the planning and development of services
- People who are homeless should be involved in decisions which affect them
- Services should pose a continuing challenge to people to be as independent as possible

1.4 Key assumptions

The action plan has been based on the following key assumptions:

- That the stated commitment of government to tackling homelessness is genuine and will be supported by resources and relevant policy changes
- That all relevant actors will co-operate in the implementation of the action plan. These include voluntary and statutory services for people who are homeless, mainstream statutory services, local communities and their elected representatives
- That the issue of an adequate supply of long term housing is addressed
- That the Homeless Agency will be effective in its role of coordinating the implementation of the plan
- That requisite additional personnel for services will be available.

1.5 Main strategic aims 2001–2003

- To ensure that services for people who are homeless meet the needs and aspirations of people who are homeless, through the implementation of continuum of care
- To ensure the development of effective responses to people who are homeless or at risk of homelessness in local areas, outside of Dublin city
- To increase the supply of appropriate emergency, transitional and long term housing to meet the needs of people who are homeless and to ensure an adequate supply in the future
- To significantly reduce rough sleeping
- To reduce the length of time people spend in emergency accommodation
- To ensure services are responsive to needs, integrated and operate to high quality standards through the implementation of the proposed service delivery system
- To embed partnership as a way of working by homeless and other services
- To consolidate and develop work already undertaken in the areas of research, information and awareness raising

- To ensure the development of strategies and policies in all statutory agencies to prevent homelessness
- To improve the health and well-being of people who are homeless.

1.6 Key performance indicators

The following key indicators of success will be monitored throughout the period of this plan:

- The number of people sleeping rough
- The average length of stay in emergency accommodation
- The average length of time for a homeless household to be allocated permanent housing
- The number of homeless people settled successfully into independent or supported long term housing
- The general health and well being of homeless people
- The number of newly homeless people
- The number of homeless people
- The number of formerly homeless people who remain settled
- The satisfaction of people who are homeless with services for them
- The effectiveness of the Homeless Agency in its role.

Continuum of care — the general approach

Introduction

The underlying approach to this plan is that of continuum of care. The objective of the continuum of care approach is to assist people who are homeless to move out of homelessness and into sustainable housing, self sufficiency and independent living, appropriate to each person's ability and needs, with supports as necessary.

Implementing this approach will require changes to be made in the way that services for people who are homeless operate so that they focus on working towards the settlement of people out of homelessness. Changes will also be made in the way that services are organised and coordinated. The continuum of care approach will also require changes in the delivery of mainstream services and policies to ensure that this approach is supported and can be sustained.

This section describes the background to this approach and its general implementation in the plan. Subsequent sections contain detailed actions, under different subject headings, which are aimed at filling gaps in services, improving those services and achieving the overall objective of settling people out of homelessness and preventing homelessness from occurring.

Context

There are a number of problems in the current system of service delivery to people who are homeless in Dublin which are detailed in the section 'An Overview of Homelessness in Dublin'. The system is over centralised, with no provision outside of the city centre, fragmented and uncoordinated. People who are homeless, who often have complex and multiple needs, must travel from one agency to another trying to access necessary services. They often have difficulty accessing mainstream services such as medical treatment. There are gaps in service provision and no clear pathways out of homelessness. For many people, homelessness has become a long term state. Furthermore, in the development of responses to homelessness, there has been little emphasis on prevention and levels of homelessness continue to increase.

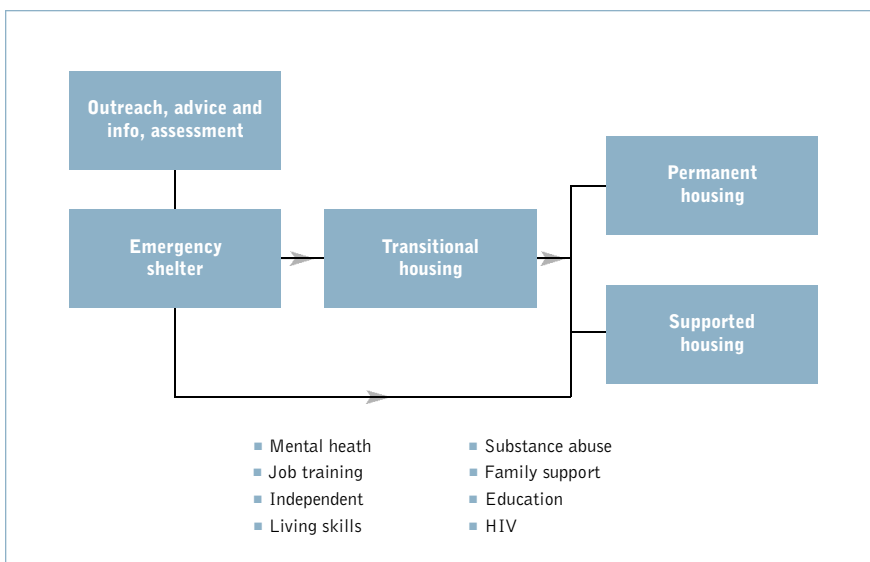
In attempting to address these issues, proposals for a new model of service delivery for people who are homeless were developed by voluntary and statutory

service providers, through the Homeless Initiative. The model was designed around the needs of people who are homeless. It aims to ensure that every person who becomes homeless has access to a suite of services which will address all their needs in an integrated way and will be focused on ensuring that they are successfully settled out of homelessness.

A number of criteria were agreed for services. They should:

- support the homeless person to move as speedily as they can to settlement
- be centred on the needs of each person who is homeless
- be holistic: concerned with all the needs of each person who is homeless
- be integrated and seamless to the homeless person
- be easy to access, locally, not centrally available and available at appropriate times
- be based on the development of existing services
- emergency accommodation should be short term
- be based on outreach, bringing services to people
- be efficient, avoiding duplication of effort, activities and expertise
- be effective, responding to the complex needs of homeless people
- operate to agreed standards and outcomes

A review of international best practice helped to inform the development this approach to service delivery, based on these criteria. The approach drew on a number of models in other countries but principally on that of continuum of care which was developed in the United States in the early 1990s. The following diagram encapsulates the approach. It is adapted from *Priority Home! — The Federal Plan to Break the cycle of Homelessness*, Department of Housing and Urban Development, 1994.



Ensuring that the continuum of care approach is implemented will be the responsibility of the Homeless Agency which has been established to manage and coordinate the delivery of services to people who are homeless in the Dublin area. The approach will be applied through the following measures:

- The embedding of partnership working across the sector and the development of partnership working with other agencies
- The development of responses at local level, through interagency partnerships

- The fostering of good practice and service standards to achieve appropriate outcomes
- Enhancing the skill levels of service providers
- Ensuring the commitment of all services to the approach
- The development of an integrated service delivery system based on case management and supporting management information system
- Ensuring ease of access to services through early intervention and assessment, multiple access points and outreach
- Ensuring adequate provision of emergency and transitional accommodation
- Ensuring adequate provision of other services offering safe alternatives to the street
- Improving the access of people who are homeless to health, treatment, training, housing and community support services, while ensuring that they retain maximum decision making rights and independence
- The development of strategies to prevent homelessness
- Ensuring the provision of adequate resources for the provision of services to people who are homeless
- Monitoring of services and their impact
- Research to improve the understanding of homelessness and to inform the development of responses

The provision of early intervention, street outreach, short and long term accommodation, alternatives to the street and other services are dealt with in the remainder of the plan, as are the development of preventative strategies. Objectives and actions to achieve the other measures are contained below.

Aim this period

To ensure that the continuum of care approach is applied to all aspects of the implementation of the plan.

Performance indicators

The following indicators of success in relation to the implementation of the continuum of care approach will be monitored throughout the period of the plan.

- The satisfaction level of agencies working with people who are homeless with the extent of inter agency working
- The satisfaction level of agencies working with people who are homeless with how well the continuum of care approach has been implemented
- The satisfaction level of agencies outside of Dublin city with the local services available
- The satisfaction level of people who are homeless with the integration of the delivery of services
- The satisfaction level of people who are homeless with the quality of services
- The satisfaction level of members of the Board and the Consultative Forum with the working of the two bodies and how well they work together
- The number of people who are homeless who are actively involved in the ‘speak out’ initiative and their level of satisfaction with the initiative
- The number of services for people who are homeless which have carried out an assessment against the quality standards and developed an action plan for implementation
- The amount of funding committed to services for people who are homeless

- The satisfaction level of services for people who are homeless with the level of funding
- The satisfaction of services for people who are homeless with the system of allocating funding
- The number (and %) of funded partnerships
- The number of private companies formally involved in providing help for people who are homeless
- The number (and %) of actions in the action plan which are achieved (and on time)

Objective 2.1 — Development of responses at local level

To ensure the development of integrated responses at local level to people who are homeless or at risk of homelessness

Rationale

The development of local responses in areas outside of Dublin city is a key objective of the plan. Local responses will facilitate early identification of people at risk of homelessness and will obviate the necessity of people to move to the city centre, with the attendant dangers attached to a homeless lifestyle.

Each local authority will employ a coordinator who will have responsibility for the implementation and coordination of the measures in this plan, and the development and improvement of services for people who are homeless, on an ongoing basis, in their local area. This will include the management of interagency partnerships in the area.

The local coordinators will be employed by the relevant local authority. They will also report to the Homeless Agency to ensure coordination, development and integration of services across the region.

Action 2.1.1 — Appoint coordinators

The Homeless Agency to ensure the appointment of coordinators in Fingal, Dun Laoghaire/Rathdown and South Dublin County Councils by June 2001.

Objective 2.2 — Good practice and standards

To ensure the development and application of quality standards in all services on an ongoing basis.

Rationale

Quality standards for some services were developed and published in December 1999 in the form of *Putting People First, A Good Practice Handbook for Homeless Services*. The standards were developed by homeless service providers themselves, in conjunction with an external consultant. They provide a valuable framework for the development of services across the sector, enabling agencies to improve at their own pace and on an ongoing basis.

Actions for the implementation and development of the quality standards are contained in different sections of the plan.

Action 2.2.1 — Provide support and resources to all services

The Homeless Agency to ensure that services are provided with the necessary support and resources to develop and apply standards to their own services throughout the course of the action plan.

Objective 2.3 — Enhancing skills of service providers

To implement an information, training and support programme for homeless and other services to ensure that services for people who are homeless are targeted, appropriate and excellent.

Rationale

The needs of people who are homeless can be complex and varied and a skilled workforce is essential to the delivery of effective services. Over the last two years, the Homeless Initiative has provided a training programme for front line staff providing services to people who are homeless. Take up of courses has been high but training needs assessments indicate a need to expand the range of courses. It is also necessary to develop a form of accreditation for people attending courses and to extend the scope of training to people in management positions, including boards of management, and to services outside of the homeless sector.

Specific actions for training and support for services are contained in all sections of the plan. These will form part of the overall programme which will aim to both improve the quality of services and link funding to standards, over time. The programme will include:

- Continued training for staff
- The development of accreditation for training
- The provision of training and support for the Boards of voluntary organisations to enhance their effectiveness and contribution to the development of services
- Inspection of premises and subsequent programme of renovation/improvement
- The development of appropriate pay scales across the sector
- Evaluation of services

Action 2.3.1 — Training programme

The Homeless Agency to ensure the provision of a training programme for all services in contact with people who are homeless, throughout the course of the plan.

Objective 2.4 — Integrated service delivery system

To put in place a new service delivery system which will ensure that services are seamless to the person who is homeless, centred on their needs and focused on ensuring the successful settlement of each person out of homelessness.

Rationale

As already discussed, the current system of service delivery to people who are homeless is fragmented and uncoordinated. To ensure the implementation of the continuum of care approach and because no one agency can meet all the needs of someone who is homeless, it is proposed to develop a new system, based on the case management model. At the heart of the system is a data base, which will allow for information on accommodation and other services to be accessed and for appropriate referrals to be made, and a monitoring system which will allow for interventions to be recorded and the progress of people through the system tracked. This will provide an immediate overview of the number of people who are homeless at any one point in time, as well as charting the flow of people through the system.

This system represents a radical departure from the current system and will therefore be piloted to test its feasibility. The pilot will take place over twelve months from June 2001 and will be evaluated by an independent body.

Action 2.4.1 — Working group

By April 2001, the Homeless Agency to establish a working group of representatives from the Agency, the Departments of Social, Community and Family Affairs, Health and Children, health boards, local authorities, homeless or formerly homeless people and homeless service providers.

Comment

It will be the role of the working group to ensure that the necessary supports are in place for the pilot and to oversee its implementation

Action 2.4.2 — Recruit care managers

By May 2001 the Agency to have recruited two care managers, one of whom will operate as part of the Agency, the other as part of a voluntary agency in the sector. This will allow an assessment to be made of whether the care managers should be employed by one agency or located in a number of agencies, but coordinated centrally.

Action 2.4.3 — Management information system

Complete design and testing of hardware and software required to operate the free phone and integrated information systems by August 2001. This will be done by an external consultant. (Linked to Objective 4.1).

Action 2.4.4 — Independent evaluation

By May 2001 the Homeless Agency to have commissioned an independent evaluation of the pilot project to be completed by March 2002.

Action 2.4.5 — Arrange for mainstreaming

The Agency will ensure the completion of the pilot by March 2002 and will make necessary arrangements for full scale implementation, as appropriate, from January 2003.

Objective 2.5 — Adequate resources for plan

To ensure that adequate resources are available in the form of a unified fund for the implementation of the plan from central government, from March 2001.

Rationale

The success of the action plan is dependent on a number of factors, of which adequate resources is one. The proposed budget for this plan is contained in Section fifteen.

There is currently no overall framework for the funding of homeless services. Resources come from a range of central government departments, operating in an uncoordinated way. Difficulties are caused for service providers who must source funds from different bodies. Furthermore, no one knows precisely what public funds are expended on services for people who are homeless, or, consequently, how cost effective this expenditure is.

Particular difficulties are experienced in accessing revenue funds. Capital costs are relatively easy to access but funds to cover the costs of providing care,

support and other services are not readily available. This causes severe problems for voluntary bodies but also for statutory bodies which are routinely given expanded responsibility for services, but without the necessary expanded resources.

Of equal importance to the amount of resources made available is the way in which those resources are made available. Services for people who are homeless people a wide range of public and voluntary services. This plan provides for actions by all of these and provides the framework for those services to be delivered in an integrated and coordinated way. It is important that the resources provided for the implementation of the plan are also available in a coordinated and integrated way. A unified fund from central government will ensure efficiencies in the delivery of services and accountability of expenditure on those services.

Action 2.5.1 — Seek to ensure unified fund for action plan

The Homeless Agency will seek to ensure that a unified fund, based on the actual costs of implementation, is available for the action plan from central government by March 2001.

Objective 2.6 — Devise new funding scheme

To devise a new funding scheme for homeless services to be applied from January 2002.

Rationale

Directly related to the previous objective, this objective aims to put in place a new scheme of funding for homeless services. The purpose of the scheme is to ensure that funding is used to achieve the overall policy objectives in relation to homelessness and that it is linked to agreed standards and outcomes. The scheme will be transparent, coherent and rational and will ensure accountability for expenditure.

The principles of the new scheme have already been adopted by the Homeless Initiative in May 2000. The scheme will replace all existing schemes for voluntary and statutory agencies. It will include funding arrangements for agreed core services as well as arrangements for innovative and new services. The scheme will also allow for the phasing in of service contracts which will apply equally to voluntary and statutory services.

Action 2.6.1 — Finalise detailed proposals

The Homeless Agency, in conjunction with homeless service providers, and relevant statutory bodies, will finalise detailed proposals for the scheme by June 2001. Proposals will be submitted to the Consultative Forum and the Board for consideration at their July meetings.

Action 2.6.2 — Implement scheme

The Homeless Agency to finalise the scheme by September 2001 for implementation to commence in January 2002.

Objective 2.7 — Interim funding scheme

To ensure that an interim scheme of funding, based on actual costs, is in place with effect from March 2001.

Rationale

Provision is made in different sections of the action plan for an interim funding scheme for services which will form a bridge between the present situation and

the new scheme to come into effect in January 2002. The interim scheme will be related to the actual cost of providing services and will be coordinated through the Homeless Agency.

Action 2.7.1 — Working group

The Homeless Agency to establish a working group of the health board and local authorities by January 2001.

Comment

The role of the working group will be to review existing funding schemes and ensure that a rational, coordinated scheme for services is introduced with effect from March 2001, for services indicated in the action plan.

Objective 2.8 — Partnership within the homeless sector

To embed partnership as a way of working across the homeless sector.

Rationale

Effective and integrated responses to homelessness and the implementation of the continuum of care approach will require that services work together in a partnership way. Through the work of the Homeless Initiative over the last four years, there have been many improvements in the contact and communication of agencies, both voluntary and statutory, providing services to people who are homeless. There are many examples of joint working between agencies in the development and delivery of new services. This action plan is, itself, an example of partnership working, having been developed through an open and wide ranging consultative process and agreed jointly by the different partners in the Homeless Initiative.

Although partnership is a more effective and ultimately satisfying way of working, it is challenging and time consuming. Agencies must be resourced, supported and inspired to work in this way. Ensuring that partnership is further developed will be the role of the Agency. This will involve further developing existing partnership work and developing the scope for homeless people themselves to be part of that partnership. Objective 2.8 deals with partnership beyond the homeless sector.

Action 2.8.1 — Worker networks

To support networks of people working in the sector to facilitate improved joint working and the improvement of service delivery, throughout the course of the plan.

Comment

Actions for the establishment and support of networks of people working in street outreach, settlement, emergency and transitional accommodation and day and night centres are contained in the relevant sections of the plan. These networks will facilitate the development of common assessment, referral and other procedures and will facilitate improved joint working.

Action 2.8.2 — Homeless Agency board and consultative forum

The Board will ensure that the all elements of the Homeless Agency will work in a partnership way.

Comment

The Board and Consultative Forum are two main components of the new Homeless Agency and are described in section fourteen. They will be responsible for overseeing the implementation of the plan and devising joint plans for the future. Agency staff will be responsible for supporting each of these bodies in their work.

Action 2.8.3 — Integrate with services for young people who are homeless

The Homeless Agency to develop partnership working with the structures responsible for services for young people who are homeless and to ensure that they are integrated as appropriate into the work of the Agency, throughout the course of the plan.

Comment

The Homeless Agency is concerned primarily with services for people who are homeless and who are aged over eighteen. Health boards have statutory responsibility for homeless people under this age and a separate structure and plan exists to meet their needs.

The overlaps between the two age groups are very clear and it is crucial that responses are developed cooperatively.

Action 2.8.4 — Involving partners in planning

The Homeless Agency to ensure that service providers and service users are involved in the review and planning of services, on an ongoing basis.

Comment

Service users will be involved in the review of services through the implementation of the quality standards which provide for service user feed back. They will also be involved through the 'speak out' initiative. Service providers will be involved through representation on the Board and the Consultative Forum and through the work of the networks of front line workers and managers of services.

Additional opportunities for service providers and people who are homeless to be involved in the review and planning of services will be provided through the establishment of issue based forums, periodic seminars and through the process of drawing up subsequent plans.

Action 2.8.5 — Ensure funding rewards partnership

As part of the revised funding schemes, the Homeless Agency will ensure that funding for services is organised in a way that will encourage and reward partnership projects and joint working.

Objective 2.9 — A voice for people who are homeless

To complete, by January 2002, a programme which will actively support people who are homeless or have been homeless, to explore, understand and speak out about their experiences.

Rationale

While there is much lip service paid to the empowerment of service users and the involvement of them in the development of services, very little concrete action has been taken in the area of homelessness to make this a reality. Although

two projects have received funding through the Homeless Initiative for such work, it is very undeveloped across the sector.

The purpose of the programme will be two fold: To develop ways of working with people who are homeless which are empowering and which enable them to take control of their situations and embed this as a way of working with people who are homeless. To provide opportunities for people who are homeless to speak out about their experiences and inform the development of policy and service responses.

Action 2.9.1 — Commission consultant

The Homeless Agency to commission a consultant to draw up proposals for the programme by September 2001.

Comment

The consultant will base proposals on a review of best practice in working with homeless and other marginalised groups in this way, both in Dublin and elsewhere and in consultation with service users and service providers.

Action 2.9.2 — Secure agreement for programme

Proposals will be presented to the Consultative Forum and Board at their September meetings for approval.

Action 2.9.3 — Implementation

The programme will be implemented from March 2002 and will be subject to ongoing review.

Objective 2.10 — Partnership beyond the homeless sector

To ensure the development of partnership working with services and bodies outside of the homeless sector, throughout the course of the plan

Rationale

The elimination of homelessness will require joint working, not just between people who are homeless and the people providing services to them, but among a wider group of players. These include local communities, the private sector, policy makers and other agencies, the activities of which impinge on homelessness.

Action 2.10.1 — Private partners

The Homeless Agency to ensure proactive contact with the private sector to ensure the development of appropriate partnerships throughout the course of the plan.

Comment

The private sector has a role to play in tackling homelessness and this will be developed whenever possible. Potential partnership arrangements include employment initiatives, housing initiatives and sponsorship opportunities.

Action 2.10.2 — Mirror partnership at central government level

The Homeless Agency will aim to ensure coordination and partnership working at central level to mirror that working at local and regional level.

Comment

To be effective partnership must be integrated at all levels of the system. The establishment of the cross department team on homelessness is a good example of joint working at central government level and the Agency will seek to ensure that this is fully developed and that funding and policies are coordinated at all levels in the system.

Action 2.10.3 — Local communities

The Homeless Agency to ensure that effective partnerships are developed with local communities so that they can be positively involved in the development of responses to homelessness.

Comment

If homelessness is to be addressed, people who have experienced homelessness must be re housed and services for people who are homeless must be provided. Communities in local areas have a key role to play in both supporting the siting of services for people who are homeless and in supporting the housing of people who have been homeless in their areas (linked to Objective 3.6).

Services for people who are homeless tend to be located in one or two areas in Dublin city, leading to justifiable resistance from people in these areas to the siting of further facilities. Other communities are resistant to services or to the housing of people who have been homeless, due to negative experiences in the past.

Actions in this plan, connected to the implementation of the quality standards, will ensure that there is no over concentration of services in one area and that all services are professionally managed. Improved housing allocation procedures and support services will also ensure that tenancies are sustainable. The Homeless Agency will work with local communities throughout the course of the plan to ensure that positive relationships are developed in relation to the provision of facilities for people who are homeless or have been homeless.

Action 2.10.3 — Other agencies

The Homeless Agency will ensure the development of strong partnership working with other relevant agencies through out the course of the plan.

Comment

People who are homeless are by definition socially excluded. Over the last ten years in Dublin a range of services, through local area partnerships, and other agencies, have been developed for people who are excluded and much expertise has been developed within those agencies. The Agency will ensure that where possible and appropriate that the experience and expertise within these agencies will be brought to bear in the implementation of this action plan.

Objective 2.11 — Ensure commitment to continuum of care approach

To ensure that all services are committed to the continuum of care approach to homelessness throughout the course of the plan.

Rationale

The success of the continuum of care approach is dependent on the commitment of all services. The Homeless Agency will support and lead agencies in the development of the approach, on an ongoing basis throughout the course of the plan.

Action 2.11.1 — Lead and support services

The Homeless Agency will provide all services for people who are homeless with the leadership and support which will ensure that they become committed to the provision of high quality services which are focused on ensuring that people who are homeless become settled and move out of homelessness.

Objective 2.12 — Monitoring

To ensure that the implementation of the plan and the continuum of care approach are monitored throughout the course of the plan

Rationale

It will be necessary to develop and improve services over time. This will be done through monitoring of the plan, both through formal monitoring arrangements and through the Consultative Forum and the Board.

Action 2.12.1 — Monitoring and evaluation

To establish a system for the monitoring and evaluation of the plan to be implemented from April 2001.

Comment

It is important to have in place a process for monitoring progress against the action plan to ensure the agreed aims and objectives are achieved and any adjustments required can be made. An appropriate monitoring system will also provide important accountability to the Board and the various stakeholders of the Homeless Agency.

Quarterly progress reports against the objectives and actions in the plan will be prepared for the Board and a detailed review of progress against all performance indicators will be prepared at the end of years one and two for completion in February 2002 and 2003.

On the basis of the annual review and in consultation with the various stakeholders, a revised action plan will be drawn up and agreed by June 2002 to cover the period to the end of 2003. Work will commence in March 2003 to prepare a further 3-year plan to cover 2004–2006, to be completed by the end of September 2003.

Action 2.12.2 — External evaluation of agency

To contract an external body to evaluate the progress of the plan the effectiveness of the Agency by April 2001.

Objective 2.13 — Research

Over the course of the plan, to complete a programme of research which will both improve the understanding of homelessness, its causes and solutions and contribute towards the development of more effective policy and services responses.

Rationale

Research is necessary in developing an understanding of the needs of people who are homeless, or at risk of homelessness, of its complexity and to ensure an accurate information base for the planning and development of service and policy responses. Traditionally, there has been little emphasis on systematic research, although this is something which has been addressed to some extent over the last few years, through the Homeless Initiative.

There is provision for research in all sections of the plan, under specific headings. The research in this section is more general. Additional research may be identified and carried out over the course of the plan.

Action 2.13.1 — Longitudinal study

The Homeless Agency to commission a longitudinal study, over a five year time frame, of a sample of people who are homeless in 2000, to commence in May 2001.

Comment

While there have been many research projects into homelessness in Dublin, there has never been a longitudinal study. The purpose of this study is to follow, over a period of five years, people who have been homeless. It will establish their backgrounds and needs at the start of the project and chart their progress. The project will provide very valuable information on what service interventions have been effective and what preventative interventions may have been taken.

Action 2.13.2 — Assessment of homelessness

The Homeless Agency to commission and publish an assessment of homelessness by June 2002.

Comment

This assessment will be in fulfillment of the requirement for an official assessment of homelessness to be carried out every three years by local authorities. It will use the same methodology as the assessment carried out in March 1999 by the ESRI on behalf of the Homeless Initiative. This assessment involved all service providers and provided for the first time an agreed and reliable methodology for the assessment. The 1999 assessment provided a base line of information about homelessness at that point in time, against which trends in homelessness can be measured and linked to service and policy interventions.

The 2002 assessment will be carried out at the end of March. The analysis will be completed and report published before the end of June 2002.

Action 2.13.3 — Audit of services

The Homeless Agency to complete an update of the audit of services by December 2002.

Comment

The Homeless Initiative carried out an audit of homeless services, based on 1997 information. The audit provided information on the range of services provided, who provides which services, how many people used the services, the skills and qualifications of people working in services, the condition of buildings and the expenditure in that year on services.

The audit will be carried out between June and December 2002. The findings of the audit will be published and circulated by March 2003 and will be used to inform the development of the action plan 2004–2006.

Preventing and eliminating homelessness

Introduction

A fundamental principle underpinning the plan is that homelessness is solvable and preventable. Actions in this section are aimed at the development of service and policy responses which will prevent homelessness from occurring in the first place, and where it does occur, will prevent it from becoming a long term condition by the provision of early intervention and other effective services.

The actions focus on three areas: addressing the wider policy dimensions of homelessness; addressing policies and practices in relevant agencies; and the development of specific inter and intra agency actions.

Aim this period

To implement measures which will help to prevent homelessness in the immediate term and lay the ground for the elimination of homelessness in the long term.

Context

Strategies to prevent and eliminate homelessness must be an integral part of any plan to tackle homelessness. Without them, the cycle of homelessness cannot be broken and the numbers of people becoming homeless every day will continue to increase. Homeless services provide a final safety net for people whose needs, for whatever reason, have not been met by their families, communities and other services. For this reason, it is appropriate that homeless services should be a driver for change in the underlying causes of homelessness.

The lack of appropriate housing for people who are homeless or at risk of homelessness is the most significant cause of people becoming and remaining homeless. People who are homeless are generally poor, trapped in a low skill, low income cycle which makes it difficult for them to compete in the market for housing. Ensuring that there is an adequate supply of housing for such households, either through direct housing provision or income subsidy, is the key to tackling current levels of homelessness and preventing homelessness from occurring in the future.

However, housing by itself will not eliminate homelessness and it is also necessary to identify people at risk of becoming homeless and to develop an effective support system to prevent them from becoming homeless. The basis for such a system is in place but will require radical improvement — in the services themselves (family support, child care, public health, education, training, youth, advice, information and crisis intervention) — and in the way that they are planned and coordinated.

In addition, it will be necessary to address the wider policy dimension of poverty and social exclusion. People who become homeless share a number of common characteristics mainly related to poverty and social exclusion. They have poor educational qualifications, high levels of unemployment, fragile family backgrounds, experience of institutional care, prison and disabilities such as mental ill health.

It will also be necessary to address the policies and practices which directly give rise to homelessness, such as discharge procedures from child care institutions, hospitals and prisons. It will also be necessary to gain the support of politicians, policy makers, local communities and the public in general to make these changes possible.

The objective and actions in this section will be undertaken in consultation and cooperation with other relevant actors and will aim to complement and consolidate existing activities, not to reinvent or duplicate them. They concentrate on three areas: addressing the wider policy dimensions of homelessness; addressing policies and practices in relevant agencies; and the development of specific inter and intra agency actions.

Performance indicators

The following performance indicators of success in relation to the prevention and elimination of homelessness will be monitored throughout the period of the plan:

- The number of new households (and people) becoming homeless
- The average length of time of households on the housing waiting list
- The number of people on the housing waiting list
- The number of people in designated at-risk groups on the housing waiting list
- The average length of time of designated at-risk groups are on the housing waiting list
- The number of people refused admission onto the housing waiting list
- The number of households (and people) becoming homeless following eviction
- The number of people at risk of homelessness using homeless advice services
- The number of people at risk of homelessness using the freephone helpline
- The satisfaction level of service users with the homeless advice services and freephone helpline
- The number of people discharged from institutions (and by institution) directly into accommodation for homeless people
- The number of people discharged from institutions (and by institution) directly onto the streets
- The number of young people leaving care who become homeless within 2 years
- The number of people leaving defence forces who become homeless within 2 years
- The number of people leaving psychiatric institutions who become homeless within 2 years

- The number of people leaving general hospitals who become homeless within 2 years
- The number of children and young people participating in educational programmes about leaving home

Objectives and actions

Objective 3.1 — Plan to meet needs of at risk groups

In conjunction with other relevant bodies, identify groups who are at risk of homelessness and agree a strategy to ensure that their long term housing and other needs are provided for, so that homelessness can be eliminated.

Rationale

Preventing and eliminating homelessness will require the development of a strategic integrated response by a wide range of players, at national and local level, in the fields of housing, social, health, education, training and income maintenance services.

As referred to in the section ‘Homelessness in Dublin — An Overview’, there is now a body of research which clearly identifies the households and individuals who are at risk of homelessness and the crisis points which might propel them into homelessness. The aim will be to build on this information and devise a strategy, which will ensure that their long term housing and other needs are addressed in an integrated way.

Action 3.1.1 — Expert working group

The Homeless Agency to establish an expert working group to complete, by September 2001, the terms of reference for an action research project.

Comment

The purpose of the research project will be to identify at risk groups, to project the likely extent of these groups over the next ten years and to propose measures to address their housing and other needs in the long term. The proposed measures will be based on needs and will take into account changes in the economy, the housing market, income maintenance systems, health, education and social services.

Action 3.1.2 — Research project

Complete research by September 2002.

Action 3.1.3

The Homeless Agency will lobby relevant bodies to ensure the strategy is implemented from December 2002.

Objective 3.2 — Homeless proof policies

To homeless proof existing mainstream policies and ensure that all policies become responsive to the needs of people who are homeless or at risk of homelessness and active in the prevention of homelessness.

Rationale

Mainstream public services do not currently address the needs of people who are homeless or at risk of homelessness adequately. There has been a tendency for

new services to be developed in response to emerging needs, rather than addressing the deficiencies in the general system which give rise to the new problem in the first place. Homeless services are an example of this and there is an entire range of services specifically for people who are homeless. This situation serves to counteract the separateness of homeless people and reduce the capacity of mainstream services to meet their needs.

Action 3.2.1 — Identify principal policies and programmes

Commencing in September 2001, the Homeless Agency will identify the principal mainstream policies and programmes in the areas of health, mental health, substance abuse treatment, income maintenance, social services, housing, education and training which are critical to preventing homelessness and helping homeless individuals and families make the transition from homelessness

Action 3.2.2 — Assess policies

Complete an assessment, by March 2002, of how these policies and programmes serve the needs of people who are homeless and at risk of homelessness; identify how to make them more accessible to homeless people and how they can be improved to prevent homelessness.

Action 3.2.3 — Agree implementation programme

By June 2002, the Homeless Agency will have agreed an implementation programme with relevant bodies to commence in January 2003.

Objective 3.3 — Awareness programme for service providers

To devise and implement an education and awareness programme for relevant mainstream service providers to enable them to be aware of their role in preventing homelessness and to make appropriate responses to people who are homeless. Relevant mainstream providers will include personnel in hospitals, other health board services, social welfare, community services, and gardai.

Rationale

This objective directly complements Objective 3.2 above which will address the impact of mainstream policies on individual homeless people and homelessness generally. In addition to taking action at the level of policy and programme design, it is necessary to work with the people who implement those policies and programmes to ensure that they can respond to the needs of homeless people they have contact with, and that their actions do not contribute to homelessness.

Action 3.3.1 — Review training programmes

By September 2001, the Homeless Agency will complete a review of any existing training programmes about homelessness.

Action 3.3.2 — Finalise report on practice in services

By January 2002, the Homeless Agency to finalise a report on examples of good and poor practice by mainstream services, in relation to homeless people. This will be based on consultation with mainstream services, homeless service providers and homeless people.

Action 3.3.3 — Complete design of training programme

By March 2002 the Homeless Agency to complete a training programme for key personnel in mainstream health, social, education, training, and other relevant services. The programme will be based on the reviews of training programmes and practice in services and devised in consultation with homeless services, homeless people, mainstream service providers and training departments in mainstream services.

Action 3.3.4 — Implement training programme

The Homeless Agency will implement the programme between June 2002 and December 2003. Implementation will include monitoring of the impact of the training on behavior and attitudes in mainstream services.

Action 3.3.5 — Review and develop future training programme

Based on participant feedback and monitoring, the Homeless Agency will finalise a programme for the next plan by September 2003. This will be done in conjunction with homeless services, homeless people and mainstream service providers.

Objective 3.4 — Public awareness programme

To devise and implement a public awareness and education programme on homelessness and homeless services.

Rationale

Homeless people, particularly those with high need, are a marginalised group of people who are disenfranchised and who have little capacity themselves to influence policies to have their needs met. Policy makers and the public in general have limited understanding of their situation, how it has been caused or what will solve it and this is exacerbated by the media coverage of homelessness which tends to focus on individual cases, with little or no analysis. The existence of homelessness, particularly visible homelessness like street sleeping, may indicate to the public that there are no services for people who are homeless and that no body has responsibility for addressing the issue. In this context, it is difficult to generate support for the measures necessary to solve and prevent homelessness at both national policy and local community level.

The purpose of this programme will be to ensure that there is greater awareness of the causes of homelessness; the needs of people who are homeless; the responses which are being made to their needs; alternatives to homelessness; services available to homeless people; and the role of local communities, and society in general, in responding to and preventing homelessness.

The specific actions under this objective will complement the research and dissemination of information to be undertaken by the Agency and will include the quarterly publications of the magazine 'Cornerstone'.

Action 3.4.1 — Devise programme

The Homeless Agency to devise awareness programme in conjunction with homeless service providers, homeless people and public relations experts by June 2001.

Action 3.4.2 — Implement programme

The programme to be implemented between November 2001 and December 2003 with reviews in March 2002 and 2003.

Action 3.4.3 — Review and develop future programme

Based on the reviews, the Homeless Agency will finalise a programme for the next plan by September 2003. This will be done in conjunction with homeless services, homeless people and public relations experts.

Objective 3.5 — Leaving home education programme

To work with schools and youth services to develop programmes and activities for young people so that they are better prepared for leaving home. The programmes will aim to reduce unplanned movement from home, raise awareness of options to leaving home as a means of addressing problems, and ensure that young people have the skills to manage an independent household.

Action 3.5.1 — Review existing programmes

The Homeless Agency to complete a review of existing leaving home programmes by January 2002.

Action 3.5.2 — Working group to devise programme

By March 2002, the Homeless Agency to establish working group to devise programme and implementation plan, to be completed by December 2002.

Comment

The working group will include homeless service providers, homeless people and education experts.

Action 3.5.3 — Implement and review

Implement programme from September 2003 and review annually.

Objective 3.6 — Local action for people at risk of homelessness

To develop and implement interventions at local area level, targeting people who are at risk of homelessness and aimed at preventing them from becoming homeless.

Rationale

The circumstances which place people at risk of homelessness are well documented (see under Context above). Concerted and coordinated action is needed at local level, to identify high risk groups, and to develop interventions to either support them to make their current situation viable (through for instance, family mediation services, support to tenants at risk of eviction due to anti social behaviour), or to make a planned move to a more appropriate situation.

These interventions will be developed by multi agency teams, in areas where homelessness has already been identified as a problem. The teams will include representatives from health, mental health, drug and alcohol treatment services, local authority, gardai, schools, youth services, probation and welfare services, relevant voluntary agencies and homeless service providers. The teams will be in each of the following areas: Tallaght, Clondalkin, Dublin Corporation regional areas, Blanchardstown, Dun Laoghaire. They will be established, coordinated and supported by the Homeless Service coordinators in each local area and by the Homeless Agency in Dublin city.

Action 3.6.1 — Complete guidelines for multi agency teams

By September 2001 the Homeless Agency will complete guidelines on the role and approach to the work of multi agency teams.

Action 3.6.2 — Establish teams

By January 2002, multi agency teams will be established in each area. These will be coordinated by the Homeless Services Coordinators outside of Dublin city and by the Homeless Agency in Dublin city.

Action 3.6.3 — Finalise strategies

By June 2002 the multi agency teams will complete preventative strategies for each area, together with actions, arrangements for interagency working and costings, for presentation to the September meetings of the Consultative Forum and Board.

Action 3.6.4 — Implementation

The Homeless Agency to secure additional resources for strategies and implement with effect from September 2002, with regular reviews and evaluation.

Action 3.6.5 — Finalise programme for next plan

Based on the reviews, the Homeless Agency, in conjunction with the local teams, will finalise a programme of intervention for inclusion in the next three year action plan by September 2003.

Objective 3.7 — Discharge procedures from institutions

In conjunction with relevant agencies to ensure policies and procedures are developed to ensure planned discharge from prison, defence forces and child care services, with effect from September 2002.

Rationale

There is abundant evidence of prisoners and hospital patients being discharged directly into services for homeless people and of a revolving door between prison, psychiatric hospital and homelessness. There is also evidence of links between discharge from the army and homelessness. In terms of young people leaving the care of health boards, a recent report by Focus Ireland which tracked a sample of care leavers, found that, over a two year period, two thirds of them experienced homelessness. Actions in relation to discharge procedures from hospitals are contained in Section eleven.

The Homeless Agency will work with the Prison Services Agency, Probation and Welfare Services, the Defence Forces, and child care services to develop appropriate policies and procedures which will ensure that people in the care of those agencies are not discharged to homelessness and do not leave in an unplanned way.

The possibility of developing alternatives to custodial sentences for people who are homeless who commit minor offences, related to their homelessness, which give rise to the revolving door between homelessness and prison, will also be explored.

The approach in working with other agencies will be one of collaboration to find lasting solutions.

Action 3.7.1 — Quantify nature and extent of discharge to homelessness

The Homeless Agency to quantify the extent and nature of direct discharge to homeless services from institutions by December 2001. This will be done through consultation with homeless service providers and the institutions.

Action 3.7.2 — Identify key personnel

The Homeless Agency to identify key personnel in relevant agencies and agree with them a new approach to developing policies and procedures which will ensure that people leaving their services do not become homeless, by March 2002.

Action 3.7.3 — Complete plan for new policies and procedures

Plans for new policies and procedures to be completed by September 2002, implemented immediately and reviewed on an ongoing basis.

Objective 3.8 — Early interventions for people who are homeless or at risk of homelessness

To establish accessible advice and information services for people who are homeless or threatened with homelessness.

Rationale

Effective advice, information and referral services can prevent homelessness by helping those people who may be imminently at risk of homelessness to explore their options and make informed choices. For example, clarifying a tenant's rights may allow them to stay in rented housing until they are able to secure alternative accommodation.

By being high profile and readily accessible such services can also prevent crisis homelessness from becoming a longer term situation. This is particularly important given the fact that homelessness compounds problems and the longer a person is homeless, the more difficult it is for them to move out of homelessness.

The following measures will operate as part of an overall centrally coordinated system delivering continuity of care to each person who becomes homeless. This will ensure that effective interventions are made, thereby preventing long term homelessness and repeat episodes of homelessness.

Action 3.8.1 — Free phone service

Establish a high profile twenty four hour free phone service by January 2002. More detailed actions are contained in Section Four.

Action 3.8.2 — All services one stop shops

Make each homeless service a 'one stop shop' by ensuring that they provide advice, information and referral services and operate as part of the overall system. More detailed actions are contained in Section Four.

Action 3.8.3 — Multiple access points

Establish a number of high profile access points in Dublin city and other local areas where people who are homeless or threatened with homelessness can get high quality advice, information and referral to relevant services. More detailed actions are contained in Section Four.

Action 3.8.4 — Continuum of care

Establish a new integrated service delivery system which will ensure a continuum of care for people who are homeless, from the point that they become homeless. Detailed actions are contained in section two.

Objective 3.9 — Post settlement supports

To ensure that people who have been homeless and who move into their own housing have the necessary supports to make their housing sustainable.

Rationale

People who have been homeless and who move out of homelessness into ordinary housing face a number of barriers to making their settlement sustainable.

Many of these barriers are caused by problems in the official system. Difficulties in accessing assistance with rent deposits, the differential between actual rents and the level of rent supplement, lack of furnishings and household equipment can make it difficult for people to settle.

Other problems arise because of lack of support services for people who need them. Some people may have difficulty managing money and get into arrears of rent, or they may have difficulty controlling drink or drug consumption, leading to arrears or behavioural problems.

Action 3.9.1 — Comprehensive settlement service

Establish comprehensive settlement service providing assistance to people moving from homelessness and support to people after they have moved. Detailed actions are contained in section nine.

Improving access to advice, information and referral services

Introduction

As described in Section three, effective advice, information and referral services can prevent homelessness by helping those people who are imminently threatened with homelessness to explore their options and make informed choices. They can also help to prevent crisis homelessness from becoming a long term situation.

Advice and information is also an important element of the continuum of services to people who are homeless, ensuring that they are enabled to access appropriate services and entitlements and make choices about alternatives, at all stages during their homelessness.

The measures in this section aim to ensure that high quality advice, information and referral services are readily accessible and available at appropriate places and times and widely promoted. This will be achieved through the establishment of a twenty four hour free phone, by improving the capacity of homeless services to provide advice and information and improving the capacity of generalist advice and information services to work with people who are homeless or threatened with homelessness.

Context

Advice and information, provided in the form of leaflets, telephone and face to face services, has a well established role in Irish society as a means of helping to resolve problems and prevent them from becoming crises, particularly by enabling people to take control of their own situations. For someone who is homeless, access to accurate information at the right time can make the difference between sleeping on the street and being linked directly into services and onwards out of homelessness. Advice and information can also help to prevent someone from becoming homeless. Clarifying a tenant's rights, for instance, may enable them to stay on until they are able to secure alternative housing.

However, advice and information services for homeless people are underdeveloped. There is only limited literature for people who are homeless, or at risk of homelessness, on options, rights or entitlements. There is little or no

advertising or promotion of services or how to access them. Even when people do make contact with homeless services, information or advice, on other services and entitlements, are available in a few agencies only. Although these agencies may provide an excellent service, they are not sufficient to ensure an effective and proactive service across the system.

Information services operate during normal office hours only. While there is an 'out of hours' telephone service, it has never been adequately promoted. Standards and quality in services vary and while there are agreed service standards in *'Putting People First'*, only limited work has been done in ensuring that they are put into practice.

The development and improvement of advice and information services will be supported by the Homeless Agency through the provision of a second tier advice service, through training programmes, the provision of support systems such as the Homeless Directory, Hostels Online and a data base of services and entitlements. The Agency will also be responsible for the promotion of services.

As with other services targeted at homeless people, advice and information is one element of a service continuum. However well developed and high quality these services become, they cannot be effective unless there are accommodation and other services to refer people to.

Aim this period

To ensure that people who are homeless, or at risk of homelessness, have easy access to comprehensive, high quality information and advice, in a range of formats, to meet their needs, from January 2002.

Performance indicators

The following indicators of success in relation to advice, information and referral services will be monitored throughout the period of the plan:

- The number of callers to the free phone helpline
- The number of callers who could not get through
- The number of users of the touchscreens
- The numbers of users of advice and information services in relation to homelessness
- The extent of compliance with the *'Putting People First'* quality standards
- The level of homeless people's awareness of, and satisfaction with, the various information and advice services and mechanisms
- The level of homeless agencies' satisfaction with the information and advice services and mechanisms

Objective 4.1 — 24 hour free phone service

By January 2002, the Homeless Agency to have established a twenty four-hour free phone service, providing advice, information and referral, targeted at people who are homeless or at risk of homelessness.

Rationale

As the telephone has become a more accepted and accessible means of communication, telephone helplines have taken their place as an important and valuable part of services provided by a range of 'helping' and commercial agencies. Of particular value is the ease, relative to other services, with which helplines can be accessed, requiring only a telephone and the number. In order to

contact other services, people need to know that they exist, where they are located or what they are called before they can begin to contact them.

Another advantage of telephone services for the user is that they guarantee anonymity and confidentiality and offer them a higher level of control than in person to person situations. From the perspective of the service provider, telephone services are often a more efficient way of providing information and advice, as compared with personal or written responses, although they are not a substitute for personal contact in all cases.

Homelessness can occur at any time of the day, night or week. Most services are not accessible outside of office hours. In making services effective, it is important that they are available at the time somebody is in crisis or is motivated to take action on a problem. The free phone service will have close links with all homeless services, but particularly those available at night time which will provide an important referral and contact point.

The free phone service will be central to ensuring ease of access to information. It will be widely publicised and marketed and will be available through multiple access points including supermarkets, newsagents and relevant homeless and public service offices.

It will also be a central point through which homeless people can access appropriate services. Free phone staff will listen, give information and advice and, where appropriate, make referrals to emergency accommodation or other services and central to the development of the proposed integrated delivery system which is described in detail in section two.

Action 4.1.1 — Operational plan

The Homeless Agency to complete a detailed plan by June 2001 for the introduction of the freephone service which, from January 2002, will provide an accessible advice, information and referral service which will aim to prevent people coming into homelessness and respond to crisis homelessness situations.

The plan will include the data base of services and entitlements which will be developed under Objective 2.4.

Action 4.1.2 — Reviews of free phone service

The Homeless Agency to carry out yearly reviews of the operation of the freephone service and adjust accordingly.

Objective 4.2 — Touchscreens

The Homeless Agency to put in place four touchscreens, two in Dublin city centre and two outside, on a pilot basis by January 2002.

This system will be used by homeless people themselves to access information on services, options and entitlements

Action 4.2.1 — Review and plan

Put in place touchscreens, review in July 2002 and again in January 2003, after which time the future of the touch screens will be agreed.

Objective 4.3 — Make each homeless service a one stop shop

To ensure that advice, information and referral services are available on site in all services for homeless people from June 2002.

Rationale

Many of the 'traditional' homeless services such as hostels and food centres, provide only food and shelter. Opportunities to provide the people using their services with information and advice on rights and options, and to link them with other services, are lost.

Where other services do provide advice and information, the quality is variable, largely related to limited resources and related difficulties in keeping information up to date.

Action 4.3.1 — Audit of advice and information resources

By January 2002, The Homeless Agency to complete an audit of the skills and resources within homeless services with a view to establishing the capacity of existing services to deliver advice, information and referral services

Action 4.3.2 — Plan for advice and information services

Based on the audit, and in conjunction with service providers, the Homeless Agency to devise a plan to ensure the provision of advice, information and referral services in all services for homeless people by June 2002.

Comment

The plan will seek to support existing services to provide their own advice and information service, and where this is not feasible, to arrange for the service to be provided on an outreach basis. The plan will include a programme of training and other supports for homeless services in implementing the plan as well as arrangements for monitoring and evaluation of the services. It will incorporate the plans of local authorities for the provision of a comprehensive housing advice and information services (see Objective 10.5).

Action 4.3.3 — Reviews of advice and information services

The Homeless Agency to carry out six monthly reviews and complete a plan for advice and information services for inclusion in the 2004-2006 plan by September 2003.

Objective 4.4 — Build capacity of other services to respond to people who are homeless

To provide support to advice and information services, outside of the homeless sector, to enable them to respond effectively to people who are homeless or at risk of homelessness.

Rationale

There is a wide range of advice and information services, provided by different organisations, throughout the Dublin area (e.g. centres for the unemployed, Citizens Information Centres). Few people who are homeless or threatened with homelessness approach these services for assistance even though such services are potentially a valuable source of information.

Similarly, other service providers such as social workers, medical staff, community workers and social welfare officers often have a limited knowledge of services for people who are homeless. This reduces the assistance they can provide and leads to constant referrals to specialist homeless services when the issue may have been solvable at an earlier stage. This is related to the absence of information about those services, rather than to the skills or commitment of the individuals involved.

Action 4.4.1 — Database

The Homeless Agency to ensure that a database, on services relevant to people who are homeless or at risk of homelessness is available to relevant agencies by March 2002.

Action 4.4.2 — Training programme

The Homeless Agency to develop an annual training programme, in conjunction with other relevant bodies for information and other service providers from January 2002.

Comment

The aim of the programme will be to enhance the capacity of generic services to deal with homeless people. The programme will be a mixture of skills development and information, based on imparting an understanding of homelessness, the needs of people who are homeless or at risk of homelessness and options available to them.

Action 4.4.3 — Homelessness Directory

The Homeless Agency will update, publish and distribute the Directory in October 2001, 2002 and 2003.

Action 4.4.4 — Hostels Online

The Homeless Agency to ensure that Hostels Online is kept up to date and widely used.

Comment

Hostels Online is an internet system showing vacancies in hostels, transitional and supported housing for people who are homeless.

Objective 4.5 — Promote services

The Homeless Agency to ensure that all services for people who are homeless are promoted and advertised in ways appropriate to people who are homeless or at risk of homelessness, from September 2002.

Rationale

Information on services and options for people who are homeless or threatened with homelessness is not readily available. In attempting to address this, it will be necessary to pay attention, not just to the type of information which is provided, but to the manner in which it is provided, to ensure that it impacts on the target group. Conventional methods of advertising may not be appropriate to all people who are homeless, many of whom are known to have low levels of literacy.

Action 4.5.1 — Strategy for promotion

By June 2002, the Homeless Agency to complete a strategy for the promotion of services, rights and options, targeted at homeless people and people threatened with homelessness. This will be based on consultation with homeless people, homeless service providers and experts in communication and advertising, for implementation from September 2002. (This will form part of the overall awareness programme proposed under Objective 3.4.)

Action 4.5.2 — Reviews

The Homeless Agency to carry out reviews of the promotion of services every six months.

Objective 4.6 — Quality standards

To ensure that all services providing advice and information have the necessary supports and resources to practice the agreed service standards in *Putting People First* and to review and develop these standards on an ongoing basis.

Rationale

Putting People First contains a section on advice and information services. The implementation of those standards within the sector has been patchy and it is the intention over the course of the plan to ensure a more consistent application. The standards will apply to all services, including local authorities which will implement a comprehensive housing advice and information service (see Objective 10.2).

Action 4.6.1 — Programme of support

The Homeless Agency to agree and implement a programme of support and assistance in ensuring that standards can be implemented, on an ongoing basis, in all advice, information and referral services.

Objective 4.7 — Legal advice and assistance

To ensure that people who are homeless have easy access to legal advice and assistance by January 2003.

Rationale

Many people who are homeless are in need of legal advice and assistance at different times and for different reasons, (e.g. eviction, barring orders, assault, harassment). Legal advice and assistance is difficult enough to access for low income people who are housed and much more so for people who are homeless. Achieving this objective will require a review of the needs of homeless people and an exploration of the options available to address those needs.

Action 4.7.1 — Establish working group

By November 2001, the Homeless Agency to establish a working group to review the legal advice and assistance needs of people who are homeless and to propose the most effective way of meeting those needs.

Action 4.7.2 — Implement proposals

To have in place a legal advice and assistance service for people who are homeless by January 2003.

Reducing street homelessness

Introduction

The previous section focused on the development of advice, information and referral services, one objective of which is to ensure that people are linked quickly into appropriate services, thereby preventing street homelessness.

This section concentrates on efforts to reduce current levels of rough sleeping. This will be done by increasing emergency and long term accommodation options for people who sleep rough; by developing alternatives to the street during the day and night; and by enhancing street outreach services, enabling them to make more effective interventions with people on the street, aimed at linking them to appropriate services and accommodation.

The target is to reduce current estimated number of 275 rough sleepers by two thirds. The figure of 275 is taken from the last official assessment in 1999, which found that number of people sleeping rough in the greater Dublin area. More recent street counts, by Dublin Simon and Dublin Corporation, have focused on the city centre only and have found 200 people sleeping rough.

It is unacceptable that people should sleep rough in Dublin and it is the ultimate aim to eliminate rough sleeping. However, this is not considered feasible to do in the time frame of this action plan, given the levels of rough sleeping, the shortage of housing and the chronic disabilities suffered by some people who sleep rough.

Other sections of the plan will also impact on rough sleeping and the sections on emergency accommodation, day and night centres, settlement, long term housing and health are particularly relevant. Where there are direct links between sections these are indicated in the text.

Aim this period

To reduce the level of rough sleeping in Dublin by two thirds, through the development of a range of accommodation and other alternatives to the street and by improving the delivery of services to people who sleep rough.

Context

Over the last five years, Dublin has experienced a steep increase in the number of people sleeping rough on the streets. The street count carried out as part of the 1999 official assessment of homelessness by the ESRI found 275 people sleeping rough. Most of these were men who tended to be younger than those staying in hostels. One in five of all rough sleepers was aged under twenty and half of these were women. It is thought that a high percentage of rough sleepers, particularly those in the younger age groups, are active drug users and a high percentage have a history of the care system. The 1999 assessment revealed that the problem of rough sleeping is not confined to the city centre and that there were individuals and groups of rough sleepers in suburban areas.

The general shortage of emergency beds and long term housing in Dublin is an obvious reason for rough sleeping but there are also various other reasons. Many people sleep rough because there is no emergency accommodation catering for their specific needs — many hostels have minimum age limits of twenty five, others will not accept couples, active drug users, people with challenging behaviour or particular support needs. Some people sleep rough because they do not like the restrictive rules and curfews operated by hostels or because they have social phobias inhibiting their use of services. Others fear attack or robbery in hostels or have been barred and others, particularly those with more pressing expenditure concerns such as heavy drinkers, find hostels too expensive.

Whatever the reasons for rough sleeping, street homeless people are the most excluded of all people in Dublin and represent a combination of the most vulnerable and most challenging of people who are homeless. They have most difficulty of all homeless people in accessing homeless and other services, due to a combination of their own chaotic lifestyles and the way in which services are organised. Their quality of life is low and their health and safety are constantly at risk — street sleepers are frequently subject to physical or sexual assault and robbery.

It is likely that people who sleep on the streets have experienced difficulties including family breakdown, prison, hospitalisation, drug, alcohol and mental health problems — or combinations of all these. The effect of homelessness on their self esteem can be devastating and this coupled with the day to day hardships of surviving on the street may lead to alcohol or drug use as a means of temporary relief. Continued exposure to life on the street increases their alienation and serves to undermine their motivation to move off the streets.

In addition to the people who sleep on the street, there are a number of others who spend a large part of their day on the street. Many of these are people who are resident in hostels which they have to vacate during the day. Others may have their own tenancies but are attached to street life, which offers them companionship and may be their only social outlet. These people suffer similar risks to the people who sleep on the street in terms of health, assault, heavy drinking or drug use and alienation — they may also be putting their tenancy or hostel place at risk and require support and access to other services which will open up alternative options to the street for them.

Early intervention by street services, linked to appropriate accommodation and other services, is the key to tackling rough sleeping. Street based services are aimed ultimately at facilitating a change in lifestyle in street sleepers, by linking them into other services so that they can move into accommodation, at their own pace. They are intrinsically valuable to homeless people in providing contact, friendship, food, bedding, information, and linkages to other services. They have

more far reaching value in being a part of the continuum of services for homeless people and the full potential of street outreach services cannot be realised unless other elements of that continuum are also working effectively.

Performance indicators

The following indicators of success in relation to street homelessness will be monitored throughout the period of the plan:

- The number of people sleeping rough (in total and by household type, age, gender and client group e.g. heavy drinkers; drug users; those with mental health problems)
- The average length of time spent sleeping rough since last permanent address
- The number of people sleeping rough contacted by street outreach workers (new and repeat)
- The number of people sleeping rough who move into accommodation (temporary and permanent) as part of a planned process
- The geographical coverage of street outreach services
- The number of days and hours that street outreach services are available
- The satisfaction level of homeless people with street outreach services

Objectives and actions

Objective 5.1 — Additional hostel places for people currently excluded

The Homeless Agency will ensure that at least one hundred additional places in emergency and other hostel accommodation are made available to rough sleepers, particularly those who experience difficulty in accessing existing hostel accommodation.

Rationale

Many people are on the street because there is an insufficient supply of emergency and move on accommodation. Others do not fit into the defined target groups of existing hostel and other services. The freeing up of hostel beds generally, through settlement, (see section eight) will make more accommodation available to rough sleepers. The actions in this section are specifically designed to address the difficulties experienced by some people in accessing accommodation, which leads them to sleep rough, and to link them into services which will eventually lead to their settlement.

Action 5.1.1 — Street drinkers

The Homeless Agency to ensure that proposals for a special accommodation project for twenty long term street drinkers is implemented by December 2001.

Comment

This accommodation will not be emergency but will provide accommodation for as long as is necessary and appropriate to its residents.

Action 5.1.2 — Active drug users

The Homeless Agency to ensure that proposals for an accommodation project which can accommodate up to twenty active drug users are implemented by December 2001.

Comment

This will provide short to medium term accommodation.

Other actions aimed at improving support and access to other services for drug users and heavy drinkers are dealt with in section eleven

Action 5.1.3 — 16 to 21 year olds

The Homeless Agency will ensure that emergency accommodation for 16–21 year old substance misusers is in place by March 2002.

Comment

This project, which will be jointly run by SVP and Focus Ireland, will provide 9 units for young men and women and health assessment on a night by night basis.

Action 5.1.4 — Low threshold hostel

The Homeless Agency will ensure the provision of a low threshold short term hostel for ten people who are difficult to place by virtue of their behaviour or condition and who otherwise sleep rough, to open by October 2002.

Comment

A low threshold hostel is one which targets people usually excluded from services because of their challenging behaviour and which is based on acceptance and minimum rules, regulations and questions.

Action 5.1.5 — Open up existing hostels to rough sleepers

In conjunction with hostel providers, the Homeless Agency to develop a programme of financial and other support which will enable hostels to offer places to people they usually exclude (e.g. young people, active drug users, people with support needs). *Linked to Objective 7.6.*

Comment

The accommodation will be assessed against the standards in *Putting People First* and be appropriate to the needs and preferences of potential users. This initiative should ensure the provision of 50 additional beds for rough sleepers, over the three year period.

Action 5.1.6 — Ring fence hostel beds

In consultation with hostel providers, the Homeless Agency to ensure that a number of emergency beds are ring fenced for people referred by street outreach teams during the day time. These beds must be appropriate to the needs and preferences of rough sleepers.

In year one this number should be ten, rising to thirty in year three. Additional financial and other support will be available for hostels participating in this programme. *Linked to Objective 7.6*

Action 5.1.7 — Online access for street outreach teams

The Homeless Agency to ensure street outreach teams have direct mobile access to Hostels Online, from September 2001.

Objective 5.2 — Extend access times of emergency accommodation

The Homeless Agency will, in conjunction with emergency accommodation providers, ensure that the times of access to all emergency accommodation is extended by January 2002.

Rationale

There is wide variety in the opening hours of hostels for homeless people. Two have twenty four hour access for residents, others have late night curfews and allow people to remain in the hostel during the day. Some still have very early evening curfews — people have to be in between 6 and 8, cannot leave again until the next morning and then must leave for the day (over 150 hostel residents currently fall into this category). Some of the emergency accommodation available through the private sector operate similar regimes. These restrictions make hostels unattractive to many people and directly contribute to rough sleeping at night and street life during the day.

The extension of the hours during which emergency accommodation is accessible would undoubtedly reduce the number of people on the streets. While the ideal is to have 24 hour access in all accommodation, this may not be necessary or feasible in all cases. The aim will be to ensure that people do have reasonable access (i.e. during the day time and with night time curfews appropriate to adults).

Action 5.2.1 — Review opening hours

The Homeless Agency to review current opening hours of existing hostels and Bed and Breakfasts and draw up schedule for providing extended access to emergency accommodation by September 2001, to be fully implemented from January 2002. *This action linked to Objective 7.7.*

Objective 5.3 — Improve direct access to long term housing

To improve the access of rough sleepers to long term housing options in the local authority, private rented and voluntary housing sectors

Rationale

Going through the hostel system as a means of securing long-term housing may not be necessary or desirable for all rough sleepers. Some are innately suspicious of hostels. Others may be resistant to staying in a hostel for other reasons. Where a rough sleeper is assessed as ready for long term housing, they should be facilitated and supported to access this housing directly from the street, through the following measures.

Action 5.3.1 — Ring fence local authority housing

From January 2002, each local authority will set aside a proportion of their ring fenced lettings (see Objective 10.3) for homeless people for recommendation by street outreach teams, to facilitate those rough sleepers requesting and accepted as ready for permanent housing, with or without supports as necessary.

Action 5.3.2 — Ring fence tenancies through Homeless Agency

The Homeless Agency will ring fence 5% of the lettings available to it through the voluntary and private housing sectors, each year for rough sleepers (See Objective 10.7).

Objective 5.4 — Drop in centres

To ensure that people who sleep rough or who are at risk of sleeping rough, have access to two 24 × 7 centres in Dublin city and one in Dun Laoghaire, from November 2001.

Rationale

This objective aims to ensure that in the immediate term, two drop in centres are available to rough sleepers and people at risk of rough sleeping when they most need them, during day time and night time hours. There is currently one night time service, available during the winter months only. This service has been effective in providing an alternative to the street for older men who habitually sleep rough and demonstrates the importance of such provision.

To be effective, these services must be attractive to the target group and therefore should be based on an ethos of acceptance and tolerance, with as few rules and restrictions as possible. Rules will be related to safety and behaviour. People will not be refused access on the basis of their having consumed alcohol or drugs. These services will work closely with street outreach teams and the free phone service. They will work with service users to link them into other services and move on accommodation.

In achieving this objective, it is intended to develop and expand existing services, rather than creating completely new services. Services will be provided directly by statutory bodies or through service contracts with voluntary organisations. The role of these centres will be reviewed as the levels of street homelessness is reduced and hostel opening times increased.

This is closely linked to Objective 6.1 which will complete a plan for day and night centres for the Dublin area.

Action 5.4.1 — Night time service for older men

From October 2001, provide the Crosscare night time service on an all year basis.

This service will provide shelter for 25 men, over 35 years of age, who usually sleep rough.

Action 5.4.2 — Quality standards

In conjunction with Crosscare the Homeless Agency will draw up quality standards and performance indicators for the service, by October 2001. These will ensure that the service is focused on moving service users to appropriate long term accommodation.

Action 5.4.3 — 24 × 7 centres

From November 2001 ensure the provision of two 24 × 7 centres in Dublin City, one of them targeting women and families, and one centre in Dun Laoghaire.

Comment

These will be provided by existing services, on terms agreed with the Agency. Terms will include arrangements for monitoring, evaluation, physical and services standards, staffing levels and skills, training etc.

Objective 5.5 — Responding to people with mental health, drug and alcohol problems

To improve the response to people on the streets with mental ill health, drug addiction and alcohol problems.

Rationale

Among rough sleepers are a high percentage of people with mental ill health, drug or alcohol addiction or combinations of all of these. It is important that street outreach teams make accurate initial assessments of the needs of people

they contact, in order to provide appropriate intervention and referral. It is also important that, once having made the assessment, that street outreach teams can access the appropriate services on behalf of rough sleepers.

Action 5.5.1 — Training

The Homeless Agency to ensure that training is provided in mental health, alcohol and drug awareness training for street outreach teams, commencing in September 2001.

Comment

This training will be provided by health professionals and will be ongoing. The training will be devised in conjunction with street outreach teams and will focus on assessments, harm reduction and health promotion.

Action 5.5.2 — Specialist on-call support

The Homeless Agency to ensure that, by November 2001, street outreach teams and night centres have access to on call support services to street outreach teams, together with rapid access to specialist assessment, treatment and follow up. *Linked to Objectives 11.8 and 11.9.*

Comment

As already stated, many rough sleepers have problems with alcohol, drugs or mental health, some of them with combinations of all of these. It is crucial to maximise opportunities to link them to assessment and treatment and to provide support to street outreach workers in making appropriate links and referrals. These opportunities are most likely to arise either as people are waking, early in the morning, or bedding down, late at night — times when most treatment services are not readily available. It is intended that the on call services should be available through existing mainstream services, rather than the creation of a completely new service.

Action 5.5.3 — Drug and alcohol consumption centres

By December 2002 the Agency to have completed a study into the feasibility of opening drop-in centres where alcohol and drugs could be consumed.

Comment

Many of the people who are on the streets either at night time or during the day, are known to have drug or alcohol dependencies. These may make them uninterested in or resistant to the idea of moving off the streets. They also expose them to serious health and other risks. Heavy drinkers are particularly vulnerable to assault, often from members of their drinking circle, and to hypothermia when their drinking renders them insensible to the elements. Unsafe practices by drug users leaves them open to infection and overdose.

Providing a place where drug and alcohol consumption takes place in a controlled environment will reduce the risks associated with consumption in an uncontrolled environment such as the street. It would also help to stabilise people using the service, laying the foundation for progression from the streets and providing an opportunity for services to engage with people who are heavy drinkers or drug users.

Note: Objective 11.9 provides for the promotion of safe drug and alcohol use, in all homeless services, including those for people on the street.

Objective 5.6 — Improve street outreach services

To improve the operation, coordination and capacity of existing street outreach services to provide high quality proactive services to homeless people on the streets, on an ongoing basis, from March 2001.

Rationale

To be effective, street outreach services must be available when rough sleepers most need them and when they are most motivated to being linked to other services. Evidence from the UK indicates that some of the most effective street outreach work can be done in the very early hours of the morning, as rough sleepers are waking up, or very late at night as they go to sleep. While there are currently some street outreach services in Dublin, they are unable to provide a comprehensive service, in terms of presence on the street or follow up of people they have made contact with. This is made all the more difficult by the continual increase in the number of people on the street.

Access to other services is as important as the availability of street services. However good street outreach teams may be, they cannot be effective if there is no accommodation or other services to refer people on to. Access to accommodation will be improved by the actions under Objective 5.1 in this section. Access to treatment will be improved by actions under Objective 5.5. Other measures which will address the needs of rough sleepers are contained in section eleven on health services. Access to other services, such as advice and information, training, and settlement will be provided primarily through the development of day and night services, objectives for which are contained in the section six. The expanded street outreach services will work in conjunction with all homeless services but in particular with day and night services.

Action 5.6.1 — Increase street outreach teams

Dublin Corporation to adequately resource the street outreach teams provided by Focus Ireland and Dublin Simon to provide a comprehensive service (seven day/night) in Dublin city, with effect from March 2001.

Action 5.6.2 — Quality standards

The Homeless Agency to ensure that all street work services have the necessary supports and resources to work towards achieving the agreed service standards in *Putting People First* and to review and develop these standards on an ongoing basis.

Action 5.6.3 — Street monitor

In conjunction with street outreach services and expert technical assistance, the Homeless Agency to develop a confidential database on individual service users, their location, any movements in and out of homelessness and outcome of service intervention. This information will provide data on street homelessness and inform homeless service development to be operational by June 2001.

Comment

The system will also be used by day and night services and other homeless services. Reports will be published quarterly over the plan time frame.

Action 5.6.4 — Street outreach network

The Homeless Agency, with street outreach services, to establish a network of street outreach service providers. The network will be supported by the Agency.

It will commence in April 2001 and meet bi-monthly to share information, report on trends, identify emerging needs and other issues of relevance to rough sleepers and to identify support, training and other issues of relevance to street outreach workers.

Objective 5.7 — Plan for street outreach services

To complete a plan for street outreach services in the Dublin area by September 2001.

Rationale

There are a number of different services currently working on Dublin city streets, with a range of different target groups, objectives and working practices. There are only embryonic street outreach services in areas outside of Dublin city, although people are known to sleep rough in some of these areas.

The aim of the street outreach plan will be to ensure that people on the street, in all parts of Dublin, have access to accommodation and other services, through proactive contact, advocacy and referral by street outreach teams. The plan will also ensure that there is coordination of the various street outreach and related services, that the most effective and efficient use is made of these services and that arrangements are made for re-deploying these services as rough sleeping is reduced.

Action 5.7.1 — Development of plan

The Homeless Agency to establish, by April 2001, a working group to develop a plan for street outreach services, to be completed by September 2001. The working group will comprise current street outreach service providers (including services not specifically targeting homeless people) and representatives of relevant local areas, outside the city centre,

Comment

The working group will:

- Establish the extent, nature and location of existing street outreach services
- Review the forthcoming evaluation of existing street outreach services to homeless people
- Seek the views of rough sleepers and other stakeholders
- Assess service use, gaps in services and the needs of people on the street
- Review best practice in other cities
- Make proposals for a comprehensive service, including arrangements for special services during the winter months

Action 5.7.2 — Plan for future delivery

The Homeless Agency to submit plan to the Consultative Forum and the Board for consideration at their July meetings, for implementation from September 2001.

Objective 5.8 — Funding scheme

To put in place an interim funding scheme for street outreach services by January 2001 and replace this with an appropriate long-term funding scheme to be operational by January 2002.

Rationale

There is no rational scheme of funding for street outreach services. What funding does exist is ad hoc and is neither related to the cost of providing services, nor to the effectiveness of such services.

Action 5.8.1 — Interim funding scheme

Dublin Corporation will agree, with service providers, interim funding scheme for street outreach services to apply from January 2001.

Action 5.8.2 — Long-term funding scheme

The Homeless Agency to develop, in consultation with street outreach services and other relevant agencies, proposals for a scheme of funding, together with standards and outcomes, for street outreach services to be submitted for approval by July 2001 and implementation from January 2002.

Objective 5.9 — Research project

To complete a study into street life in Dublin and the effectiveness of current responses by September 2002.

Rationale

The long term vision for homelessness in Dublin is that rough sleeping will be eliminated by the year 2010. If this is to be achieved, it will be necessary to improve our understanding of rough sleeping and street life.

In particular we need to know if some rough sleepers actually do prefer the street to other living arrangements and, if this is so, why it is and what responses are appropriate to that situation. We also need to fully understand the circumstances which give rise to rough sleeping in order to make more effective interventions which will prevent rough sleeping. In addition, we need to understand the sort of supports that people leaving the street will require to make successful settlement and integration and what alternatives can be developed for people who do not sleep on the street but are part of street life in Dublin.

The research will be based on in depth interviews with a sample of rough sleepers, former rough sleepers and other people who are part of Dublin street life.

Action 5.9.1 — Establish working group

By April 2001, the Homeless Agency to establish an expert working group to draw up terms of reference for the research project

Action 5.9.2 — Complete research

The Agency to commission research to commence in June 2001 and be completed in September 2002.

Action 5.9.3 — Review research findings

The research will make a number of recommendations. These will be reviewed and recommendations will be implemented with immediate effect. The research will inform the development of a second plan for street outreach services to be completed by September 2003.

Developing the role of day and night centres

Introduction

Day centres are an important element in the overall continuum of services for people who are homeless. At a minimum, they are a valuable provider of affordable and nutritious food to people who are homeless. They are also an important contact point, both for people while they are homeless and for people who have settled following homelessness.

The provision of night centres is undeveloped and provision for three all year night centres is contained in the previous section. Both day and night centres have the potential to play a more central role in the provision of services to people who are homeless and this section concentrates on the development of a plan for these services.

Aim this period

To ensure that people who are homeless have access to day and night services which will offer a safe alternative to the street with linkages to other services and that the potential of these services, in addressing the needs of people who are homeless, is developed fully.

Context

There are a number of day centres for homeless people in Dublin city centre. Most of these are open for five or six days a week, with limited opening hours. For the last two years, one night service has been operating, during the winter months only, between the hours of 11.30 p.m and 7.30 a.m. There is only one day time food service outside of the city, in Dun Laoghaire.

Current provision is very varied in the type of service provided. Most day centres provide food only and do not engage with service users in any other way. Some provide a range of additional services including advice, information, referral, advocacy, social activities, personal development and educational activities. Most services are either specifically targeted at, or are used primarily by, older men. This in effect excludes younger people and women, for whom there is no specific service.

Day centres are currently an important element of the continuum of services needed to address the needs of people who are homeless, particularly as they may be the only service used by some people. They are of particular importance to rough sleepers who have no other base, but also have a role to play in addressing the needs of people who are in hostels or Bed and Breakfasts and can be an important source of support and contact for people who have settled from homelessness.

The Crosscare night service has been full every night in the two winters it has been open. People using the service are rough sleepers, many of whom have been barred from hostels or who refuse to avail of hostel beds. The success of the night service in engaging with these men and linking some of them to other services illustrates the importance and effectiveness of low threshold services. Such services, of which the night services is an example, are based on an ethos of acceptance and tolerance, so that homeless people will use them in the first place, and are committed to working with service users to link them into other services and move on accommodation, at their own pace.

Existing services have the potential to be developed to provide a wider range of services themselves and to facilitate the provision of services on site by other providers, such as health, training and education. Night time services have an important role in providing alternatives to the street and in being a point of contact for people who become homeless during the night.

To achieve the aim of ensuring that homeless people have access to day and night centres, it is intended to develop and expand existing services, rather than creating completely new services.

Performance indicators

The following indicators of success in relation to day and night support services will be monitored throughout the period of the plan:

- The number of repeat and new customers using day services (in total and by age, gender, household type and client group)
- The number of repeat and new customers using night services (in total and by age, gender, household type and client group)
- The satisfaction levels of customers of day and night services
- The number of food centres who have carried out an assessment against the *Putting People First* standards and agreed an action plan for implementation
- The number of people using day and night centres who avail of health, training and education on site

Objective 6.1 — Plan for day and night services

To complete a plan for the future delivery of day and night time services in the Dublin area by March 2002.

Rationale

To be effective the role of day and night services must be clearly defined, both in terms of the services provided through them and their role in the overall continuum of services for people who are homeless. The services will offer as a minimum, food, social contact, initial assessment, advice, information and referral to accommodation and other services. This objective is closely linked to objective 5.4 which establishes two 24 × 7 centres for people who are homeless in Dublin city and one in Dun Laoghaire.

Action 6.1.2 — Establish working group

The Homeless Agency to establish, by June 2001, a working group of existing day service providers to draw up and monitor the implementation of a plan for day and night services.

Comment

The purpose of the working group will be two fold:

- To involve service providers in the development of a plan for the future of day and night service provision for homeless people in the Dublin area
- To provide a forum through which the plan can be monitored and day and night services providers can share information, report on trends and emerging issues and identify support, training, other issues of relevance to them.

The plan will include details on:

- The range of services to be provided by which centres
- Centres to be located in areas outside of Dublin city
- The role of day centres in providing support to people following settlement
- How day services will link with mainstream and other homeless services
- Training and other resource needs of centres prepared to expand services
- Performance measurements, monitoring and evaluation arrangements for all services
- Redeployment of services as homelessness is reduced
- Implementation

Objective 6.2 — Quality standards

To draw up and implement physical and service quality standards for day and night centres to ensure they provide an environment which is welcoming, safe and sociable and that all services are focused on continuous improvement.

Action 6.2.1 — Steering group

The Homeless Agency to establish a small group of service providers to work with a consultant to draw up standards for day and night services together with a plan for implementation, including costing. This work will be completed between September and December 2002. The standards will be added to *Putting People First*.

Objective 6.3 — Food review

To complete a review of the role of food centres in meeting the needs of homeless people and other users by March 2002

Rationale

There are eight centres in Dublin providing food to people who are homeless and to other people. It is likely that these centres provide an important social service, beyond the nutrition they provide to people. The role of food centres has never been examined or evaluated. Food is also an important component of services in hostels and in some other services.

This review will begin with the general review of day services and will build on this review, focusing specifically on food issues.

The purpose of the review will be establish:

- who uses food centres
- what they think of the centres
- the range of food served in centres
- the value of food centres, beyond food
- the range of food served in hostels and other services
- what people think of this food
- the nutritional content of food served generally
- the potential of food and food services in addressing the needs of homeless people and other users

Action 6.3.1 — Review food centres

The Homeless Agency to commission independent consultant to carry out the review to be completed by March 2002.

Objective 6.4 — Health, education, training and other services in day and night services

To ensure that health providers, including the multi-disciplinary teams, FAS and the VEC utilise day and night services to make contact with people who are homeless, deliver services and link people with mainstream services, from April 2002.

Action 6.4.1 — Services in day and night centres

Day and night centres to facilitate other services, including health, training and settlement, to provide their services on in the centres, from April 2002.

Objective 6.5 — Funding scheme

To put in place, by January 2002 a scheme of funding for day and night centres.

Rationale

There is no specific scheme of funding for day or night services. As a result these services are generally under resourced. As with other funding for homeless services, funding for day and night services should be linked to standards and outcomes, over time.

Action 6.5.1 — Funding scheme

The Homeless Agency, with service providers, to establish, implement and monitor a system for costing day and night services, based on the needs of people using the services, range of services delivered and outcomes of service intervention. Arising from this agree a new scheme of funding and implementation plan. This will be completed by June 2001, for implementation from January 2002.

Improving emergency accommodation and addressing gaps in supply

Introduction

Emergency accommodation is a core element of the range of services to people who are homeless. Almost two thousand people are currently in emergency accommodation in Dublin and there are still many people who need accommodation but who cannot or do not access it. Of the people in emergency accommodation, many are there on a long term basis.

Actions in section five aim to improve the access of people sleeping rough to emergency accommodation. Actions in this section aim to address the gaps in such accommodation make improvements in physical and service standards and ensure that emergency accommodation is used on a short-term basis only.

Aim this period

To address the current gaps in the supply of emergency accommodation provision, ensure that there is an adequate supply of such accommodation and that it is effective at meeting the needs of residents, focused on settlement and used on a temporary basis only.

Context

Emergency accommodation is an important element in the continuum of services for homeless people. However, it has never been planned or organised as a part of a continuum — rather it has been seen as *the* solution to homelessness — with little attention given to moving people on from emergency accommodation into more appropriate housing. As a result, much of what is described as emergency accommodation is actually providing medium and long term accommodation.

Emergency accommodation is provided in the form of hostel, Bed and Breakfast and refuges — for women escaping domestic violence. The hostels and refuges are all located in the city area and although Bed and Breakfast is located throughout the Dublin area, most of it is in the city. Referrals to accommodation are usually made through the central Homeless Persons Unit but the introduction of Hostels Online has made it possible for referrals to be made from a number of other access points and there is a need for this facility to be developed.

Voluntary organisations are the main providers of hostel accommodation, although Dublin Corporation has also become an important direct provider in the last four years. The corporation, through Its Homeless Policy Unit, has also secured significantly increased supply of emergency accommodation through contracts with private providers. Funding for hostels comes from the Department of Environment & Local Government, through local authorities. Annual grants are paid according to the number of beds in a hostel. Bed and Breakfast accommodation is provided by private owners, on a contract basis, for local authorities. Under these contracts, beds are paid for on the basis of a nightly rate. Of the two refuges in the area, one is provided by a voluntary organisation, with funding from the health board and the other is provided directly by the health board.

There are currently 681 emergency beds in hostels and women's refuges. Most beds are for men only, with only 136 hostel and 20 refuge beds available for women, either on their own or with children. There is no hostel for couples, two parent families or men with children. The practice of placing homeless people in Bed and Breakfast accommodation has developed as a means of addressing these gaps in supply. The number of Bed and Breakfast beds fluctuates but in October 2000 there were 450 households accommodated in Bed and Breakfast accommodation, accounting for approximately 1,130 beds. This compares to a total of 629 for the twelve months of 1996. The use of Bed and Breakfast is controversial primarily because it is seen as a low quality and high cost option.

The rules and regulations in some hostels render them unattractive to some people, and lead to other people being barred. As a result, homeless people may sleep rough because they do not meet the entry criteria of emergency hostels. These include young people, couples and people with challenging behaviour or particular difficulties such as mental ill health, drug or alcohol dependencies (see also section five). Arrears of hostel rental payments are also a significant reason for people being barred from hostels.

Putting People First sets out a range of service standards for emergency accommodation. These include referral and assessment procedures, advice, information, and support services. Physical standards relate to health and safety regulations, non institutionalised accommodation with private rooms and en suite facilities. Service standards relate to assessment, referral and settlement. Application of the standards is uneven. Many hostels have been upgraded to high physical standards in recent years, offering single bedroom accommodation. Some have not been altered in many years and offer poor quality accommodation. There is wide variety in the type of services provided by hostels ranging from key working, to basic advice and information to no service beyond the provision of food, shelter and spiritual guidance. Similarly there is no consistency in the access, assessment, referral or opening times of hostels.

Performance indicators

The following indicators of success in relation to emergency accommodation will be monitored throughout the period of this plan:

- The number of designated emergency accommodation beds (in total and by household type, gender and client group)
- The geographical spread of emergency accommodation
- The percentage of residents who are local to the area
- The average length of stay in emergency accommodation
- The occupancy level of emergency accommodation

- The number of referrals refused because of lack of beds
- The number of residents who have a holistic assessment completed
- The number of residents barred
- The number of hostels that have carried out a quality assessment against the *Putting People First* standards and drawn up an action plan for implementation
- The level of resident satisfaction
- The number of people in emergency accommodation where the residents are not allowed to remain in the accommodation throughout the day and do not have access to cooking facilities

Objectives and actions

Objective 7.1 — Address gaps in supply

To fill the gaps, already identified, in the supply of emergency accommodation in Dublin by providing an additional 240 hostel and refuge places by October 2002.

Rationale

A number of gaps have been identified in emergency accommodation provision, namely for families, young people and couples and in all areas outside of Dublin city. Addressing these gaps will be a priority for the plan in this time frame. However, given what is known about the tendency for emergency accommodation to become blocked because people do not have access to move on housing, any new hostel provision will include provision for pathways out of emergency accommodation into appropriate transitional and long term housing.

Provision under this objective is additional to that referred to under Objective 5.1 which is specifically targeted at people who sleep rough, although an increase in the general supply of emergency accommodation will have an impact on levels of rough sleeping. In total, an additional 300 places will be made available over the time of the plan. These places will be provided by local authorities directly or through contract with other bodies.

Action 7.1.1 — Dun Laoghaire/Rathdown

By October 2002 Dun Laoghaire/Rathdown County Council to have provided the following emergency accommodation: 10 self contained units for families; 15 units for single men and women; and 8 units for single men and women aged over 30.

Comment

The accommodation will be provided either directly by the council or through contract with a voluntary or private body. The County Council will ensure that the hostels operate according to the standards in *Putting People First* and that arrangements for pathways out of emergency accommodation into appropriate transitional or long term housing are in place.

Action 7.1.2 — Fingal County Council

By October 2002 Fingal County Council to have provided the following emergency accommodation: 10 units for families and 10 units for young people (18 to 25).

Comment

The accommodation will be provided either directly by the council or through contract with a voluntary or private body. The County Council will ensure that

the hostels operate to according to the standards in *Putting People First* and that arrangements for pathways out of the hostel into appropriate transitional or long term housing are in place. Accommodation for families will include access to cooking facilities.

Action 7.1.3 — South Dublin County Council

By October 2002 South Dublin County Council to have provided the following emergency accommodation: 12 units for families; 16 units for young people under 28 (including provision for active drug users) and 10 units for people over 28.

Comment

The emergency accommodation to be provided will be located in Tallaght and Clondalkin as these are the main areas where homelessness occurs. Emergency units will be self contained, with flexible access hours and operate according to the standards in *Putting People First* and that arrangements for pathways out of the hostel into appropriate housing are in place. Accommodation for families will include access to cooking facilities.

Action 7.1.4 — Dublin Corporation

Dublin Corporation to have provided the following units of emergency accommodation developed according to the standards in *Putting People First*.

Target Group	Units	Direct/Contract	Target Date
Couples without children	12 units	Direct	March 2001
Women drug users with children	20 units	Contract	December 2001
Women aged 18 to 25	25 units	Contract	June 2001
Women over 25	20 units (in two places)	Contract	June 2002
Women with children	20 units	Contract	December 2001
Men under 25 drug free	25 units	Contract	June 2002
Couples with children	10 units	Contract	December 2001

Objective 7.2 — Address gaps in refuge accommodation

To address the gaps in supply of emergency refuge accommodation for women and children fleeing domestic violence

Rationale

The needs of women escaping domestic violence is such that they require specialist emergency provision in the form of refuges which offer a safe and friendly environment within which abuse can be disclosed and tackled and where women are empowered to make informed independent choices for themselves and their children.

Experience indicates an excess of demand over supply for refuge places, in all parts of Dublin. It also indicates that refuges, like other temporary accommodation for people who are homeless, has become blocked due to the lack of move on housing and any new refuge accommodation will include the provision of clear pathways out of it and into appropriate transitional and long term housing.

Action 7.2.1 — Refuge in Blanchardstown

Fingal County Council to make provision for a refuge with capacity for eight families in Blanchardstown by April 2001.

Action 7.2.2 — Refuge in Tallaght

South Dublin County Council to make provision for a refuge with capacity for six families in Tallaght by September 2002.

Action 7.2.3 — Refuge in Dun Laoghaire/Rathdown

Dun Laoghaire Rathdown County Council to make provision for a refuge with capacity for 5 families by September 2002.

Objective 7.3 — Review use of bed and breakfast accommodation

To review and plan for the future role of emergency accommodation provided through contract with private owners.

Rationale

The use of Bed and Breakfast accommodation is controversial and the Government Strategy requires that it should be eliminated except for emergency use.

The general understanding of Bed and Breakfast is that it is made up of very low quality accommodation, without laundry or cooking facilities and which residents must leave during the day. This does not fit the description of much of the Bed and Breakfast currently in use in Dublin. Due to intensive efforts by Dublin Corporation, much of the emergency accommodation is no longer Bed and Breakfast, as it is generally understood, but is in fact shared private rented apartment type accommodation. These properties are regularly inspected and the use of accommodation which does not meet specified standards, including day time access, has been phased out.

In October 2000 there were 1130 units of accommodation in 'Bed and Breakfast' or other privately run accommodation for homeless people, most of them families. Of this accommodation 704 were actually apartments (most of them shared), 299 were in Bed and Breakfast but with 24 hour access. There were 128 places where people had to leave for at least 4 hours each day.

This information indicates that Bed and Breakfast accommodation as it is generally understood, is in fact in the process of being phased out in Dublin and replaced by more appropriate accommodation, provided by private contract. Given the level of demand, it is unlikely that this can be phased out in the short term and the challenge is to ensure minimum standards of accommodation and services. In the long term, questions remain about whether private leasing is an appropriate and cost effective response to the needs of homeless people.

Action 7.3.1 — Review of Bed and Breakfasts

By June 2001, the Homeless Agency, in conjunction with other relevant agencies, to have completed a review of the use of 'Bed and Breakfast' accommodation in Dublin.

Comment

The review will include: costs, nature of contracts, standards of accommodation, profile of people in accommodation, process for placement of people in accommodation, etc.

Action 7.3.2 — Agree plan for use of private leasing

Based on the review a decision will be made by the Board of the Homeless Agency about the use of private leasing of emergency accommodation for homeless individuals and families at its meeting in September 2001.

Objective 7.4 — Reclassifying emergency accommodation

By March 2002, to complete a review of all emergency accommodation to ensure clarity as to whether facilities are for emergency, medium or long term use and to ensure that each is suitable to its use.

Rationale

There are ten hostels in Dublin, which are described as emergency. Of these, seven estimate the average length of stay of residents to be six months. One has an average length of stay of one year and two of between fifteen days and three weeks. The length of stay in Bed and Breakfast also currently averages six months and it is known, from the official assessment of homelessness in 1999 and from service providers, that a significant proportion of people live permanently in hostels.

There are a number of reasons why emergency beds are used on a long term basis. Firstly, there is currently an absolute shortage of housing which makes it difficult for all homeless people to move on. Secondly, there has always been a shortage of suitable accommodation for single people, leading to the situation where many have little choice but to stay in hostels. Thirdly, within the hostel system there is a high proportion of people with support needs who are unable to move on without assistance. This assistance is generally unavailable and these people become stuck in the system. Fourthly, the ethos of some hostel providers is such that while they offer emergency accommodation, they do not place time limits on the stay of residents, offering them a place for as long as they want it. Finally, funding arrangements may have dictated that what is actually designed to offer long term accommodation to people who are homeless is described as emergency or hostel accommodation.

In order to make effective assessments of the levels of homelessness and trends in homelessness, it is necessary to have clear definitions, not just of homelessness, but also of the services for homeless people. People who are living long term in accommodation, which is suitable for that use, are not strictly speaking homeless, although under current definitions they may be counted as such. Redefining accommodation which is currently classified as emergency must include an assessment of the suitability of the accommodation, and services attached to the accommodation, for the current residents and target groups.

Action 7.4.1 — Establish needs and preferences of people long term in emergency accommodation

The Homeless Agency to establish, by October 2001, the housing needs and preferences of people who are in hostels and other emergency accommodation for two years or more.

Comment

The assessment of homelessness carried out by the ESRI on behalf of the Homeless Initiative revealed that over 700 people had been homeless for two years. Of these 420 had been homeless for at least all of the previous five years and of these 160 were aged over 65.

This situation is unacceptable for a number of reasons:

- Accommodation which was designed to shelter people on a temporary basis, does not provide suitable long term housing
- The blocking up of hostels by people who remain in them long term causes a shortage of emergency accommodation
- Hostel accommodation is much more expensive to provide than mainstream housing and its use as permanent housing represents an inefficient use of resources
- People who are long term in hostels are often institutionalised, with related lower quality of life
- Homelessness should be a short term condition

The assessment will be carried out, using a standardised assessment tool, by settlement workers, in conjunction with health board personnel. It will aim to establish the needs of people in terms of whether they are able to live in conventional housing with or without support, whether they need housing with on site support and their preferences in terms of housing type and location.

Action 7.4.2 — Plans and preferences of hostel providers

The Homeless Agency to establish, by September 2001, whether hostel providers currently housing people long term wish to be involved in long term, emergency or supported accommodation.

Comment

Hostel providers will be invited to express their preferences, in the context of the needs of homeless people.

Action 7.4.3 — Objective criteria

By January 2002, the Homeless Agency to establish objective criteria about the providers and the accommodation to ensure that all accommodation services for homeless are appropriate and of an adequate standard.

Comment

The establishment of objective criteria and assessment of services will be carried out by Dublin Corporation settlement workers, in conjunction with the Homeless Agency and Environmental Health Officers (EHOs). The settlement workers will survey hostel providers and provide them with support and guidance on what options are realistic. The EHOs and the Agency will provide support and information to settlement workers on appropriate physical and other standards.

Action 7.4.4 — Reclassify emergency hostels

The Homeless Agency to complete a plan outlining the future use of hostel accommodation which currently houses people on a long term basis by March 2002.

Comment

It is possible that the objective of securing more suitable housing for long term hostel residents may be achieved through changes in the hostel, rather than in all cases moving people on. This is particularly so where 'hostels' may in fact have been designed to offer long term accommodation but because of funding streams and other factors have continued to be described as hostels.

Action 7.4.5 — Plan to meet the needs of people in hostels

Arising from the assessment the Homeless Agency to complete a plan to ensure that the housing, care and support needs of people who are long term residents of hostels are appropriately met for implementation from September 2002.

Comment

This plan will include:

- Proposals on the number of :
 - conventional housing units in the local authority or voluntary housing sectors
 - supported housing units provided by health boards, local authorities or voluntary organisations
 - transitional housing units
 - the number of places required in special care units (e.g. for elderly, infirm, mentally ill)
 - details on any off site support or care services.

Objective 7.5 — Make emergency short term

To ensure that, by the end of the plan time frame, no one is in emergency accommodation for longer than six months

Rationale

The ultimate aim is to ensure that the length of stay in emergency accommodation is reduced to a number of weeks at most. This will not be achievable in the term of this plan, given the number of people who are currently long term in the system and the lack of immediately accessible move on accommodation.

However, it will be possible to reduce the length of stay to six months during the course of the plan. This will be achieved by the provision of additional transitional and long term housing (see sections nine and ten), through the allocation of settlement workers to individual hostels and through building the capacity of hostel staff to advise and support residents towards settlement.

Action 7.5.1 — Settlement services for all emergency accommodation

The Homeless Agency will ensure the provision of settlement services in all emergency accommodation by March 2002. This will be achieved by increasing the number of settlement workers employed by Dublin Corporation (see objective 8.2) and through the provision of resources to emergency accommodation providers to provide on site settlement services.

It will be the role of settlement workers, whether from Dublin Corporation, or attached to the accommodation, to assess what long term accommodation option is appropriate for each resident, to access that accommodation on behalf of each resident and to provide the necessary training and support for residents to facilitate them towards settlement. More details on the settlement process are contained in section eight.

Action 7.5.2 — Build capacity of hostel staff

The Homeless Agency to provide training and support to hostel staff in preparing residents for settlement from September 2001. This training will be devised by the Agency in conjunction with settlement workers and hostel staff. It will include skills in assessment, observation and motivation.

Comment

Hostel staff have a pivotal role to play in assisting residents towards settlement and in assisting settlement workers to identify potential needs, given that they can observe residents over time.

Objective 7.6 — Improve physical and service standards

To ensure that, from January 2001, all new emergency accommodation projects are provided in accordance with the standards in *Putting People First* and that all existing projects are in accordance with the standards by September 2007.

Rationale

Physical and service standards vary from emergency accommodation to emergency accommodation. In order for continuum of care to be effective, similar standards of service and accommodation must apply in all services. There must be common assessment and recording procedures, with standard policies in relation to referral, confidentiality etc.

Achieving this for new projects will be straightforward and linked to funding. For existing projects the standards will be phased in over time. As with the development of standards generally, this will be achieved through the provision of advice, support, training and financial assistance as appropriate.

Action 7.6.1 — Support programme

The Homeless Agency to devise a programme of support for those hostels which will continue to provide emergency accommodation. The programme will be implemented with effect from October 2001.

Action 7.6.2 — Staff network

The Homeless Agency to establish a network of staff in emergency accommodation by May 2001.

Comment

The network will be supported by the Agency. It will commence in May 2001 and meet bi monthly to share information, report trends, identify emerging needs and other issues of residents in emergency accommodation. It will also identify support, training and other issues of relevance to staff in emergency accommodation.

Action 7.6.3 — Training programme

Arising from the network, the Homeless Agency to establish a training programme specific to staff of emergency accommodation. The training will be ongoing, subject to review and will commence in October 2001.

Action 7.6.4 — Audit of emergency accommodation

The Homeless Agency to complete an audit of emergency accommodation and assess current provision against the quality standards in *Putting People First* by March 2002.

Action 7.6.5 — Plan for implementing standards

The Homeless Agency to complete a plan for the implementation of the standards in all emergency accommodation by June 2002.

Action 7.6.6 — Implement plan

The Homeless Agency to ensure that the standards are implemented in all emergency accommodation by September 2007 and in all new projects from January 2001.

Action 7.6.7 — Statutory regulations

By June 2003 each local authority to have introduced bye laws for the regulation of standards in emergency accommodation and a system for the annual inspection of hostels and other emergency accommodation to ensure compliance with health, safety and fire and other regulations.

Note: measures to ensure that all emergency accommodation is accessible for extended hours are contained in Objective 5.2.

Objective 7.7 — To ensure that emergency accommodation meets the needs of people who are homeless

Rationale

Section four has outlined the groups of people who for whom emergency accommodation is not currently available and who, as a consequence sleep rough. While the measures under Objective 5.1 will go some way to meeting the gaps in services, it is important to ensure that all emergency accommodation is targeted at people who need it rather than at groups providers are comfortable with. Achieving this will require changes in the acceptance criteria and barring policies of some emergency accommodation.

Action 7.7.1 — Review access criteria

In conjunction with providers, the Homeless Agency to review, by December 2001, the access criteria in all emergency accommodation and develop a programme of support to enable providers to accommodate people they might otherwise not accept, to apply from January 2002.

Action 7.7.2 — Review barring policies

By December 2001, and in conjunction with providers, the Homeless Agency to review barring policies with a view to ensuring consistency between services and the application of fair and reasonable policies, to be phased in from June 2002.

Action 7.7.3 — Household budget scheme for residents

By March 2001 the Agency to lobby the Department of Social, Community and Family Affairs for the extension of the Household Budget Scheme to hostel residents, to avoid people being barred for non payment of rent.

Comment

Failure on the part of hostel residents to keep up to date with hostel rental payments is a common reason for people being barred from hostels. The extension of the Household Budget Scheme to hostels would allow rental payments to be deducted at source from social welfare payments, thereby reducing the risk of loss of accommodation.

Objective 7.8 — Complete plan for emergency provision

By September 2003, the Homeless Agency will complete a plan for emergency accommodation over the coming three years.

Rationale

Over the term of the plan, the level of demand and the type of needs for emergency accommodation will change, as new services are brought on stream and more long term housing is secured. Thus it will be necessary to review current supply and plan for the subsequent three years.

Action 7.8.1 — Working group

By March 2003 the Homeless Agency to establish a working group of emergency accommodation providers, local authorities and other homeless service providers, including street outreach, settlement and day and night service providers.

Comment

Using the information from the official assessment of homelessness and other relevant data, the working group will:

- Review trends in homelessness
- Review likely needs for emergency accommodation in the future
- Review practice in emergency accommodation
- Make recommendations on the future extent and nature of emergency accommodation

Action 7.8.2 — Submit plan

The Homeless Agency to submit the plan for emergency accommodation to the Consultative Forum and the Board for consideration at their meetings in September 2003 for inclusion in the Action Plan 2004–2006.

Settling people in the community

Introduction

The government strategy requires that the settlement of people into the community should be an overriding priority of local action plans. Ensuring that people can settle successfully requires action on a number of fronts. Firstly there must be an adequate supply of appropriate long term housing, both mainstream and supported. There must be adequate support services at local community level for people who have settled and who may be vulnerable to returning to homelessness. There must be access to specialist settlement services for to people to assist them to settle.

This section describes the settlement and other services necessary to support people in settlement and sets out the objectives and actions which will ensure that these are available. Transitional housing is an essential element of the settlement process for some people and provision for this is made in the following section. The actions to ensure improved access to housing are contained in section ten.

Aim this period

To ensure that, by the end of the plan time period, that everyone who is homeless will have access to settlement and other services which will enable them to move out of homelessness.

Context

The development of responses which will enable people to become settled and move out of the cycle of homelessness was a core objective of the Homeless Initiative. In considering how to develop such responses, it became clear that settlement services could not ensure the successful settlement of people without an adequate supply of housing and that people could not settle successfully without improved community care and other support services. Based on research into the experience of people who had settled in Dublin, and on best practice in other parts of the world, a settlement strategy was devised and adopted by the Initiative in March 1999.

The settlement strategy has a number of specific objectives:

- to ensure that people who are currently long term in hostels have access to more appropriate housing, with supports as necessary
- to ensure that every person who becomes homeless has access to settlement services which will enable them to move from homelessness into long term housing, so that the system does not get blocked in the future.
- to ensure the provision of an adequate supply of transitional and permanent housing for homeless people
- to ensure that adequate post settlement tenancy support services are available and that policies and practices in non homeless services support individuals and families to remain settled

In the current context of homeless service provision, many people manage to settle quite successfully either through their own efforts or with the assistance of the limited settlement services available. Many others are not so successful. Some settle into their own accommodation only to return to homelessness when the tenancy breaks down, usually due to unsuitable housing and/or the lack of appropriate support services. Many others do not settle at all and there are a number of people living long term in hostels for people who are homeless.

Settlement has been defined by the Homeless Initiative as ‘the movement of a person or family who is homeless out of homelessness into sustainable housing, self sufficiency and independent living, appropriate to each person’s ability and needs, with support as necessary’. Settlement can occur at any stage along the service continuum. Some people will need to go through a period in emergency, followed by transitional accommodation, before they are able to settle. Others can settle directly from emergency accommodation or from the street. At whatever point people are ready to settle, it is important that they are linked to skilled settlement workers who can enable them to settle successfully. This requires good links between settlement services and other services.

The role of settlement workers in the pre settlement stage is to enable a person to move into long term housing. This includes making an assessment of a person’s readiness for settlement, agreeing a settlement plan with the person and providing the information, advocacy and support which will enable the person to settle. During this process, any issues which may make it difficult for a person to settle, such as poor household management skills are addressed. Any special needs are also addressed through linking the person to appropriate services. Once a person is ready for settlement, suitable housing is secured and the person is assisted to move in, help is provided with obtaining furniture and other household goods, connection of utilities and orienting the person in the local neighbourhood. Support is provided by the settlement worker during the early stages of tenancy and where circumstances indicate it, continuing support will be provided by post settlement or tenancy support workers.

Post settlement or tenancy support workers ensure that people are supported to sustain tenancies, after the initial move in period. This involves them in arranging visits, linking the person to local community supports and services, being available to respond to requests for assistance and setting up safety nets so that there is a source of emergency support when tenancies are at risk. Settlement workers are concerned with making tenancies sustainable and will pay particular attention to ensuring that there is support on issues such as rent and behaviour, to prevent eviction occurring. They are not responsible for

meeting all the needs of people but have a role in identifying these needs and ensuring that responses are made by the appropriate agencies.

Ensuring the successful settlement of people who have experienced homelessness requires a comprehensive and holistic approach. The settlement strategy is based on the 'normalisation' model of settlement which itself is based on the belief that people who are homeless have the same needs as other citizens for housing and support and that they should be housed in conventional housing. Such housing has the advantage of costing about half as much to provide as specialist emergency accommodation and offering opportunities for independence, growth and integration of the individuals and families involved.

Obviously, settlement cannot be effective without an adequate supply of appropriate housing and measures to ensure this are contained in section ten. The experience of settling people out of homelessness in Ireland and elsewhere indicates that it is crucial that housing is of a good standard and offers a reasonable level of security of tenure. It also indicates that settlement is more likely to be successful where the housing is dispersed throughout an area.

Housing that is in poor repair, in areas inaccessible to familiar supports and other services; where a local community may be hostile, where a landlord is unsympathetic or unaware of the particular needs or problems of a tenant, are all indicators to unsuccessful settlement, resulting in a person returning to homelessness. Of equal importance to the supply of housing is the matching of people to housing and as a general rule, it is not appropriate to place people with high support needs in local authority or private rented housing.

Implementing the following objectives will ensure that emergency accommodation is used only on an emergency basis in the future. This in turn will lead to a reduction in the number of emergency beds and of other emergency services.

Note: Actions to ensure that people who are currently long term in hostels have access to appropriate housing is dealt with under Objective 7.4.

Performance indicators

The following indicators of success in relation to settlement will be monitored throughout the period of the plan:

- The number of emergency and transitional accommodation hostels/projects that have formal arrangements for the provision of settlement services to residents
- The number of settlement workers working with homeless people
- The number of residents in emergency and transitional accommodation registered for housing with the local authority
- The number of residents in emergency and transitional accommodation who have had their settlement needs formally assessed by a settlement worker
- The average length of stay in emergency (and transitional) accommodation before obtaining permanent accommodation
- The number of people settled provided with appropriate community settlement support
- The satisfaction of homeless people with the settlement services provided

Objectives and actions

Objective 8.1 — Settlement services

To ensure that by December 2003, every person who is homeless in Dublin has access to settlement services, which will enable them to move from homelessness into appropriate long term housing.

Rationale

Settlement services can be provided in a number of ways. There can be dedicated staff within hostels, transitional, day and night and other services for people who are homeless. Alternatively, settlement may be carried out as a core activity in these services. Settlement may also be provided on an outreach basis to people in a range of different situations.

Currently in Dublin city, there is one dedicated settlement worker in one day centre, one in a hostel and dedicated settlement workers in two transitional housing projects. Dublin Corporation also employs four settlement workers who are designated to work with street outreach services, hostels and Bed and Breakfast accommodation, to provide settlement services. There are no specific settlement services in areas outside the city. Evaluation of the various approaches is currently undeveloped and it is proposed to continue and expand this range of provision over the course of the plan.

Regardless of where they are based or which agency they are employed by, the role of the settlement worker is the same, focused on an assessment of what assistance a person will need to settle successfully and ensuring that assistance is made available. The length of time spent with an individual will vary and it is an important principle of settlement work that the service is tailored to individual needs and this dictates the rate of progress.

There are ways other than case work to provide settlement services. Written materials, training courses, group work and peer support schemes can all be effective in allowing people to identify their concerns about settlement and will be incorporated into the way settlement workers work.

Action 8.1.1 — Increase number of Dublin Corporation settlement workers

Dublin Corporation to increase the number of settlement workers employed by it to twelve by September 2001, for a period of three years, to be reviewed in September 2003.

Action 8.1.2 — Settlement in 24 × 7 centres

The Homeless Agency to ensure that one settlement worker is available, on a sessional basis, in each of the 24 hour centres from November 2001. (*See objective 4.4*) and in other day centres from March 2002 (*see objective 6.4*).

Objective 8.2 — Improve settlement services

To improve the operation, coordination and capacity of settlement services to provide a high quality pro-active service to people who are homeless.

Action 8.2.1 — Establish network

The Homeless Agency, with settlement workers will establish network of settlement workers and tenancy support workers, by April 2001. The network will be supported by the Agency. It will meet bi monthly to share information, report on trends, identify emerging needs and other issues of relevance to people who are homeless and identify support, training and other issues of relevance to settlement workers.

Action 8.2.2 — Establish common assessment, referral and other procedures

Through the network, the Homeless Agency to ensure that all settlement workers use common assessment and other procedures, by September 2001.

This will streamline services and improve the quality of information available from settlement workers.

Action 8.2.3 — Agree standard case loads and outcome measures by January 2002

Comment

Because settlement work is relatively new in Dublin and because people who are settling have a wide range of differing needs, it is necessary to develop standard case loads and outcome measures for settlement work. This will be done through the network of settlement workers.

Action 8.2.4 — Implementing quality standards

The Homeless Agency to ensure that all settlement workers have the necessary supports and resources to work towards achieving the agreed service standards in *Putting People First* and will review and monitor these on an ongoing basis.

Action 8.2.5 — Quality standards for tenancy support

The Homeless Agency to establish a working group of tenancy support/community settlement workers to work with a consultant to draw up standards for tenancy support services, together with a plan for implementing them, to be completed by December 2002.

Action 8.2.5 — Formal links with other services

By September 2001, the Homeless Agency will ensure that settlement workers have clear and effective referral procedures to and from the Access Housing Unit, local authorities, community care services, community welfare services, Money Advice and Budgetting Services, street outreach teams, advice and information services, day and night centres and emergency accommodation.

Objective 8.3 — Moving in help

To ensure that people who are homeless have access to sufficient assistance when taking up a tenancy.

Rationale

Moving home is known to be a highly stressful experience. The experience of settlement indicates that the early days of settlement can be crucial in determining its success or otherwise. Inadequate furniture and other household equipment or difficulties in securing utilities can be disheartening for any new tenant but particularly so for people who have been homeless. This can extend to difficulties in accessing rental deposits and rent in advance for people in the private rented sector. These issues are dealt with under Objective 10.8.

It is the aim of the settlement strategy to ensure that people who are moving from homelessness move to housing which is in good condition and that they have access to an adequate supply of furniture and household equipment and assistance to secure utilities.

Action 8.3.1 — Flexible support

By September 2001, the Homeless Agency to lobby the Department of Social, Community and Family Affairs and health boards to ensure that Community Welfare Officers provide flexible support to people who are taking up tenancies from being homeless.

Comment

Under the Supplementary Welfare Allowance Scheme, Community Welfare Officers provide assistance for people moving into housing (whether they are homeless or not). However, there can be delays and inconsistencies in the way assistance is dispensed. Furthermore, payment is usually in the form of cheques which are payable to named shops. Consideration should be given to allowing cash payments to allow people to shop around and prioritise purchases according to their preferences. To avoid the possibility of the money being spent on items other than household goods, this could be done under the supervision of the settlement worker.

Action 8.3.2 — Feasibility of furniture store

By December 2002 the Homeless Agency will complete a study into the feasibility of the establishment of a store of furniture and white goods etc which could be accessed by homeless people.

Objective 8.4 — Reduce potential for rent arrears

To reduce the potential for rent arrears and consequent tenancy loss.

Rationale

Many people who have been homeless can find themselves worse off financially when they move into independent housing, particularly from hostels where most facilities are provided and electricity and fuel are paid for as part of their weekly rent. Most people are reliant on social welfare and can experience severe difficulties in budgeting on a low income.

People may fall into rent arrears and suffer eviction with a consequent return to homelessness. Tenants in the private sector are particularly vulnerable to eviction in these circumstances. Eviction and homelessness are clearly very disruptive and disheartening for the individuals involved. They are also costly to the state in terms of the provision of emergency accommodation and settlement services.

Action 8.4.1 — Pre tenancy training

Pre tenancy training, which will include money management will be an intrinsic part of settlement services and will include contact with Money Advice and Budgeting Services (MABS), provided through the Department of Social, Community and Family Affairs. The settlement workers will also work with hostel staff to explore ways in which budgeting skills and savings schemes could be built into hostel life at an early stage.

Action 8.4.2 — Extend household budget scheme

By September 2001, the Homeless Agency to seek to have the Household Budget Scheme extended to private rented tenants by the Department of Social, Community and Family Affairs.

Comment

The Household Budget Scheme has been effective in reducing rent arrears among local authority tenants, by facilitating deduction of rent from social welfare payments at source. Its extension to tenants in the private rented sector would similarly reduce the potential for rent arrears and consequent loss of tenancy.

Action 8.4.3 — Seek to establish rent guarantee scheme

The Homeless Agency to seek the establishment of a rent guarantee scheme from January 2002, from the Department of Social, Community and Family Affairs.

Comment

The underwriting of rents has been shown to be an effective way of supporting people in tenancies, in countries where such schemes exist.

Under the scheme rents would be guaranteed for people who are identified as being at risk of losing their tenancies due to rent arrears. Such a scheme is justified on the basis that it is much less expensive to maintain people in accommodation than to have them move in and out of homelessness. Obviously a system would have to be developed which would be fair and transparent and which would not reward consistently poor financial management.

Action 8.4.4 — Increase discretion of Community Welfare Officers

By June 2001, the Homeless Agency to seek to ensure that Community Welfare Officers are facilitated to exercise greater discretion to assist people with other household payments which may affect their ability to pay rent.

Objective 8.5 — Statutory support services

To ensure that, from April 2002, health boards and local authorities provide adequate support services to people who are settled in the community, including effective early warning systems for people at risk of homelessness.

Rationale

Many homeless people who move to housing are at risk of returning to homelessness. They may be lonely and return to their network of friends from the days when they were homeless. They may have difficulty in managing money and may get into rent arrears, or they may have difficulty controlling drink or drug consumption, leading to arrears or behavioural difficulties. They may also have a mental health problem which may give rise to all or any of these.

Post settlement or tenancy support workers are available to provide time limited support to people following settlement. However, these must be supported by appropriate policies, procedures and practices in local authorities and community care services, to ensure that tenancies are sustainable in the long term.

Action 8.5.1 — Local authorities

Local authorities, in conjunction with the Homeless Agency, will publish written policies on how they will support tenants who are vulnerable to homelessness, by April 2002.

Comment

The policies will be implemented immediately and will be reviewed every six months. Particular attention will be paid to the management of anti-social behaviour by local authorities, with a view to ensuring that eviction is a measure of last resort and that tenants who are evicted are not subsequently barred permanently from being rehoused.

Action 8.5.2 — Health Boards

Local health boards, in conjunction with the Homeless Agency, to publish written policies on how they will support tenants who are vulnerable to homelessness, by April 2002.

Comment

The policies will be implemented immediately and will be reviewed every six months. Particular attention will be paid to the role of health boards in supporting people who may be vulnerable to returning to homelessness, either through assistance from community welfare officers or other community care services. The policies will also set out the role of health boards in the management of anti social behaviour with a view to ensuring that eviction is a measure of last resort.

Objective 8.6 — Post settlement support services

To put in place an effective post settlement community settlement/tenancy support service from January 2002.

Rationale

Settlement services work with homeless people in accessing suitable housing and preparing them to take up tenancies. It is important that a follow up service is available to people, following the move into housing, particularly in the early stages of settlement.

Such a service is currently operated by Focus Ireland. The Community Settlement service provides support, based on the approach of facilitating self sufficiency and independence, to people within a community setting, ensuring that they are linked to appropriate services (by information and advocacy) and oriented in their new surroundings.

This service provides visits to people in their new housing, whether local authority or private rented. The contact is planned and time limited, usually being phased out gradually as people become settled and connected to mainstream services, over a period of six to nine months. As with pre settlement services, it is not the role of the community settlement workers to provide specialist or care services, which should be made available through the health boards.

Action 8.6.1 — Establish level of need for tenancy support services

The Homeless Agency, in conjunction with relevant agencies, to determine the number of tenancy support workers necessary to support the settlement strategy, throughout the Dublin area, by April 2001.

Comment

Focus Ireland is the only agency providing community settlement or tenancy support services on a floating basis. Some voluntary housing associations employ tenancy support workers to support their own tenants in making tenancies sustainable.

Action 8.6.2 — Put community settlement workers in place

To have additional community settlement/tenancy support workers in place by September 2001, for an initial period of three years. The workers may be employed directly by local authorities or through a voluntary body.

Action 8.6.3 — Complete community settlement/tenancy support plan

The Homeless Agency, in conjunction with the settlement workers network and other relevant bodies, to complete a plan for community settlement by December 2001.

Comment

This will include geographic areas to be covered, methods of working, how emergency support can be provided where a tenancy is at risk, monitoring, standards and outcomes for tenancy support workers. The plan will also examine and make recommendations on the role of voluntary bodies and local authorities in providing tenancy support workers.

Objective 8.7 — Role of day centres in settlement

To ensure that, by January 2002, day centres have a clear role to play in identifying people who are ready for settlement and in being part of the post settlement support network for people who have been homeless.

Rationale

Objectives for the development of the role of day centres are contained in section six. They provide for day centres to be more involved in the delivery of the range of services to people who are homeless, either by expanding their own services or by facilitating other services to be available on site in the centres.

Day centres also have an important role in providing support to people once they have settled, providing at a minimum low cost meals and opportunities for social contact. The explicit role of day centres in relation to providing this support will be agreed as part of the plan for day services to be completed through actions under Objective 6.1.

Objective 8.8 — Scheme for involving volunteers in settlement

To complete a review of the possibility of involving volunteers in the provision of post settlement support, by December 2002.

Rationale

Loneliness is a key indicator to unsuccessful settlement and it is possible that volunteers could have a role to play in combatting it. Volunteers cannot substitute professional support and they do need careful recruitment, training and supervision but they can play an important complementary role.

Action 8.8.1 — Review role of volunteers

The Homeless Agency to establish a working group of settlement workers, other homeless services providers and agencies who include volunteers in their services provision by September 2001.

Action 8.8.2 — Report of working group

The working group will complete a report by March 2002 for consideration by the Consultative Forum and Board.

Objective 8.9 — Plan for settlement services outside Dublin city

To complete a plan for the future delivery of settlement services in the Dublin area by March 2002.

Action 8.9.1 — Working group

The Homeless Agency to establish a working group of settlement workers, Coordinators of Homeless Services outside of Dublin city and local other relevant locally based services by November 2001.

Action 8.9.2 — Complete plan

The working group to complete a plan for settlement services outside Dublin city by March 2002 for immediate implementation.

Objective 8.10 — Funding scheme for settlement services

To put in place an interim funding scheme for settlement services by January 2001 and replace this with a rational multi annual scheme of funding, linked to service standards and outcomes, by January 2002.

Action 8.10.1 — Interim scheme

Dublin Corporation to agree with service providers interim funding scheme to apply to settlement services

Action 8.10.2 — Long term funding scheme

The Homeless Agency to develop proposals, in conjunction with settlement services and other relevant bodies, for a scheme of funding to be submitted for approval by June 2001 and apply from January 2002.

Meeting needs for transitional housing

Introduction

The previous section has outlined a settlement strategy for Dublin and detailed actions on the development of settlement services which will assist people to settle and support them to sustain settlement. Transitional housing is a component of the settlement strategy and an important stepping stone from emergency accommodation to settlement in the community.

To be effective, transitional housing must be linked to long term housing, to avoid it being blocked by people who have completed programmes but who cannot access move on accommodation. The objectives in this section will ensure an adequate supply of transitional accommodation and provide for the linking of that accommodation to long term housing.

Aim this period

To ensure an adequate supply of transitional housing, linked to permanent housing, for people who are homeless and who will benefit from time in a structured support programme before moving to long term housing.

Context

Transitional housing offers ‘normal’ self contained housing together with support and structured programmes tailored to individual needs, ranging from personal development to budgeting, cooking and money management. It provides a stable, safe and supportive environment within which people can examine and address the issues which may have contributed to their becoming homeless and develop their capacity to live independently in the future.

Programmes are planned in conjunction with the person and continually reviewed and monitored. Transitional housing may be provided in schemes where programmes and support are available on site or the people may be placed in housing which is dispersed, where the support is provided on an outreach basis and where tenants travel to the programmes.

Transitional housing can be an important stepping stone for young people who have not had the experience of living independently. It has also been used by

local authorities as way back to a local authority tenancy for families who have been evicted, due to anti social behaviour. While transitional housing allows people to prepare for independent living, it is important that it is suited to the needs of individual households, rather than applied across the board to particular groups.

There are currently 276 transitional housing units in the Dublin area, catering for families and single people. These housing units have been effective in preparing people for permanent housing, but many of them are now experiencing a problem of ‘silting up’, whereby people remain after they are ready to leave, due to the lack of move on housing. It is crucial that transitional housing is linked to permanent housing and such housing either provided by local authorities or voluntary housing associations, must be guaranteed before people are accepted onto transitional housing programmes.

Performance indicators

The following indicators of success will be monitored throughout the period of this plan:

- The number of beds designated as transitional/medium stay accommodation
- The average length of stay
- The occupancy level
- The average waiting time to be allocated transitional housing
- The number of residents who have a holistic assessment completed
- The number of residents barred
- The geographical spread of transitional accommodation
- The percentage of residents who are local to the area
- The number of transitional accommodation projects that have carried out a quality assessment against the *‘Putting People First’* standards and drawn up an action plan for implementation
- The satisfaction level of residents

Objective 9.1 — Meet estimated needs

To meet current estimated needs for transitional housing by December 2003.

Rationale

There has never been an assessment of the current or future need for transitional housing. Based on what is currently known about the homeless population, it is estimated that there is a need for an additional 200 units. While a more accurate assessment should be undertaken, there should be no delay in securing the provision of this number of units. The estimated breakdown of units for local authority areas is as follows:

Dublin Corporation	130
Fingal County Council	20
South Dublin County Council	30
Dun Laoghaire/Rathdown County Council	20

These housing units will be targeted at a mixture of families and single people. Dublin Corporation target groups are as follows:

Men over 35 years	15
Families: one/two parent	15
Single women over 25	5
People on controlled drugs programme	25
People not using alcohol	25
Women using drugs, who have children	20
Couples, without children	5
Women leaving prison	20

In addition to these units, the need has been identified for the following transitional units for women moving on from emergency refuges:

Dublin Corporation	32
South Dublin County Council	6
Fingal County Council	5
Dun Laoghaire/Rathdown County Council	5

Objective 9.2 — Plan for future need

To complete a plan to meet future needs for transitional housing in each local authority area by June 2003.

Action 9.2.1 — Assess future needs

Each local authority to complete an assessment of future needs by March 2003.

Comment

The assessment will be based on current needs, current provision and likely future need, taking into account the movement of people through transitional housing. Particular attention will be paid to the issue of a lack of move on from transitional housing which results in an inadequate amount of transitional housing from those that require it, in order to establish whether the need is for transitional or permanent housing. As part the assessment, the precise nature of existing transitional housing will be clarified, and re classified if necessary.

Action 9.2.2 — Complete plan to meet needs

Based on the assessment, each local authority will complete a detailed five-year plan for meeting the need for transitional housing by June 2003.

Comment

This plan will be based on needs and on the development of creative and efficient ways of addressing those needs. Particular attention will be paid to the use of existing buildings, rather than new build, on small rather than large scale

projects and on locating projects appropriately. The aim of the plan should be to ensure that the existing and future needs for transitional housing will be met over the next five years.

Objective 9.3 — Match transitional with permanent housing

To ensure that all transitional housing units are matched by permanent housing.

Action 9.3.1 — Local Authority agreement to provide move-on

Each local authority will formally agree to match transitional housing units with permanent housing from its own housing stock, or by agreement with voluntary housing associations in its area, by January 2002.

Comment

This agreement will include both an official general statement of intent to match transitional housing with permanent allocations and specific agreements in respect of individual households in or about to enter transitional housing. Commitments in relation to specific households or projects will be made for people already in transitional housing (if such commitment does not already exist) by June 2001. Thereafter, commitments will be made as part of the joint assessment process. The commitments will be binding and tied to specific time frames.

Action 9.3.2 — Protocols for joint assessment

Local authorities and voluntary organisations providing transitional housing will agree protocols by September 2001 for the joint assessment of people going into transitional housing. This will facilitate planned allocation of permanent housing by local authorities. It will also allow transitional housing providers to plan for turnover in their units.

Objective 9.4 — Quality standards

To ensure that quality standards and performance indicators are developed and implemented for transitional housing.

Action 9.4.1 — Develop standards for transitional housing

The Homeless Agency to complete quality standards for transitional housing and incorporate them into *Putting People First* by September 2002.

Comment

The standards and performance indicators will be drawn up by a working group of transitional housing providers to work with an independent consultant.

Action 9.4.2 — Programme of support to achieve standards

The Homeless Agency to agree a programme of support and assistance in ensuring that standards are implemented, on an ongoing basis, in every transitional housing project.

Objective 9.5 — Funding scheme for transitional housing

The Homeless Agency to ensure a rational scheme of funding for transitional housing is in place by January 2002.

Rationale

Transitional housing offers a package of secure, albeit time limited, accommodation, with support and other programmes. Current funding schemes do not reflect this package and providers must seek funding for the housing provision and support services from separate sources.

As with other services in the homeless sector, there is a need for a stream of funding which reflects the totality of service provided, taking into account once off and ongoing costs. Proposals for funding will also include arrangements for monitoring and evaluation of individual projects and measures to ensure that transitional housing is related to the needs of people who are homeless.

Action 9.5.1 — Agree funding scheme

The Homeless Agency to develop, in consultation with transitional housing providers, local authorities, health boards and the Department of the Environment and Local Government, proposals for a scheme of funding. The scheme will include standards and outcomes and will be submitted to Consultative Forum and Board, for approval in July 2001 and will be implemented from January 2002.

Objective 9.6 — Assistance with rent

The Homeless Agency to seek to ensure a rational scheme of assistance with rent for people in transitional housing is in place by January 2002.

Rationale

Rental subsidies for tenants in transitional housing vary, according to the stream of funding used to construct or renovate the housing units. This complex system causes confusion and administrative difficulties.

The confusion and complexity does not apply to transitional housing only. Across housing tenures, there is a range of different subsidies, paid in different ways and at different levels. This wider issue of housing subsidy will be the subject of a research project to be undertaken by the Agency. See Objective 10.16

Action 9.6.1 — Lobby for scheme

By June 2001 the Homeless Agency to lobby the Department of Social, Community and Family Affairs and the Department of the Environment and Local Government for the introduction of a rational scheme of assistance with rent for people in transitional housing.

Increasing the extent and range of long term housing options

Introduction

The success of this plan depends largely on ensuring that there is an increased supply of long term housing available to people who are homeless. Without this, the underlying aim of settling people out of homelessness cannot be achieved, it will not be possible for people to move from the streets, hostels and transitional housing will continue to be blocked and other service interventions will be futile. It will also be impossible to prevent or eliminate homelessness.

In the three years of this action plan, it is proposed to provide 1,500 additional units of long term housing for people who are homeless including 300 sheltered/supported. The provision of these units will reflect the nature of need among people who are homeless, in particular catering for the needs of people who are single. While some additional units will be provided through local authority lettings it is envisaged that the majority will be provided by other means. These will include arrangements with private and voluntary landlords and the acquisition of properties on the private market.

This is an ambitious target and a challenging one, given the current housing situation. However, it can be achieved and must be achieved if homelessness is to be addressed.

Aim this period

To source an additional 1500 units of housing for people who are homeless, through the voluntary, public and private sectors; to ensure that the housing needs of single people are planned for and that the access of people who are homeless to tenancies in all sectors is improved.

Context

The success of this plan depends on the availability of long term housing for people who are homeless. Currently, emergency and transitional accommodation is blocked with people who no longer have a need for such accommodation but who cannot secure alternative housing. In the case of families, this situation is

not so grave as they generally are allocated housing by local authorities, although they may have to wait for some time.

Single people have little prospect of local authority housing, unless they fit into the category of senior citizen, and in many cases, particularly where people are young, it is not the most appropriate response to their housing need. Like the local authority sector, voluntary housing associations provide mainly family housing and single people have difficulty accessing tenancies in this sector. The only viable option for single people who are homeless is the private rented sector and this has become increasingly difficult for them to access. In the current housing climate, they are disadvantaged by their low income and the fact that they have been homeless and may be regarded as undesirable by many landlords.

Under the Housing Act, 1988, local authorities are empowered to apply flexibility in meeting the housing needs of homeless people. The range of options include the provision of housing from existing housing stock, arrangements with voluntary bodies, direct financial assistance to homeless people to rent housing and renting housing on behalf of homeless people. Local authorities are also empowered to purchase in the private sector to meet housing needs. In practice, where these powers have been exercised, it has usually been in the provision of emergency accommodation, rather than long term housing.

The target of 1500 units is an estimate, based on the limited available information about the numbers of people who are homeless in any one year and their movement through the homeless system. As with other measures in the plan, this will be constantly monitored and reviewed throughout the course of the plan. The lack of reliable data on the flow of people through homelessness is unsatisfactory for the purposes of planning for services. This will be addressed in the course of the plan through the development of service user information collection and the care manager system, so that a more accurate assessment of housing and other needs can be made in the future (see Objective 2.4).

The long term housing provision must be seen in the context of other accommodation provided for in the action plan. Provision is made for an additional 300 units of emergency accommodation (see sections five and seven) and for an initial additional 200 transitional units, all for a mix of family and single person households. The plan also provides for the reclassification, to long term housing, of emergency accommodation, which is currently used on a long term basis (see section seven).

It is estimated that 1500 units are necessary to ensure a flow of people through the system, out of emergency accommodation and into long term housing, either directly, or through time in transitional housing. It is estimated that about one third of people in emergency accommodation will require transitional housing. The additional long term housing units include 300 hundred sheltered/supported housing units which it is estimated are necessary to meet needs of people currently in hostels.

This rate of movement through the system is shown in the figure below.

Movement	2001	2002	2003
From emergency to long term	200	400	400
From transitional to long term	100	200	200
From emergency to transitional	100	200	200
Net long term	300	600	600

Meeting the need for additional long term housing for a group of people with diverse needs will require creative responses. It will not be necessary to provide new accommodation in all cases and it is possible that some units are already available within the homeless sector, but in a different guise. For instance, some emergency accommodation is already providing long term housing, some of the accommodation which is currently described as Bed and Breakfast is in fact self contained accommodation which could be converted to longer term accommodation. Wherever the additional housing units are sourced, it is crucial that they accessible, appropriate, of a good standard and offer a reasonable level of security of tenure.

In addition to sourcing additional housing units for people who are homeless, it is proposed to address other barriers which hinder access to housing for people who are homeless. These include some policies and practices in the local authority and social welfare systems, the reluctance of landlords to let to people with support needs and the reluctance of local communities to accept and support people who have been homeless. These are dealt with along tenure lines.

Performance indicators

The following indicators of success in relation to housing will be monitored throughout the period of the plan:

- The number of units secured
- The number of allocations of public housing to people who are homeless (in total and by age, gender, household type and client group)
- The number of allocations of voluntary housing allocated to people who are homeless
- The number of allocations of private rented accommodation to people who are homeless
- The average length of time for a person who is homeless to be allocated a rent deposit payment for private rented accommodation
- The number of rent/deposit given to landlords
- The percentage of defaults under the rent/deposit guarantee scheme
- The number of supported housing units allocated to people who are homeless
- The number of residents/tenants who have successfully remained in permanent accommodation after one year
- The satisfaction level of those allocated long-term accommodation/housing.

Objectives and actions

Objective 10.1 — Plan to increase supply

To complete a plan to source the additional 1500 housing units for people who are homeless, by April 2001.

Rationale

The sourcing of these additional units, in the current housing climate, will require proactive and creative action, by a range of bodies. This plan may include innovative use of local authority stock, such as letting three and four bedroom houses to single people sharing, as well as ways of meeting the housing needs of single homeless people other than from local authority housing stock. These alternatives will include: purchase of suitable units (including those suitable for multiple occupation) in the private sector; private leasing arrangements and arrangements with voluntary housing associations.

Action 10.1.1 — Complete plan

The Homeless Agency to convene a working group with local authorities, Irish Council for Social Housing and other relevant experts to draw up a plan by April 2001 to increase the supply of permanent housing to people who are homeless by 300 in year 1; 600 in year 2; and 600 in year 3.

Comment

This plan may include innovative use of local authority stock, such as letting three and four bedroom houses to single people sharing, as well as ways of meeting the housing needs of single homeless people other than from local authority housing stock. These alternatives will include: purchase of suitable units (including those suitable for multiple occupation) in the private sector; private leasing arrangements and arrangements with voluntary housing associations.

Action 10.1.2 — Incorporate plan to increase housing options for people who are homeless

The Homeless Agency will ensure that the plan for an additional 1500 housing units is incorporated into local housing strategies by April 2001.

Action 10.1.3 — Continually review

The Homeless Agency will ensure that the progress in the sourcing of additional housing is kept under constant review, particularly against emerging information on trends in homelessness, including the official assessment to be carried out in March 2002.

Objective 10.2 — Plan for single people

To ensure that local authorities provide for the needs of single person households in their housing strategies by April 2001

Rationale

A key contributory factor to homelessness is the lack of available suitable, affordable housing. Homeless people are by definition poor and unable to provide housing from their own resources and therefore eligible for local authority housing. The majority of homeless families are, over time, allocated local authority housing. However, single or separated people, without dependants, unless they are elderly, are unlikely to be allocated local authority housing. Yet, single people represent the overwhelming majority of people who are homeless, particularly those who are homeless on a long term basis. This situation is due largely to the fact that local authorities build with families in mind and that there are very few tenancies which are suitable to single person households.

Homelessness cannot be tackled unless there is an increase in the supply of affordable housing for single people. Single person households are a growing and permanent feature of the Irish population and their needs must be taken into account in the planning and provision of housing.

Action 10.2.1 — Housing for single people

In its Housing Strategy, each local authority to include provision for single person households, in line with existing and potential demand in each area by April 2001

Local Authority housing

Aim this period

To improve access to local authority housing for single people and make adjustments in local authority policies and practices to ensure that the housing needs of all homeless people are considered and addressed positively.

Rationale

Local authority housing offers advantages to people who have been homeless in that rents are linked to income and therefore affordable and tenure is secure. It is particularly advantageous in these respects when compared to private rented housing.

However, there are also disadvantages for homeless people to local authority housing. As already stated, access is difficult, particularly for single people. It is unfurnished and this creates problems for homeless people who may not have networks of friends and family they can rely on for assistance with furniture and utensils. Sometimes the housing is in poor condition and there can be delays in repairs. Environmental conditions can also be poor and local authority housing is often poorly located, in terms of access to essential services and amenities.

These disadvantages are not insurmountable and the following actions will improve the access and suitability of local authority housing for homeless people.

Objective 10.3 — Ring fence lettings

To ensure that from January 2002, local authorities ring fence lettings for single homeless people each year.

Rationale

Ring fencing tenancies for people who are homeless will ensure that there is a pool of local authority housing available to them. The number of lettings which are ring fenced will be related to the demand from single homeless people, and balanced with other demands. Lettings will reflect the range of housing available in each area so that homeless people are not ghettoised or placed in low demand areas and will also reflect the range of needs of people who are homeless.

Action 10.3.1 — Formula for location and number of lettings

Each local authority to propose a formula for calculating the number and location of ring fenced lettings to the Consultative Forum and elected representatives by September 2001.

Action 10.3.2 — Implement ring fencing

Ring fencing will take effect from January 2002 and be subject to six monthly reviews by the Homeless Agency in conjunction with local authorities and other homeless service providers.

Objective 10.4 — Assessment and allocation procedures

To ensure that local authorities consider positively the housing needs of people who are homeless by making adjustments in their assessment, allocation and other procedures.

Rationale

A number of features in existing housing assessment and allocation procedures can militate against the housing of people who are homeless. There is often

confusion about eligibility requirements and people who are homeless often do not apply for housing, or fail to keep their application live, leading to an underestimate of needs. Good estate management practices, whereby local communities vet prospective tenants, can be difficult for people who are homeless who, as a group, may be regarded as undesirable.

Action 10.4.1 — Annual assessment and targets

Beginning in March 2002, each local authority to carry out an annual assessment, to be completed by March each year, of the demand for long term housing from all homeless households in its area.

Comment

The assessment will be based on collecting accurate information from sources in addition to the authority's own homeless or housing list (hostels, bed and breakfast, Homeless Persons Unit, voluntary agencies etc) and on evidence based projections for the future.

The assessment will be published and will include time specific targets for housing people assessed as homeless, whether through allocation of local authority housing stock or other arrangements. Each new assessment report will review the previous years performance. The assessments will be used to inform the development of responses to homelessness. They will also inform the official periodic assessment but will not be a substitute for them.

Action 10.4.2 — Comprehensive list of homeless people eligible for housing

By December 2001, each local authority to have reviewed its applications procedures and made arrangements to ensure that in the future they include all eligible homeless people.

Comment

Research indicates that many single people who are homeless do not register with their local authority for housing. For some, this is because they know that they are unlikely to be offered anything. For others, it is lack of information or understanding about the process of housing application. The review should be completed to coincide with the assessment.

Action 10.4.3 — Computerised applications list

Local authorities to put in place by January 2002 a single computerised housing and homeless applications list which will allow for the easy tracking of applications and will be compatible with the service delivery system to be introduced by the new agency. The system will allow applications to be reviewed efficiently and statistics to be extracted immediately.

Action 10.4.4 — Role of local community committees

Local authorities, individually or together, will review by December 2001 the role of local community committees in assessing housing applicants with a view to improving access to housing for homeless people and putting in place a more transparent and fair system for the assessment of applicants by the committees.

Comment

It is sometimes difficult for people who have been homeless to be accepted by local community committees, due to past negative experiences. This review will

be carried out in conjunction with local communities and agencies working with homeless people. It will aim to establish, among local community groups, a better understanding of the experience of homelessness and the needs of formerly homeless people. Protocols for assessing applicants and arrangements to ensure excellent ongoing communication between homeless services, local authorities and local community groups will be agreed.

Action 10.4.5 — Anti-social behaviour

Each local authority, in conjunction with the health boards and voluntary bodies, will review the policies, practices and procedures in relation to re-housing households who have been evicted for, or have a history of anti-social behaviour by June 2001.

Comment

Under the Housing Act, 1997, local authority tenants may be evicted for anti-social behaviour, often related to illicit drug related activities. The number of households actually evicted on foot of the legislation is small. However, there is evidence of larger numbers of people being forced into homelessness by informal local community action. The policies and practices of local authorities in considering these people for re housing vary. Some will impose a blanket ban, others will have time limited bans.

There is concern among homeless service providers, including local authorities, that a number of families and individuals are effectively locked into homelessness, with no clear route out. This is obviously costly to the state in terms of providing long term emergency accommodation, it also militates against rehabilitation and causes severe stress and deprivation, particularly to any children involved.

Objective 10.5 — Quality service for housing applicants

To ensure that homeless applicants receive an excellent service from local authorities.

Rationale

Assessing the needs of a homeless person or family and making appropriate allocation decisions requires a complex range of skills and insight. In many cases, local authority staff do not receive the necessary training and support to carry out this task. Furthermore the status of the position is such that moves among staff are common place, leading to a loss of expertise.

Action 10.5.1 — Quality improvement plans

Each local authority will draw up and implement a plan to improve the quality of service to homeless people applying for housing by March 2002.

Comment

The plan will be based on a review of the effectiveness of their front line staff in dealing with homeless people; in assessing the needs of applicants and in allocating housing appropriately and of relevant policies and procedures. The review will be based on a survey of stakeholders (staff, customers, other relevant agencies) and a review of best practice.

The plan will set out the skills, experience and other attributes required for the job. It will outline the training and support requirements for staff and the

necessary changes in policies, practices and procedures to ensure a high quality service to homeless people based on a thorough assessment of the needs of each individual so that these needs, the house and the neighbourhood are matched.

Objective 10.6 — Comprehensive advice and information

To ensure that people who are homeless have access to comprehensive advice and information on housing options and rights in each local authority from March 2002.

Rationale

Comprehensive advice and information services have a crucial role in helping homeless people to address their needs and to prevent homelessness arising in the first place.

Under the terms of the government policy statement, 'Social Housing — The Way Ahead' (1995: 37) local authorities were to provide a full range of information on housing matters to the public. While there may have been some improvement in the intervening years, it is doubtful if any local authority provides information on housing matters other than those it is directly responsible for (i.e. lettings, tenant purchase, shared ownership).

The advice and information service may be either a dedicated services, or be part of a wider housing advice service. The service may be contracted to an outside, independent body. The development of the services will be carried out in conjunction with the Homeless Agency which will provide a data base of services and rights and ongoing support to local authorities. See objective 4.4.

Action 10.6.1 — Comprehensive housing advice and information service

Each local authority will put in place, by March 2002, a comprehensive housing advice and information service for homeless people.

Private rented housing

Aim this period

To make private rented housing more accessible to people who are homeless and to improve its viability as a housing option for them through improvements in support services and changes in the operation of the Supplementary Welfare Allowance Scheme.

Context

There are both positive and negative aspects to private renting as a housing option for people who have been homeless. On the positive side, it is relatively easy to access, in that there are no restrictive criteria or waiting lists; it allows ease of mobility for tenants; it is generally furnished and ready to occupy and is located in areas accessible to services and other amenities.

On the negative side, the lack of security of tenure is one of its most unattractive features. While protections for tenants have improved in recent years, the unregulated nature of private rented housing means that tenants may have to leave at short notice. Physical conditions are often poor, particularly at the low end of the market. While access is open, it is dependent on the whim of the landlord and difficulties can arise for the people who may be regarded as undesirable and this includes people claiming rent supplement. Rents are high, relative to income and to the levels of rent supplement available and are subject

to arbitrary increases. While there is a scheme of rent supplement for social welfare claimants, the amount payable is usually much less than prevailing rent levels. However, subsidies under this scheme are much more generous than the tax relief on rent available to people in work. This creates an unemployment trap. Any one of these features may impact adversely on a person's capacity to settle.

Notwithstanding these difficulties about the private rented sector, there are measures which could be taken to improve it as a housing option for homeless people. In terms of supply the recent experience in Dublin of housing asylum seekers has shown that with some assertive action on their behalf, housing in this sector can be made available to specific groups.

Objective 10.7 — Accessing voluntary and private tenancies

To access tenancies in the voluntary and private rented sectors for people who are homeless from January 2002.

Rationale

Homelessness will not be addressed by reliance on local authority housing alone, and it will be necessary to improve access to housing in the private rented and voluntary sectors. One major obstacle to achieving this is the lack of information on available tenancies. Another is the reluctance of landlords to accepting formerly homeless people as tenants. One reason for this is the fear (often based on experience) that they may not be able to manage the tenancy on their own, leading to problems of rent arrears, complaints from neighbours and possible eviction procedures.

It is the aim of the Homeless Agency to address these obstacles by accessing private and housing association tenancies for services working with homeless people and ensuring that those agencies provide the support necessary to make tenancies sustainable.

Specifically the Agency will:

- proactively seek landlords in the private and voluntary housing sectors and persuade them to make tenancies available to homeless people, referred through the agency
- ensure that properties available comply with minimum standards
- establish and maintain a data base of approved landlords
- specifically target owners of vacant residential buildings, particularly over shops
- enter into contracts with private landlords as appropriate
- develop and maintain relationships with such landlords
- ensure that landlord practice complies with established norms of good practice
- liaise with settlement and other support services to ensure that tenants are supported as necessary
- monitor the efficacy of support services
- provide information and support to landlords on letting practices
- establish landlord forums with the aim of improving liaison and practice within the private and voluntary sectors
- promote the provision of housing by the voluntary sector, particularly for single people.

Action 10.7.1 — Working group

The Homeless Agency to establish a working group comprising representatives from local authorities, housing association and private landlords, health board, homeless services and other relevant bodies to draw up a plan to access tenancies by June 2001.

Comment

The role of the working group will be to refine the proposal for the Access Housing Unit, propose an action plan, set realistic targets for the number of properties, outline and allocations procedure, staffing levels in the unit, arrangements for monitoring etc.

Action 10.7.2 — Implementation

The Homeless Agency to ensure all staff and resources to be in place for full implementation to commence by January 2002.

Objective 10.8 — Deposit Guarantee Scheme

To ensure that homeless people have ease of access to rental deposit payments through the establishment of a Deposit Guarantee Scheme

Rationale

Deposit Guarantee Schemes have been found to be very effective in assisting homeless people into private rented accommodation and a number of schemes exist in England, Wales and Northern Ireland. One is currently being operated by the North Eastern Health Board in Ireland.

The schemes operate on the basis of guaranteeing the deposit in advance to the landlord, rather than it actually being paid. In the event that there is loss or damage at the end of the tenancy, the landlord is paid whatever is due. In the UK the deposits are underwritten either by the Department of the Environment, local authorities or voluntary organisations.

The feasibility and cost effectiveness of such schemes are well tested and it will not be necessary to re examine these areas. The issues which will have to be agreed relate to which agency will provide the funds, which agency will administer the scheme, operational details and the commitment of landlords.

Action 10.8.1 — Proposal for a deposit guarantee scheme

The Homeless Agency, in consultation, to develop a proposal on the establishment of a deposit guarantee scheme to be operational by January 2002.

Objective 10.9 — Rent supplement

To secure changes in the operation of the Supplementary Welfare Allowance rent supplement scheme to ensure that homeless people are positively assisted to secure tenancies.

Rationale

Social Welfare claimants are entitled to assistance with rent in the private sector through the Supplementary Welfare Allowance Scheme. However, there are a number of problems with the operation and administration of the scheme which actually hinder homeless people from securing tenancies in the private sector:

Private landlords are often reluctant to let to people claiming social welfare. For some landlords, this is due to a preference for people who are working. For

others, the contact with an official body puts them off. For others, it is the actual operation of the SWA rent supplement scheme which deters them from letting to social welfare claimants.

Other problems are caused by the levels of rent supplement payable. Rent supplement levels have not kept pace with the levels of rent. This makes it difficult for people who depend on the supplement to compete in the market, and ensures that, if they do get tenancies, they are at the lower end of the market and generally of poor quality — a counter indicator to successful settlement.

Whatever the shortcomings of the SWA rent supplement scheme, the amount of subsidy to tenants under it is generous, when compared to the allowances available to tax payers. This creates a significant unemployment trap, particularly for people with low job skills, whereby they may be worse off in work than on social welfare, when rent supplement is taken into account.

Some of these issues can be addressed by changes in the administration of the SWA scheme, others will require more fundamental policy review.

Note: The issue of the unemployment trap created by the absence of a comparable subsidy to private tenants in employment will be dealt with in a research project to be undertaken under objective 10.16

Action 10.9.1 — Review SWA scheme

The Homeless Agency to prepare a report, by September 2001, on the current policies and procedures in the administration of rent supplement which create problems for people who are homeless.

Action 10.9.2 — Lobby to address problems

By October 2001, the Agency to have lobbied the Department of Social, Community and Family Affairs with a view to having the problems addressed.

Action 10.9.3 — Tracking reasonable rents

The Homeless Agency to establish a working group by January 2002 to propose a sensitive mechanism for tracking rents in the private sector.

Comment

The working group will comprise representatives of the health boards, Department of Social, Community and Family Affairs, local authorities and relevant experts. It will report by June 2002.

Action 10.9.4 — Seek to have mechanism implemented

The Agency will seek to ensure that the mechanism is implemented with effect from January 2003.

Voluntary and cooperative housing

Aim this period

To ensure that voluntary and cooperative housing associations play a more direct role in meeting the long term housing needs of homeless people, particularly single people.

Rationale

Housing provided by voluntary and cooperative housing associations can be ideally suited to the needs of people who have been homeless. Compared to the

private rented sector, tenure is secure and compared to both the private and public sectors, management practices are often more progressive and supportive of tenants. The output of the voluntary and cooperative housing sector reached over 1000 in 1995 and is expected to rise to this level again in 2000, representing about 25% of all social housing output.

A great deal of housing provided by voluntary housing associations has been for single people, particularly elderly people. However, in recent years there has been an increasing amount of housing developed by housing associations for families, due to more flexible capital funding available for such housing. By comparison, capital funding for special needs housing was not adjusted until the mid 1990s, resulting in a fall in output of this type of housing.

Recent measures introduced by the government to help to support activity in the voluntary housing sector are welcome. There is a need to quickly address the obstacles in the way of a fully developed voluntary housing sector. One major obstacle to the development of voluntary housing is the absence of funding to cover the costs of support services. Another is the lack of any overall strategy for the development of the sector. If the sector is to make a serious contribution to meeting housing needs these are issues which must be addressed.

Action 10.10.1 — Access to tenancies

The Homeless Agency to ensure that tenancies are made available for people who have been homeless, through the guarantee of support services where necessary, from January 2002. *See also Objective 10.7.*

Action 10.10.2 — Streamline procedures

From April 2001, the Homeless Agency to work with the Irish Council for Social Housing to ensure that the current procedures for obtaining capital funding approval are streamlined to ensure that new projects can be completed efficiently.

Action 10.10.3 — Special needs management allowance

By June 2001 the Homeless Agency to lobby the Department of Environment and Local Government to ensure the introduction of Special Needs Management Allowance or similar defined revenue funding scheme to enable voluntary housing associations to provide for people with support needs.

Sheltered, supported and special needs housing

Aim this period

To make 300 additional units of long-term supported/sheltered housing available to single homeless people, through statutory or voluntary organisations.

Rationale

Some people who are currently homeless have support needs which will make it difficult for them to manage in independent housing, even if linked to off site support services. These people have medium to high support needs by virtue of their old age, mental or physical disability, or their long term institutionalisation, although their needs may not be so great as to require institutional care. In these circumstances, sheltered or supported housing, where the support is an integral part of the housing, offers a viable option. It is likely that a small number of people who are currently in hostel accommodation do in fact require care, as opposed to supported housing. These will be catered for by the health boards.

There already exists a range of sheltered housing which offers support on site and is usually provided for people who are elderly or infirm, either by voluntary or statutory bodies. Supports vary from alarm systems and on site warden services (typically provided by local authorities for elderly people) more intensive on site support services, provided by health boards or voluntary organisations.

There has never been an accurate assessment of the need for supported housing by homeless people. However, on the basis of what is known about the current homeless population, it is estimated that there is a need for an additional 200 places, offering medium to high support, in Dublin over the next three years. These should be provided by voluntary organisations or health boards. A further 100 low support places should be provided either by voluntary organisations or local authorities.

The need for supported housing is largely from people who are long term homeless. Many of them are elderly. At the time of the last official assessment of homelessness, 160 were aged over 65 — although age does not indicate a need for supported housing in every case. Others are in poor physical or mental health which indicates a need for support. Others may be institutionalised to the extent that they would not be able, or wish to, live without on site support.

Some of these supported housing units will have to be new provision. Others can be accessed through existing supply. It is likely that some could be provided if some of those hostels currently providing long term accommodation were to be regarded as sheltered housing. This issue is dealt with under Objective 7.4.

Objective 10.12 — Audit of sheltered/supported housing

To complete an audit of current sheltered/supported housing provision in Dublin by January 2002.

Rationale

There is no readily accessible information about the location, range or number of supported housing units currently in Dublin. This obviously makes it difficult for matches to be made between the demand for supported housing and the supply. An audit of existing provision would be a starting point to addressing this deficit.

The audit will collect information on existing supported housing and categorise it according to whether it provides low, medium or high support. It will be comprehensive, including information on all supported housing projects provided by local authorities, health boards or voluntary organisations. It will describe each project in terms of the type of housing provided, sources of funding and level of support provided. It will also categorise projects according to whether they provide low, medium or high support and will provide definitions of these concepts.

Action 10.12.1 — Complete audit

The Homeless Agency to establish a representative working group of supported housing providers to work with a consultant in developing definitions of support and categorising housing. Report to be completed by January 2002.

Action 10.12.2 — Integrate information on supported housing

The Homeless Agency to incorporate information on supported housing into Hostels Online and the overall Homelessness Directory and database by October 2002.

Objective 10.13 — Long term plan

The Homeless Agency to complete, by September 2003, a long term plan for the provision of supported housing in Dublin, in consultation with other relevant bodies.

Rationale

The implementation of this action plan will ensure that long-term homelessness becomes a thing of the past. It will follow that there will no longer be a need for supported housing specifically for homeless people. There will however be a need for supported housing. Ensuring an adequate supply of such housing will contribute to the prevention of homelessness by ensuring that the people who need supported housing are able to access it, and thus will not become homeless.

Action 10.13.1 — Assessment of people homeless in institutions

The Homeless Agency to complete an assessment of the number of people with mental or physical disabilities who are long term in institutions due a lack of suitable housing, including an assessment of their housing and support needs by January 2003.

Comment

Under the terms of the Housing Act, 1988, people who are in institutions, such as hospitals, county homes, because there is no suitable alternative accommodation for them, are considered to be homeless. Although these people are included in the official assessment of homelessness, these are not considered to be reliable and there has never been any plan for moving people from institutions into more appropriate housing.

Action 10.13.2 — People with HIV

The Northern Area Health board to complete, by January 2002, an assessment of the number of people with HIV who will need supported housing over the coming five years.

Action 10.13.3 — Complete plan

Complete plan for provision of supported housing in Dublin by September 2003, to be incorporated into action plan 2004-2006.

Objective 10.14 — Quality standards

To ensure that quality standards and performance indicators are developed and implemented for sheltered and supported housing projects by December 2002.

Rationale

Quality standards already exist for a number of homeless service areas but not for supported housing. The quality standards will be drawn up by supported housing providers (from within and outside the homeless sector), in conjunction with an external consultant. This is the process used for drawing up the quality standards in *Putting People First* and has been effective in developing ownership of the standards among service providers. The standards for supported housing will relate to physical standards, levels of care and support, application, admissions and referral procedures etc. A particular focus of the standards will be to ensure that all supported housing fosters the maximum independence of residents.

Action 10.14.1 — Working group on quality standards for supported housing

The Homeless Agency to establish a working group of supported housing providers to work with an independent consultant in drawing up quality standards and performance indicators for supported housing, to be completed by December 2002.

Action 10.14.2 — Support and training on quality standards

The Homeless Agency to develop a programme of support and training to ensure that standards can be implemented, on an ongoing basis, in all supported housing projects for people who have been homeless, commencing in March 2003.

Action 10.14.3 — Programme of physical improvements

Based on inspections, the Homeless Agency to finalise by June 2003 a programme of necessary physical repairs or improvements to ensure that supported housing meets physical quality standards, to be implemented from January 2004.

Objective 10.15 — Funding scheme

The Homeless Agency to put in place, by January 2002, an appropriate funding scheme for sheltered and supported housing projects

Rationale

By definition, supported housing projects provide support services to tenants. Current funding schemes do not reflect this and providers must seek funding for the housing provision and support services from separate sources.

As with other services in the homeless sector, there is a need for a stream of funding which reflects the totality of service provided, taking into account once off and ongoing costs. Proposals for funding will also include a differential related to the level of support provided, arrangements for monitoring and evaluation of individual projects and measures to ensure that the supply of supported housing is related to needs.

Action 10.15.1 — New funding scheme for supported housing

The Homeless Agency to establish, by March 2001, a working group of supported housing providers, other voluntary housing associations, health board, local authority and homeless agency to develop proposals for a new scheme of funding for supported housing projects for approval by July 2001 and implementation from January 2002.

Objective 10.16 — Research on assistance with rent

To complete a study on the introduction of a unified system of rent assistance for tenants in the private, public and voluntary sectors by September 2002.

Rationale

There is a wide range of rent levels and statutory assistance towards rent for people in rented accommodation. Local authority tenants pay rent according to their income. Tenants of voluntary housing pay rent according to the scheme through which the housing was funded. Voluntary and private tenants receive assistance with their rent through the Supplementary Welfare Allowance Scheme. The amount of assistance they receive varies according to rent levels,

income and the local community welfare officer. Tenants in work are eligible for tax relief, with the amount varying depending on whether they are aged under or over 55. The subsidy available through tax relief is much lower than that available through the Supplementary Welfare Allowance Scheme and creates a disincentive to work and an unemployment trap for people on low incomes. There is a separate rent allowance for people who are tenants of formerly controlled dwellings.

In addition to creating unemployment traps and reducing the choice people can exercise over their housing, the system is confusing for claimants and is complex to administer. While there have been reductions in recent years, the relatively generous assistance for home buyers, together with the capital gain involved, also distorts demand for privately owned housing.

Action 10.16.1 — Commission research

By September 2001, the Homeless Agency to commission research into the possibility of a unified housing benefit which would be rationally based, related to ability to pay and neutral between tenures. The research will be completed by September 2002.

Action 10.16.2 — Seek to have proposals implemented

From January 2003, the Homeless Agency will seek to have the proposals of the scheme implemented by lobbying relevant bodies.

Improving access to health and treatment services

Introduction

Health boards are responsible for the delivery of a range of services, including community welfare, medical and treatment services. They are also responsible for the delivery of community care services including social work, public health and GP services, community welfare services, dental, chiropody and optical services. These services are of particular importance to people who are homeless who have much higher levels of ill health than the rest of the population and higher needs for social and other support services.

Health boards are also responsible for the provision of care of people aged under 18 who are homeless. While this plan is concerned with services for the adult homeless population, there will inevitably be cross over with the under 18 age group and health boards have a crucial role in ensuring that effective links are made.

This section sets out a number of objectives and actions which will directly improve the delivery of generalist health and treatment services to people while they are homeless as well as services for people with particular needs such as drug, alcohol and mental health services. A particular emphasis is placed on health promotion for people who are homeless and on the provision of training and supports to staff in services for people who are homeless. The actions are based broadly on the recommendations of the Multi Disciplinary Group of the then Eastern Health Board made in March 1999.

Other sections in the plan contain references to health and other services provided by health boards including community care and community welfare services.

Aim this period

To ensure that people who are homeless have speedy access to the full range of health and treatment services.

Context

The Health Strategy 'Shaping a Healthier Future' published by the Department of Health in 1994 provides the framework for the provision of health services in

Ireland. Underpinning the strategy are three principles, equity, quality of service and accountability. Of particular relevance to people who are homeless is the principle of equity which requires that special attention be given to certain disadvantaged groups (1994: 11).

In acknowledgment of the difficulties experienced by people who are homeless in accessing health services, a General Manager was appointed to coordinate improvements in the delivery of health services and other health board services in October 1999. The General Manager works in conjunction with the Homeless Policy Unit in Dublin Corporation and the Homeless Initiative. The Eastern Region Health Authority has also appointed a Director for Homelessness who is responsible for planning, commissioning and monitoring of health board services to people who are homeless the region, including young people under 18. While the Northern Area Health Board is currently responsible for coordinating homeless services for the region, it is planned that each health board will take on responsibility for the issue in time.

Three important studies into the health status, needs and use of health services of people who are homeless people in Dublin have also been undertaken in the last two years. This research reveals that people who are homeless have much higher levels of psychological distress, of dental problems, hazardous alcohol consumption and drug misuse than the rest of the population. Their quality of life is poor by general standards and they have low levels of social support. Many of the health problems identified are directly related to their lifestyles and risk behaviours are considerably greater than among the rest of the population. People who are homeless tend to be high users of medical services, including GP, outpatient and accident and emergency. Despite their entitlement, many people who are homeless do not have medical cards. This is due to lack of knowledge about their entitlement or the application process, rather than to administrative difficulties on applying for a card or the reluctance of GPs to register them.

There are many features of the health system which make it difficult for people who are homeless to access services. Over the years, a number of health services have been developed specifically for people who are homeless but these are centrally based. People who are homeless are automatically referred to the centre, which may result in a loss of service to the person and creates a situation where personnel in local areas feel that they have no responsibility for people who are homeless.

A further problem is that services are organised on care areas, causing particular difficulties for homeless people who may move between areas. They consequently find it extremely difficult to connect with any mainstream services. These difficulties are compounded when a homeless person has a dual diagnosis, for example a mental health and alcohol problem, because neither service may deal with them. There are also difficulties for people with behavioural or learning difficulties, for whom there are no suitable services available.

Performance indicators

The following indicators in relation to health and treatment services will be monitored throughout the period of this plan:

- The number and percentage of homeless people without medical cards
- The level of health of people who are homeless
- The extent of health services in day and night centres

- The extent of the use of health services in day and night centres by homeless people
- The extent of the use of mainstream health services by homeless people
- The number (and %) of homeless people using specialist or mainstream dental services
- The number (and %) of homeless people accessing drug and alcohol treatment services
- The level of appropriate use of health services by homeless people
- The number of homeless people with mental health problems
- The average waiting time for drug and alcohol detoxification services
- The average waiting time to receive therapy/counselling
- The satisfaction level of service users with health and treatment services
- The satisfaction level of those working with people who are homeless with their training in relation to health, mental health, drug and alcohol issues
- The satisfaction level of those working with people who are homeless with health and treatment services

Objectives and actions

Objective 11.1 — Area coordinators

To appoint a coordinator in each health board area by March 2001.

Comment

The coordinator will be responsible for the implementation of the provisions of the health and care aspects of the action plan and will coordinate a health care group in each health board area.

Action 11.1.1 — Appointment of coordinators

The Chief Executive Officer of each health board to appoint a Coordinator by March 2001.

Action 11.1.2 — Homeless care groups

The Chief Executive of each health board to establish a homeless care group by March 2001.

Comment

The care groups will include all health services (drugs, alcohol, mental health, public health, dental health, community welfare, chiropody, GP, elderly and disability) and homeless service providers. They will review the implementation of the action plan and will play a key role in improving communication between the various services.

Objective 11.2 — Medical cards

To ensure that from June 2001, every individual and family is provided with a medical card as soon as they become homeless.

Action 11.2.1 — Fast tracking medical cards

By March 2001, the Chief Executive Officer of each health board will agree protocols for fast tracking applications for medical cards by people who are homeless and designate an office for this purpose, to be effective from June 2001.

Objective 11.3 — Multi disciplinary health care teams

To put in place two multi disciplinary teams, as recommended in the 1999 report of the Eastern Health Board, by March 2001.

Comment

The multi disciplinary teams will be coordinated by a steering group and will have input from nurses, doctors, community welfare officers, social worker, care attendants, community psychiatric nurses, outreach drugs workers and administrative support. The teams will contract other specialist services such as dental and chiropody services as appropriate.

The main aim of these teams is to act as a mechanism for linking the homeless person with mainstream health services. To achieve this they will work both with the people who are homeless and providers of services to them. Their main target will be rough sleepers and the more chaotic homeless person residing in hostels or B&Bs.

Action 11.3.1 — Establish teams

The General Manager with responsibility for homeless services in the Northern Area Health Board will ensure the establishment of the teams by March 2001.

Action 11.3.2 — Training and support for homeless services

The teams will provide a range of training and support to people working in services for homeless people. The purpose of the training and support will be to build the capacity of front line staff to recognise mental and physical ill health, to understand the health system so that they can make appropriate referrals to the multi disciplinary teams and other health services.

Action 11.3.3 — Monitoring and reviewing

The General Manager will establish a steering group of homeless service providers to monitor the effectiveness of the teams, commencing in June 2001.

Objective 11.4 — Health education and promotion

To develop and implement from September 2001, a health education and promotion strategy for people who are homeless.

Rationale

There is no health education or promotion strategy targeted at homeless people. Yet homeless people suffer worse physical and mental health than the rest of the population, with very high levels of unhealthy behaviour, including heavy drinking, smoking and drug use. They are also susceptible to TB, Hepatitis (A,B,C) and HIV.

Action 11.4.1 — Working group

By April 2001, the General Manager to establish a working group of health education officers and homeless service providers to develop a health education and promotion strategy for homeless people. The working group will consult with homeless people in the development of the strategy.

Action 11.4.2 — Training for staff in homeless services

The General Manager in conjunction with the Homeless Agency, to ensure that training in the promotion of healthy lifestyles, recognising early signs of illness etc is provided to homeless service providers, commencing in September 2001.

Action 11.4.3 — Health promotion materials

The General Manager will ensure that health boards publish and distribute relevant health promotion materials and programmes (videos, leaflets etc) to homeless service providers from January 2002, on an ongoing basis.

Action 11.4.4 — Immunisation for staff of homelessness services

The General Manager will ensure that health boards develop immunisation programmes for staff in services for homeless people to commence in April 2001 and to be repeated on an ongoing basis.

Objective 11.5 — Dental services

To provide a dedicated dental service for homeless people at Cornmarket from March 2001.

Rationale

People who are homeless have been found to have very high levels of dental problems. Dental services are difficult for them to access due to complex eligibility arrangements. The establishment of a well promoted dedicated service, together with outreach to hostels and other services, will aim to improve the dental health of the homeless population and link them into mainstream services.

Action 11.5.1 — Recruit dental staff

The Northern Area Health Board will recruit a dental surgeon and nurse by March 2001.

Action 11.5.2 — Promote services

From March 2001, the General Manager to promote the availability of the dedicated service among homeless service providers and homeless people.

Action 11.5.3 — Implement dental service on outreach basis

From April 2001, the General Manager will ensure that the dental service will be available in hostels and day centres for people who are homeless on a regular basis.

Objective 11.6 — Hospital discharge procedures

To ensure that the Department of Health Circular 5/87 is implemented in all hospitals and to establish protocols and procedures which will ensure that all hospital staff are aware of the circumstances of people who are homeless and the services available to them, from January 2002.

Rationale

Many of the staff in hospitals take a very sympathetic attitude to people who are homeless and hospitals often provide shelter in A&E departments to people who would otherwise be on the street. Others routinely discharge people into homeless services without referral and there are many discrepancies and inconsistencies in practice. Furthermore, formal links between hospitals and homeless services are underdeveloped.

Action 11.6.1 — Establish forum

The General Manager to establish, by March 2001, a forum of representatives of the main hospitals and key homeless service providers.

Comment

The forum will complete an examination of admission, discharge and other policies and make recommendations on how these can be adjusted to ensure that they are appropriate to people who are homeless by September 2001.

Action 11.6.2 — Implement proposals

The General Manager to ensure that proposals are implemented from January 2002.

Objective 11.7 — Mental health services

To ensure that, by March 2002, people with mental ill health, who are homeless or at risk of homelessness, have access to seamless mental health treatment and support services, appropriate to their needs, regardless of which hospital catchment area they are in, have come from or are going to.

Action 11.7.1 — Working group

The General Manager for Homeless Services will establish a working group of homeless service providers, Directors of Mental Health in each health board and other relevant personnel by September 2001, to draw up the plan.

Comment

The plan will review fundamentally the operation of mainstream mental health services and make proposals to address the difficulties faced by people who are homeless in accessing them. The services to be reviewed include adult and child psychological, psychiatric, counselling and other non medical interventions. It will provide for protocols to deal with people outside of the established catchment areas and arrangements for the transfer of files between institutions and areas. It will also review existing special provision for people while they are homeless and make proposals on the improvement of those services and arrangements for the phasing out of these services as homelessness is reduced. It will also propose arrangements for monitoring and evaluation of services.

The plan will also address the needs of people who have learning difficulties, behavioural problems and personality disorders.

Action 11.7.2 — Implement plan

The plan will be implemented with effect from March 2002 and reviewed on a six monthly basis, through a working group of homeless service providers established for that purpose.

Objective 11.8 — Services for people with drug addiction

To ensure that, from March 2002, people with a drug addiction problem who are homeless or at risk of becoming homeless have immediate access to appropriate treatment and support services, in their local community and to ensure continuity of treatment if people are in prison or hospital.

This objective is closely linked to those on rough sleeping and day and night centres in sections five and six respectively.

Action 11.8.1 — Access to assessment and treatment

The CEO in each health board will ensure that plans are in place to ensure that homeless drug users have access to immediate assessment and the offer of treatment within one week of assessment, by March 2002.

Action 11.8.2 — Methadone clinic and needle exchange

The General Manager will coordinate discussions on the feasibility of providing the mobile methadone clinic, needle exchange and referral services at appropriate locations and times, including 7 day access, with homeless services providers and drug services by March 2001.

Objective 11.9 — Alcohol services

To ensure that people with problem drinking have access to residential and community based services which will aim to minimise the harm caused by their drinking and link them to treatment services as appropriate.

Action 11.9.1 — Action plan for homeless people with alcohol problems

The Directors of Mental Health in each health board area will complete an action plan to meet the needs of people who are homeless and have an alcohol problem, by September 2001.

Comment

The plan will include provision for an increase in the number of detox beds, step down facilities following detox, residential respite, and the development of outreach services to motivate people to attend for treatment, support people undergoing treatment and work with other disciplines to ensure continuity of care.

Objective 11.10 — People with HIV and Hepatitis C

To put in place by March 2002, plans to meet the treatment needs of people who are homeless with HIV and Hepatitis C.

Rationale

The medical regime for people with HIV and Hepatitis C is extremely rigorous. People who are homeless, in hostels or sleeping rough find it extremely difficult to adhere to this regime. Many people with HIV or Hepatitis C also have other problems such as drug or alcohol dependence or mental ill health, or combinations of these, which exacerbate their difficulties in managing their condition effectively.

Depending on their level of illness a range of accommodation options is needed, from independent living to high support for those suffering dementia or other serious illnesses and these housing issues are dealt with under in Objective 10.13.

Action 11.10.1 — Complete plans

The CEO in each health board to complete plans to ensure that people who are homeless with HIV or Hepatitis C have access to the range of treatment services necessary, with in one week of their presentation, by March 2002.

Objective 11.11 — Counselling service

To ensure that homeless people have easy access to counselling services from January 2002.

Rationale

Homeless people have often suffered trauma at some point in their life. Many of them have experienced physical and sexual abuse in childhood and during their time homeless. This trauma is rarely treated. There is a high level of depression

and low self esteem among the homeless population and expressions of suicidal feelings are not unusual. Through funding from the Homeless Initiative, one full time counsellor is available to homeless people in Failuti, for which there is a steady demand.

Achieving this objective will require an expansion of the number of counsellors available to homeless services. This could be achieved through the establishment of a panel of counsellors who will be available to the sector. In order to make effective use of professional counselling services, it will be necessary to ensure that front line staff in homeless services are trained to recognise when people may require counselling and support them to the point of being ready to avail of it.

Action 11.11.1 — Feasibility study

By November 2001, the Agency to have commissioned and completed a study into the best way of meeting the needs of people who are homeless for counselling.

Comment

The best way of meeting the needs of people who are homeless may be through the provision of a panel of counsellors who will be available through homeless services. Alternatively, the availability of counsellors on an ongoing basis within services may be more effective. The study will examine the options and make recommendations accordingly. The study will also make recommendations on the training for front line staff in homeless services, so that they are sensitised to the needs of service users and aware of the options in terms of counselling services.

Action 11.11.2 — Implementation

The Homeless Agency to ensure that the proposals arising from the feasibility study will be implemented from January 2002.

Action 11.11.2 — Training for front line staff

By January 2002 the Homeless Agency to have designed a training programme for front line staff in recognising needs for counselling, the types of counselling available, referral procedures, and the provision of support to people who may require counselling. The programme will be implemented with effect from March 2002, on an ongoing basis, and subject to regular reviews.

Objective 11.12 — Follow up research

In 2002 to follow up the health research on people who are homeless carried out in 1997 and 1999.

Rationale

Three important research projects into the health needs of people who are homeless were carried out in 1997 and 1999. These provided valuable information on the health status, health needs and use of health services by people who are homeless and have directly informed the objectives and actions in this section.

Repeating these studies will provide valuable information on the impact the objectives and actions in this section have on the health status of people who are homeless.

Action 11.12.1 — Resources

The General Manager will ensure that resources are made available for follow up studies to be undertaken in 2002.

Action 11.12.2 — Commission study

In consultation with the Homeless Agency, the General Manager will commission follow up study by January 2002.

Action 11.12.3 — Complete, review and plan

The study will be completed by October 2002 and the General Manager will ensure that the findings are published and disseminated and used to inform the development of future services for people who are homeless.

Improving social welfare and community welfare services

Introduction

Income maintenance provided through the Department of Social, Community and Family Affairs is a crucial element of the system of services for people who are homeless. Social welfare services impact on people before they become homeless, while they are homeless and after they have settled.

Section eight on settlement services and section ten on private rented housing deal with aspects of the social welfare system as it affects people who are moving from homelessness or who are settled in housing. This section is primarily concerned with social welfare services for people while they are homeless and covers issues in both the mainstream and the Supplementary Welfare Allowance scheme which is administered by Community Welfare Officers.

Aim this period

To secure changes in the operation of the mainstream social welfare and the Supplementary Welfare Allowance Scheme which will ensure that the social welfare rights of people who are homeless are met in an efficient and consistent manner.

Context

Social welfare services play a significant role in the lives of people who are homeless, being the only source of income for the overwhelming majority of them. They access basic payments, either through the mainstream system or the Supplementary Welfare Allowance Scheme (SWA). They also rely on the SWA scheme for assistance with emergency accommodation charges and other supplements such as travel, diet, clothing and exceptional needs payments. The Homeless Persons Unit in Charles Street provides a central point of assessment for and payment of SWA, either as basic payments and/ or supplements under the scheme and is often the first contact people who are homeless have with state services.

While there have been many significant improvements of the social welfare system in recent years, many problems persist for people who are homeless. These cause problems, not just for the people themselves but for the agencies providing services to them. One of the most significant problems is caused by

confusion over the entitlement of people who are homeless to claim unemployment assistance. Local social welfare offices routinely refuse unemployment assistance to people who are homeless in their area and refer claimants into the Homeless Persons Unit from where they are referred to emergency accommodation. In some cases, they do not need this accommodation as they could stay with friends and family. While this is not ideal, it is usually preferable to their spending time on the 'homeless scene' with its attendant dangers and disadvantages. It would also be a great deal cheaper to support people in these informal situations. The use of the Homeless Persons Unit as a dispenser of routine and ongoing social welfare payments adds pressure to an already pressurised service and reduces the level of other interventions which can be undertaken by staff in the HPU, with people who are homeless.

A further confusion arises in respect of people who are rough sleepers and there is a lack of clarity about their right to claim social welfare, with some people receiving payments, and others being refused. One problem for people in emergency accommodation is that they are generally deemed to be ineligible to claim unemployment assistance, although they can be in such accommodation for long periods. By being dependent on SWA they are ineligible for Back to Work or Education schemes.

There are inequities in the way assistance is provided towards emergency accommodation costs. People in Bed and Breakfast make no contribution to the cost of their accommodation while people in hostels do. Of the latter there are differences in the way assistance is calculated, leaving people in different hostels with differing levels of assistance. Arrears of rent can lead to residents being barred from emergency accommodation and this could be rectified by the extension of the Household Budget Scheme to people in emergency accommodation. This is dealt with under Objective 7.7.

Other problems are caused for people who are homeless by the general operation of the social welfare and SWA systems. While the staff in the Homeless Person's Unit operate the SWA scheme in a flexible way, there is a more general problem of lack of understandable and transparent criteria for exceptional needs and other payments and the lack of promotion about what is available under the scheme. There is also inconsistency in the administration of the scheme between individual community welfare officers and districts. This is particularly problematic for people who are moving from homelessness into their own tenancies and these issues are dealt with in more detail in sections eight and ten.

Performance indicators

The following indicators of success in relation to social welfare and community welfare services will be monitored throughout the period of the plan:

- The number (+ %) of people who are homeless receiving mainstream unemployment payments
- The number (+ %) of people who are homeless receiving SWA as a basic payment
- The number (+ %) of people who are homeless receiving other benefits
- The number of rough sleepers receiving (+ the numbers refused) social welfare payments
- The number of people referred to the Homeless Persons Unit from local social welfare offices
- The number of applications for exceptional needs payments paid (+ refused)

- The average size of exceptional needs payments made to people who are homeless
- The satisfaction of services users with the social welfare system
- The satisfaction of other homeless service providers with system as it affects people who are homeless

Objectives and actions

Objective 12.1 — entitlement to unemployment assistance

To ensure that people who become homeless are entitled to retain or make claims for unemployment assistance.

Action 12.1 — Lobby the Department of Social, Community and Family Affairs

The Homeless Agency to make representations to the Department on this issue by March 2001.

Comment

In making representations to the Department it is proposed to ensure that the practice, by local social welfare offices of referring people who are homeless in to the HPU, where this is not necessary or appropriate, will be discontinued.

A second purpose will be to ensure that people who are homeless retain their entitlement to claim unemployment assistance, rather than Supplementary Welfare Allowance.

Improvements in this area will be facilitated by Objective 12.3.

Objective 12.2 — Rough sleepers

By March 2001, the Homeless Agency to seek to ensure that people sleeping rough are able to claim their social welfare entitlements.

Rationale

There is confusion about the right of people who sleep rough to claim social welfare. Some people are able to claim Supplementary Welfare Allowance, others are refused any payment due to their lack of a fixed address. This confusion appears unnecessary in the context of a computerised social welfare payment system.

Action 12.2.1 — Lobby the Department of Social, Community and Family Affairs

The Homeless Agency to make representations to the Department by March 2001 to ensure that the right to claim social welfare by people who sleep rough is secured.

Objective 12.3 — Local social welfare offices

By March 2001 to consult with the Department of Social, Community and Family Affairs about developing the role of local social welfare offices in responding to people who are homeless.

Rationale

One of the main aims of this action plan is the development of local responses which will both meet the needs of people who are homeless and prevent them from becoming homeless. Local social welfare offices clearly have contact with

people out of home and they could be facilitated to provide effective advice, information and referral services to people who contact them. This would be achieved by their having access to training provided through the Homeless Agency, through use of the Homeless Directory and data base and through use of the second tier advice services to be provided by the Agency.

Action 12.3.1 — Consultation

Consult with the Department of Social, Community and Family Affairs on this issue by March 2001.

Objective 12.4 — Equity in assistance for emergency accommodation

From September 2001 to ensure equity in the payment of assistance towards the cost of emergency accommodation

Action 12.4.1 — Review of hostel payments

The Homeless Agency to review, in conjunction with the Homeless Persons Unit and hostel providers, the manner of calculation for assistance for people in hostels by April 2001.

Action 12.4.2 — Review of Bed and Breakfast

The Homeless Agency, in conjunction with Dublin Corporation, which pays for Bed and Breakfast accommodation, and the Homeless Persons Unit to review the situation with regard to people in Bed and Breakfast accommodation by April 2001.

Action 12.4.3 — Agree new scheme

The Homeless Agency in conjunction with the Homeless Persons Unit and based on the reviews to devise a new payment scheme for people in emergency accommodation to ensure equity between different types of accommodation to be effective from September 2001.

Objective 12.5 — Promote entitlements

To devise a strategy for the effective promotion of entitlement to social welfare for people who are homeless by September 2002.

Rationale

Much has been done to improve the information available on general social welfare entitlements in recent years. However, there is still widespread ignorance about what is available, especially under the SWA scheme, and particularly among people who are homeless.

The strategy for the promotion of information about social welfare payments will relate to the strategy for promotion of services to people who are homeless under Objective 4.5.

Action 12.5.1 — Working group

The Homeless Agency to establish a working group comprising representatives of homeless services, homeless people, the Homeless Persons Unit, and the Department of Social, Community and Family Affairs by September 2001.

Comment

The purpose of the working group will be to review existing promotional material on social welfare entitlements and devise a programme for promoting the entitlements of people who are homeless, including exceptional needs and other payments available under the SWA scheme.

Action 12.5.2 — Implement programme

The Homeless Agency to ensure the implementation of the programme from September 2002.

Comment

The programme will be subject to six monthly reviews, based on feed back from service users and other service providers. These reviews will inform the development of a programme to be incorporated into the action plan 2004–2006.

Community welfare services

Aim this period

To ensure that effective community welfare services operate as part of the continuum of service for people who are homeless, are available in local areas and that they are focused on settlement and the prevention of homelessness.

Context

Community welfare services are provided by the health boards. With regard to people who are homeless, community welfare services have a significant role, both in providing services while people are homeless and in supporting people who have moved out of homelessness. They also have a significant role in preventing homelessness. Through the Supplementary Welfare Allowance Scheme (SWA) community welfare officers can provide a flexible system of financial support which can make the difference between some one losing a tenancy and being able to sustain it. The fact that community welfare services are locally based makes them important in identifying people who are at risk of homelessness.

In terms of community welfare services for people while they are homeless, these are provided by a central Homeless Persons Unit (HPU). The HPU, which was established in 1984, provides a range of services to people who are homeless. Community welfare officers administer basic and supplementary payments under the Supplementary Welfare Allowance Scheme. They also place people in emergency accommodation on behalf of the Dublin local authorities and operate an out of hours free phone service which refers callers to emergency accommodation. Community welfare officers provide information and advice, on the range of health and social services, liaise with relevant services and advocate on behalf of people who are homeless.

There have been a number of problems with the operation of the HPU, largely related to the lack of investment of resources in the service, recent increased levels of homelessness and a reduction in the supply of emergency and move on accommodation. These factors have made it difficult for community welfare officers to offer the range of services necessary to meet the needs of people who make contact with it.

The fact that the service is central has also created additional pressure on the service, and for people who are referred to the city centre, away from familiar supports. It has also led to the absence of ownership of the problem of

homelessness at local level and no responses have been developed in areas outside of Dublin city.

The operation of the social welfare system, referred to above, which leads the HPU to make ongoing payments to people who must claim SWA rather than mainstream social welfare payments, has also created pressure on the service. This adversely affects the ability of staff to deliver other services. Resolving this situation will improve the capacity of the staff in the HPU to deliver effective services to people who are homeless.

Recent developments and approaches to the issue of homelessness, including the development of local area responses, new technology for managing vacancies in emergency accommodation, and the adoption of partnership as the way to deliver an integrated service to people who are homeless, sets the scene for changes in the way community welfare services in general, and the HPU in particular, operate. A General Manager, employed by the Northern Area Health Board is responsible for the implementation of these changes.

Performance indicators

The following indicators of success in relation to community welfare services will be monitored throughout the period of this plan:

- The number of people referred to HPU from local CWOs
- The number of people who are homeless using the HPU
- The number of people to whom service is delivered on outreach basis
- The number (and %) of people who are homeless to whom a service is delivered on an outreach basis
- The number of people who are homeless who receive (and the number refused) basic (and supplementary) financial support on an outreach basis
- The number of people who are referred to emergency accommodation on an outreach basis
- The level of satisfaction of HPU staff with service provided on outreach basis
- The level and satisfaction of HPU staff with the supports and resources made available to them
- The level of satisfaction of HPU staff with the level and quality of services the HPU is able to provide to people who are homeless
- The level of satisfaction of people who are homeless with services provided by HPU
- The level of satisfaction of other homeless service providers with the service provided by the HPU
- The satisfaction level of HPU staff with the extent, quality and relevance of training they have received
- The satisfaction level of local CWOs with the extent, quality and relevance of training they have received in relation to homelessness
- The difference in rent allowance paid in relation to different types of emergency accommodation

Objectives and actions

Objective 12.6 — Move location of HPU

To complete the relocation of the HPU from Charles Street by March 2001.

Rationale

The building from which the HPU operates is not suitable for its purpose. This fact, combined with plans to redevelop the site on which it is located have led to plans to relocate the HPU early in 2001.

Action 12.6.1 — Relocate services

The General Manager to ensure the successful relocation of the HPU without interruption of services, by March 2001.

Objective 12.7 — Develop outreach community welfare services

To provide community welfare services to people in emergency accommodation on an outreach basis from March 2001.

Rationale

The HPU has piloted the delivery of services on an outreach basis and the initial feedback from service users has been positive. The outreach service will be provided by 'patch' community welfare officers. The provision of outreach services will obviate the necessity for these people to attend at a central location for community welfare services and will facilitate a more effective emergency response for people who are newly homeless.

Action 12.7.1 — Provide outreach service

The General Manager will ensure that services are provided on an outreach basis from March 2001.

Action 12.7.2 — Evaluate changed delivery from HPU

The General Manager will ensure that the changes in the delivery of services from the HPU are continually monitored, evaluated and developed. Annual reports on the delivery of services will be prepared and published annually by the General Manager, commencing in March 2002.

Objective 12.8 — Accessible and person centred community welfare services

To ensure the range of services available through community welfare officers to people who are homeless are accessible and delivered in a person centred manner

Rationale

While some community welfare officers operate the SWA scheme in a flexible and person centred manner, there are many inconsistencies in the operation of the scheme. In terms of homelessness, the fact that there has been central unit dealing with all homeless people, has meant that local community welfare officers may not be familiar with the issue of homelessness and the needs and options of people who are homeless.

Actions under this objective aim to ensure that community welfare services are delivered in a person centred way and are accessible and responsive to the needs of people who are homeless, wherever they are.

Action 12.8.1 — Training for local CWOs

The General Manger to ensure the provision of awareness training for local community welfare officers on the needs of people who are homeless and the services available to them, from September 2001.

Comment

This training may be specially devised or may take place as part of the training provided for other service providers by the Homeless Agency. However it is provided it will commence in September 2001 and be ongoing, subject to review and development.

Action 12.8.2 — Monitoring and evaluation

The General Manager will ensure that the operation of community welfare services to people who are homeless are continually monitored, evaluated and developed. Annual reports will be prepared and published by the General Manager, commencing in September 2002.

Objective 12.9 — Quality standards

To draw up and implement service quality standards for the HPU by December 2001.

Rationale

A key component of the continuum of care approach is the development of good practice standards in all services. Such standards have already been developed in a number of services for people who are homeless. No such standards currently exist for the HPU.

As with other services, the standards will be drawn up by the service providers themselves. This ensures that they are understood and realistic and form a framework for continual improvement.

Action 12.9.1 — Working group

The Homeless Agency to convene a working group of community welfare officers to work with an outside consultant to draw up quality standards and performance indicators to be completed by December 2001.

Action 12.9.2

The Homeless Agency to ensure that the staff in the HPU have the necessary supports and resources to practice the standards and to review on an ongoing basis.

Improving access to education, training and job opportunities

Introduction

Homeless people tend to have low education qualifications and low job skills, factors which contribute towards their becoming and remaining homeless. If people are to move from homelessness and be integrated in society, education, training and job opportunities must be a part of the overall suite of services available to them.

The government strategy on homelessness has recognised the need for training and education opportunities to be improved and developed, as part of the continuum of service for people who are homeless. This section sets out objectives which will begin to address the disadvantages experienced by people who are homeless in relation to training, education and job opportunities and which will be developed over the course of the plan.

Aim this period

To ensure that people who are homeless, including school children, have easy access to a range of appropriate education, training and job opportunities which will be developed throughout the course of the plan

Context

All research on homelessness points to the fact that the majority of homeless people have low educational achievement and low job skills. Securing training and education is important in terms of developing their skills and enhancing their opportunities for employment and ultimately independence. It is also important in terms of developing their self esteem and capacity for social integration

People who are homeless may have difficulty in accessing mainstream opportunities for training and education. Information about courses and classes may not be readily accessible in the services used by people who are homeless. Such opportunities usually require high levels of motivation on the part of the person accessing those opportunities. Education and training may not be high on the list of priorities for someone who is homeless when they have more pressing and fundamental needs. This indicates the need to develop special programmes

targeting people who are homeless and to focus on developing motivation and preparation for training.

There are already examples of programmes specifically for people who are homeless, such as the Solo project in the Liberties VEC which was organised in conjunction with the Society of St Vincent de Paul. Other agencies also have organised courses and community employment schemes in conjunction with FAS. The effectiveness of these projects should be reviewed in the course of developing opportunities for training.

The government strategy on homelessness provides for the appointment of dedicated officials from FAS and the VEC to work with people who are homeless in the Dublin area. Learning for Life, the Department of Education and Science White Paper on Adult Education makes provision for the appointment of an education coordinator to work with people who are homeless. This appointment has now been made, through the VEC. The role of the coordinator will be to develop outreach links with relevant statutory, community and voluntary groups to establish the learning needs of people who are homeless and based on those needs to develop and coordinate the provision of literacy, community and basic education programmes. It is envisaged that provision will embrace a spectrum, ranging from initial tuition and guidance in hostels and other centres for people who are homeless, to specific programmes for people who are homeless in education and training centres and progression from there to mainstream learning options.

It is important that new opportunities for people who are homeless are comprehensive and developed in a coordinated manner. This will demand that work be done in accessing employment, on behalf of people who are homeless, as well as providing them with training and educational opportunities. For some people sheltered employment may be necessary and it is possible that some of this might be provided within the sector. For instance the furniture store proposed in objective 8.3 could employ people who are homeless, or people who are homeless, or have been homeless, could be involved in the development of building maintenance services for hostels and other centres.

Performance indicators

The following indicators of success in relation to training, education and job opportunities will be monitored throughout the course of the plan:

- The number of education and training opportunities specifically targetted at people who are homeless
- The number of people who are homeless participating in targetted pre vocational training programmes
- The number of people who are homeless participating in mainstream pre vocational training
- The number of people who are homeless participating in targetted vocational training
- The number of people who are homeless participating in mainstream vocational training
- The awareness level of people who are homeless with education and training opportunities available
- The satisfaction level of people who are homeless with the education and opportunities available
- The satisfaction level of people who are homeless with the education and training they have participated in

- Qualifications or accreditation received by people who are homeless as a result of the training or education they have participated in
- Self perceived improvements in skills, employability and/or confidence as result of training or education people who are homeless have participated in
- The levels of literacy and numeracy among people who are homeless
- The number of people who are homeless accessing literacy and numeracy tutoring/training
- The level of school attendance of school age children who are homeless
- The number of people who are homeless placed in support employment schemes
- The number of people who are homeless in full time, part time or casual work

Objectives and actions

Objective 13.1 — FAS and VEC coordinators

To ensure joint working between FAS and the VEC in the provision of tailored programmes for people who are homeless and the improvement of access by them to mainstream programmes, throughout the course of the action plan.

Rationale

A coordinator from the VEC to work with people who are homeless has been appointed and there is provision in the government strategy for a similar post to be created by FAS. It is important that these agencies work together, with one another, and with homeless service providers to provide a coherent and coordinated programme of training and educational opportunities for people who are homeless which will allow them to progress towards further education, training and employment.

It will be the responsibility of the Homeless Agency to ensure that the work of the two coordinators impacts positively on people who are homeless.

Action 13.1.1 — Appointment of FAS coordinator

The Homeless Agency will ensure that the FAS coordinator is appointed by April 2001.

Action 13.1.2 — Coordinated programme

The Homeless Agency will ensure that a range of appropriate opportunities are developed for people who are homeless, in a coordinated way, throughout the course of the action plan by working with the two coordinators and ensuring that programmes are informed by homeless service providers and homeless people themselves.

Objective 13.2 — Literacy programme

To put in place a programme of training in literacy skills for people who are homeless, to commence by April 2001.

Rationale

Many people who are homeless have low literacy skills. This can be addressed in a number of different ways but it is considered that the most appropriate way, at least initially is by training people who work with people who are homeless to recognise difficulties with literacy and to enable them to undertake tutoring. This will complement the literacy training available through the VEC and NALA.

Action 13.2.1 — Commence training

The VEC coordinator to devise literacy tutor training targeted at front line workers in homeless services and to be provided as part of the Homeless Agency training programme, by April 2001.

Action 13.2.2 — Review and plan

The VEC coordinator will review the literacy training and the literacy needs of people who are homeless on an ongoing basis.

Objective 13.3 — Pilot training programmes

By January 2002 to have in place pilot training programmes for people who are homeless.

Action 13.3.1 — Identify current policies and activities

The Homeless Agency to work with FAS, VEC and the Department of Education & Science to identify their current policies and activities in relation to providing education, training and access to work for people who are homeless by September 2001.

Action 13.3.2 — Identify needs

Identify the training, education and employment ready needs of people who are homeless. This will be done by the above agencies in conjunction with homeless people and homeless service providers and will be completed by September 2001.

Action 13.3.3 — Pilot training programmes

The Homeless Agency to ensure that pilot pre vocational and educational programmes are available in a number of homeless services and mainstream training centres with effect from January 2002.

Action 13.3.4 — Ensure provision of child care as necessary

The Homeless Agency to ensure that appropriate child care facilities are available for parents wishing to avail of training, from January 2002.

Objective 13.4 — Develop links with employers

To develop links with employers, to encourage them to provide job opportunities to people who are homeless, throughout the course of the plan.

Rationale

It is likely that proactive contact with employers could open up job opportunities for people who are homeless. Such schemes have been successful in securing employment on behalf of people who are unemployed. It is proposed that these models and services be used as a basis for developing links with employers for people who are homeless.

Action 13.4.1 — Advice on links

The FAS coordinator to advise the Homeless Agency on the most effective way of making links with employers, using the experience of Local Employment Services and other relevant agencies, by June 2001.

Action 13.4.2 — Implement and review

The FAS coordinator to establish, develop and review links with employers on an ongoing basis.

Objective 13.5 — Retention of rent allowance

To ensure that people who are homeless who take up jobs are able to retain rent supplement and other benefits, at least on a transitional basis

Rationale

Where people who are homeless get work, it is likely to be in relatively low paid jobs. Once they start working they lose entitlement to rent supplement and to other secondary benefits. This may leave them no better off financially, indeed they may even be worse off. To maximise the opportunity for people to work, retention of benefits such as rent allowance should be considered.

Action 13.4.1 — Lobby the Department of Social, Community and Family Affairs

By March 2001, the Homeless Agency to lobby the Department of Social, Community and Family Affairs for the retention of rent allowance and other benefits by people who are homeless who take up job opportunities.

Objective 13.4 — Review eligibility criteria for training course

To review the eligibility criteria for training courses to ensure they meet the needs of people who are homeless.

Rationale

Criteria for training courses usually require that applicants have been unemployed for at least six months. This can create a barrier for people who are homeless who may not have been unemployed for that length of time, or who do not receive unemployment assistance, either because they are deemed ineligible because they do not have a permanent address or because they are in receipt of disability rather than unemployment payments.

Action 13.4.1 — Lobby FAS and the Department of Social, Community and Family Affairs

The Homeless Agency to establish the extent to which people who are homeless may be excluded from participating in training courses because of the six months unemployment rule and to have that rule waived to ensure maximum eligibility among people who are homeless, by December 2001.

Objective 13.5 — School children

To ensure that children of school age, who are homeless, are supported to fully participate in school, throughout the course of the plan.

Rationale

The schooling of children whose parents are homeless is often very adversely affected by homelessness. They may suffer an interruption in school attendance or it may be difficult for them to complete homework and other activities, due to the lack of space or opportunity in hostels or other emergency accommodation. They may also suffer emotional trauma due to being homeless which adversely affects their ability to perform at school.

Children should be supported to continue attending their local school, unless there are indicators against this and should be facilitated to fully participate in school activities through the provision of additional supports.

Action 13.5.1 — Review policies

The Homeless Agency to review the policy of the Department of Education and Science, in relation to the schooling and other supports for children who are homeless, by June 2001.

Action 13.5.2 — Develop policies

The Homeless Agency, in conjunction with the Department, to ensure the development of policies which will best ensure that children who are homeless are maintained in their local school and supported to participate fully in school activities, while they are homeless.

The Homeless Agency — structure and role

Introduction

As described in section two a Homeless Agency will be established to coordinate and manage the delivery of services to people who are homeless in Dublin and is provided for under the terms of *Homelessness — An Integrated Strategy* published by the government in May 1999.

The Agency will be responsible for the planning, coordination and management of services to people who are homeless in the Dublin area. The Agency will be responsible for leading voluntary and statutory bodies in the implementation of this action plan, monitoring its implementation, adjusting it as necessary and planning for the future. It will also have a role in developing new responses to homelessness and in eliminating homelessness in Dublin.

This section describes the background, purpose and structure of the agency. Specific actions to be carried out by the Agency, or which the Agency will ensure are carried out, are contained in other sections of the plan.

Context

Proposals for a new structure with in which services to people who are homeless would be planned, coordinated and continuously improved were made by a working group of homeless service providers from the voluntary and statutory sectors. The proposals arose from a process of redesigning homeless services. The purpose of the redesign was to ensure that the needs of homeless people would be central to the delivery of services and that homeless services would work as a system, be focused on meeting immediate needs and supporting homeless people to move on out of homelessness and into sustainable housing, self sufficiency and independent living, appropriate to each persons ability and needs. This system, described as continuum of care, is explained in section two.

A new agency was proposed as a central 'hub' for homeless services which would be organised regionally and operate locally. Dublin Corporation was proposed as the lead agency, with other local authorities being lead agencies in their areas, and linked into the overall structure. These proposals were subsequently adopted by the government cross department team on

homelessness and incorporated into the government document 'Homelessness and Integrated Strategy which was published in May 2000.

It is not intended that the agency will be a permanent structure. In the effective achievement of its aims, the Homeless Agency will make itself redundant. While it is not possible to gauge the life time of the Agency at this stage, a target should be set in the next plan. The remainder of this section describes the purpose and structure of the Agency.

Purpose

The Homeless Agency is a governmental agency responsible for the planning, coordination and delivery of quality services to people who are homeless in the Dublin area. It will involve a range of voluntary and statutory agencies working in partnership to agreed plans to deliver integrated services to people who are homeless and assisting them to move rapidly to appropriate long term housing and independence. The Agency will play a major role in eliminating homelessness. It will vigorously advocate improvements in mainstream services to make them responsive to the special needs of people who are homeless or at risk of homelessness and work with them to develop strategies to prevent homelessness from occurring.

Specifically the agency will:

- Lead relevant agencies in the development and implementation of action plans
- Harness the commitment of people working in homeless services and create the circumstances for them to work together
- Coordinate all services to people who are homeless in Dublin
- Deliver some direct services to people who are homeless
- Provide training and other supports to services
- Monitor and evaluate the effectiveness of services
- Collect and analyse data on homelessness
- Carry out research to inform the development of effective responses to homelessness
- Administer funding to homeless services
- Agree service contracts with agencies

The Agency will have its own staff and will operate under the direction of a Board. The Board comprises representatives from the four Dublin local authorities, the Eastern Region Health Authority, the Northern Area Health Board, FAS, VEC, Probation and Welfare Services and the voluntary sector. A Consultative Forum will provide the forum for the development of partnership, development of strategic plans and the monitoring of those plans. The Forum has an independent chair who is also a member of the Board. A list of Board and Forum members is contained in Appendix one.

A summary of costings

Introduction

This section sets out a summary of the costings for the action plan. These are based on costing each action in the plan and a more detailed breakdown is available from the Homeless Agency on request. Costs are based on the estimated cost of providing accommodation and services, apply to the actions in the plan only and are additional to what is currently being expended on services for people who are homeless in Dublin. They include the cost of capital for all accommodation and other buildings, including long term housing provision, provided for in the plan. The provision of long term housing accounts for about three quarters of the cost of the plan.

This plan and costs are very much ‘front loaded’. Following this plan, there should be no need for further capital investment in emergency or transitional accommodation, as provision in the plan will ensure an adequate supply of these facilities into the future. This assumes that services work effectively and that there is a constant flow of people through the system. As the system begins to work more effectively and the length of time people spend in emergency accommodation reduces, the amount of this accommodation needed, and the revenue costs attached to providing it, will reduce proportionately.

The provision of sheltered and supported housing is virtually a once off expenditure — once the people in the system who need this sort of housing are accommodated, this need should not arise in the future. There may continue to be a need for supported housing, but not specifically for people who are homeless.

As the numbers of people becoming homeless decreases, there will be a concomitant reduction in the level of all homeless services needed and resources can be redeployed to more effective community support and preventative services.

Each of the actions in the plan has been costed, with costs divided between revenue and capital. The following is a summary of the costing and revenue and capital costs are combined. The costs of the Agency include all staffing and running costs, including the implementation of the new delivery system, free phone and

access housing unit. It also includes research, training, publications etc. The budget for health and treatment will be covered by existing health board funds in year one, as will measures under social welfare and education and training.

Cost Summary	2001	2002	2003	Total
	£	£	£	£
Section two:				
Continuum of care	120,000	85,000	50,000	255,000
Section three:				
Prevention and elimination	130,000	60,000	400,000	590,000
Section four:				
Advice, information and referral	109,900	93,000	61,000	263,900
Section five:				
Reducing street homelessness	3,486,500	2,654,000	2,532,000	8,672,000
Section six:				
Developing day and night centres	15,000	0	0	15,000
Section seven:				
Emergency accommodation	6,795,000	9,470,000	6,680,000	2,294,000
Section eight:				
Settlement in the community	240,000	768,000	768,000	1,776,000
Section nine:				
Transitional housing	10,000	2,000,000	5,000,000	7,010,000
Section ten:				
Long term housing	26,885,000	45,375,000	55,960,000	128,220,000
Section eleven:				
Health and treatment	<i>From existing funds</i>	<i>To be planned</i>	<i>To be planned</i>	
Section twelve:				
Improving social welfare	<i>From existing funds</i>	<i>To be planned</i>	<i>To be planned</i>	
Section fourteen:				
The new agency	1,000,000	3,335,000	3,335,000	8,582,000
Grand total	38,791,400	63,840,000	74,786,000	177,417,400

Members of the Homeless Agency

Board

- Chair Philip Maguire, Assistant City Manager, *Dublin Corporation*
Kathleen Houlihan, Director of Housing, *Dun Laoghaire/Rathdown County Council*
Alan Carty, Director of Housing, *Fingal County Council*
Pat Smith, Assistant County Manager, *South Dublin County Council*
Michael Walsh, Assistant Chief Executive Officer, *Northern Area Health Board*
Pat McLaughlin, Director, Planning and Commissioning, *Eastern Region Health Authority*
Margaret Lovett, Assistant Manager, *FAS, Jervis Street*
Jacinta Stewart, Education Officer, *City of Dublin, VEC*
Noel Cleere, Assistant Principal, *Probation and Welfare Services*
Fr Gerry Raftery, Director, *Merchant's Quay, Ireland*
Jack Dunphy, Service Manager, *Crosscare*
Donal McManus, Director, *Irish Council for Social Housing*
Maureen Lynott, Independent Chair, *Consultative Forum*

Consultative Forum

- Chair Maureen Lynott, Independent
- Damien Drumm, Assistant Principal Officer, *Dublin Corporation*
- Maire Twomey, Chief Welfare Officer, *Dublin Corporation*
- Declan Wallace, Assistant Principal Officer, *Dublin Corporation*
- Martin Judge, Administrative Officer, *South Dublin County Council*
- Richard Brady, Acting Senior Administrative Officer, *Fingal County Council*
- Jim Carson, Acting Senior Administrative Officer, *DunLaoghaire/Rathdown County Council*
- Billy Quinn, General Manager, *South Western Area Health Board*
- Ray Meade, Superintendent Community Welfare Officer, *East Coast Health Board*
- Frank Mills, General Manager, *Northern Area Health Board*
- Orla Barry, Director of Services, *Focus Ireland*
- Teresa Dolan, Assistant Director, *Capuchin Day Centre*
- Lisa Cuthbert, Director, *PACE*
- Don Commiskey, Director, *AIDS Fund*
- Dermot Kavanagh, Research and Development Manager, *Merchant's Quay, Ireland*
- Greg Maxwell, Director, *Dublin Simon*
- Muireann Morris, Director, *Sonas Housing Association*
- Patricia Cleary, Executive Director, *HAIL Housing Association*
- Anne O'Donovan, Director, *Centrecare*

- A Bibliography of Single Homelessness Research**, 2000, Fitzpatrick, S, Klinker S, *The Policy Press, Bristol*
- A Clearer Future: Proposals for a New Funding Regime for Homeless Services**, 2000, *Homeless Initiative* Dublin
- A Night Time Service for Homeless Men in Dublin: An Evaluation of a Crosscare Pilot Project**, 1999, Liz Lennon, *Homeless Initiative* Dublin
- A Settlement Strategy for Dublin**, 1999, *Homeless Initiative* Dublin
- A Study into Funding Policies, Options and Operations**, 1998, Ryan M, *Homeless Initiative* Dublin
- America's Homeless — Numbers Characteristics and Programs that Serve Them**, 1989, Burt, M.R., Cohen, B.E., *Urban Institute Press*, Washington, DC
- Annual Statistical Bulletin**, 1996, *Department of the Environment, Dublin*.
- Audit of Services**, 1997, Haase, T, McKeown, K, *Homeless Initiative*
- Case Management Literature Review**, 1999, Supported Accommodation Assistance Program, *Health and Community Services* Canberra, Australia
- Central London Street Monitor**, 1998, *Homeless Network* London
- Changing Lives**, 1998, Alexander, K, and Ruggieri, S, *Crisis*
- Child Care Act**, 1991, *Stationery Office* Dublin
- Coping with Homelessness: Issues to be Tackled and Best Practices in Europe**, 1999, Avramov, D. (Ed), FEANTSA, ICCR, SFI, STAKES, KIVOTOS, *Ashgate Publishing* UK
- Counted In, the Report of the 1999 Assessment of Homelessness in Dublin, Kildare and Wicklow**, 1999, O'Connor, M, Williams *ESRI/Homeless Initiative* Dublin
- Delivering Better Services to Homeless in People in the Dublin Area, A Report for the Homeless Initiative**, 2000, Connolly A, *Homeless Initiative* Dublin
- Dun Laoghaire/Rathdown Integrated Plan on Homelessness: Proposals of the Local Area Working Group**, *Homeless Initiative* Dublin
- Fingal Integrated Plan on Homelessness: Proposals of the Local Area Working Group**, 2000, *Homeless Initiative* Dublin
- Funding for Homeless Services: A Study of Policies and Operations**, 1998, Ryan, M, *Homeless Initiative*

- Health Status, Health Service Utilisation among the Adult Homeless Population of Dublin**, 1997, Holohan, Tony Dr, *Eastern Health Board*
- Homeless Initiative 1997 Evaluation Report**, 1998, Boyle, R, Brown, P, Institute of Public Administration, Dublin
- Homeless Initiative 1998 Evaluation Report**, 1999, Boyle, R, Butler Worth, P, Institute of Public Administration, Dublin
- Homeless Initiative 1999 Evaluation Report**, 2000, Boyle, R, Butler Worth, P, Institute of Public Administration, Dublin
- Homeless Initiative: Final Evaluation Report**, 2001, Boyle, R, Butler, M, O'Donnell, O, Institute of Public Administration, Dublin
- Homelessness and Social Policy in the Republic of Ireland**, 1996, O'Sullivan, E, *University of Dublin*, Dublin
- Homelessness Directory**, 2000/2001, *Resource Information Service/Homeless Initiative*
- Homelessness in the Eastern Health Board Recommendations of a Multi Disciplinary Group**, 1999, *Eastern Health Board*, Dublin
- Homelessness in Dun Laoghaire/Rathdown: An Assessment of Need and Service Provision**, 2000, Hickey, C, *Homeless Initiative*, Dublin
- Homelessness: An Integrated Strategy**, 2000, *Department of Environment and Local Government*, Dublin
- Homing in on Outreach: the Report of the Outreach Working Group with Proposals for the Definition, Role and Funding of Street Outreach Services to Homeless People in Dublin**, 1998, *Homeless Initiative*, Dublin
- Housing Act**, 1988, *Stationery Office*, Dublin
- Housing, Miscellaneous Provisions Act**, 1997, *Stationery Office*, Dublin
- In from the Cold, The Government's Strategy on Homelessness**, 1999, *Department of Environment, Transport and the Regions, UK*
- In from the Cold: Proposals for the Provision of Accommodation for Homeless Street Drinkers in Dublin City**, 2000, Costello, L, *Homeless Initiative*, Dublin
- Making it Last**, 1999, Dane, K, *Housing Services Agency*, London
- National Evaluation of the Supported Accommodation and Assistance Program (SAAP III)**, 1998, National Evaluation Team, *University of Queensland*, Australia
- Options and Opportunities, Funding Regimes and the Successful Governance of Homeless Service Provision**, 1999, Downey, D, *Homeless Initiative*, Dublin
- Out on Their Own, Young People Leaving Care in Ireland**, 2000, Kelleher, P, Kelleher, C, and Corbet, M, *Focus Ireland and Oak Tree*, Dublin
- Outreach and Resettlement Work with People Sleeping Rough**, 1995, *Department of the Environment*, UK
- Plan for Social Housing**, 1991, *Department of the Environment*, Dublin
- Prevention is Better than Cure**, 1999, Randall, G, Browne, S, *Crisis*, London
- Priority: Home! The Federal Plan to Break the Cycle of Homelessness**, 1994, *US Department of Housing and Urban Development*
- Proposals of the Homeless Initiative Working Group on Developing a Coordinated Service**, 1999, *Homeless Initiative*, Dublin
- Putting People First — A Good Practice Handbook for Homeless Service**, 1999, *Homeless Initiative*, Dublin
- Report of the Forum on Youth Homelessness**, 2000, *Northern Area Health Board*, Dublin
- Report of the Task Force on Violence Against Women**, 1997, Office of the Tanaiste, *Stationery Office*, Dublin
- Report on Street Count**, 1998, *Dublin Simon with Focus Ireland and Dublin Corporation*, Dublin

- Report on Street Count**, 2000, *Dublin Simon with Focus Ireland and Dublin Corporation*
Dublin
- Rough Sleeping A Review of the Research**, 1998, Randall, G, *Department of the Environment Transport and the Regions* UK
- Rough Sleepers Initiative: The Next Challenge**, 1996, *Departments of Health, Environment, Social Security, Education and Employment and the Home Office*, UK
- Rough Sleeping — Report by the Social Exclusion Unit**, 1998, *Social Exclusion Unit*
Cabinet Office, UK
- Settlement Services in Europe: Lessons for Ireland**, 1998, Harvey, B, *Homeless Initiative*, Dublin
- Settling in the City**, 1988, Kelleher, P, *Focus Ireland*, Dublin
- Shaping a Healthier Future**, 1994, *Department of Health*, Dublin
- Single Homeless People**, 1993, Anderson I, Kemp, P.A., Quilgars, D., *London, HMSO*
- Social Housing: The Way Ahead**, 1995, *Department of the Environment*, Dublin
- South Dublin County Integrated Plan on Homelessness: Proposals of the Local Area Working Group**, *Homeless Initiative*, Dublin
- Submission to the Cross Department Team on Homelessness**, 1999, *Homeless Initiative*, Dublin
- Tackling Homelessness in Tallaght**, 1999, O’Gorman, A, *Tallaght Homeless Advice Unit*
Dublin
- The Continuum of Care: A Report on the New Federal Policy to Address Homelessness**, 1996, Bernard-Columbia Center for Urban Policy, Columbia University, *US Department of Housing and Urban Development*
- The Family Background of Homeless Young People**, 1998, Smith, J, Gilford, S, O’Sullivan, A, *Family Policy Studies Centre*, London
- The Health of Hostel Dwelling Men in Dublin**, 2000, Feeney et al, *Royal College of Surgeons and the Eastern Health Board*, Dublin
- The Homeless Mentally Ill Initiative: An Evaluation of Four Clinical Teams**, 1995, *Department of Health and Mental Health Foundation*, London
- The Move in Experience, Research into Good Practice in Resettlement of Homeless People**, 1994, Randall G and Brown S, *Crisis*, London
- The Settlement Experience: A Report of Research into Settlement Services and Service Users in Dublin**, 2000, Nexus Research, *Homeless Initiative*, Dublin
- Under One Roof? A Report on the Future Options for the Organisation of Homeless Services in Dublin**, 1998, Lennon, L, *Homeless Initiative*, Dublin
- We Don’t Choose to be Homeless**, 1996, Evans, A. 1996, Report of the National Enquiry into Preventing Youth Homelessness, CHAR, London
- Working Towards Inclusion: A Feasibility Study on the Provision of Accommodation for People Sleeping Rough and Using Drugs in Dublin City**, 2001, Costello, L, Howley, D, *Dublin Simon and Merchants Quay Ireland*, Dublin



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