

A Review of Homelessness and
Homelessness Services in East Dorset

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Executive Summary

The local authority's preventative approach to homelessness should focus upon three main areas:

- The ending of an Assured Shorthold Tenancy (AST);
- Homelessness as a result of parents unwilling or no longer able to accommodate;
- Non-violent breakdown of adult relationships.

The strategy should also include developing:

- Affordable private rented accommodation;
- A greater range of accommodation for specialist groups of people, including:
 - Move-on accommodation for young people living in supported housing projects;
 - Accessible accommodation for those with mobility problems/wheelchair users;
 - Provision for single men;
 - Appropriate accommodation for young offenders;
 - Explore the need for further work on Living Over the Shop and Empty Property Projects.

Further work should:

- Explore the need for further tenancy support workers in the private rented sector;
- Explore the need to expand the landlord accreditation scheme;
- Explore the viability of not clawing back monies owed via the rent deposit/rent in advance schemes;
- Explore the need to undertake a review of Housing Benefit, paying particular attention to:
 - The nature of the information that landlords and tenants receive regarding Housing Benefit;
 - Undertaking further research into whether current levels of Housing Benefit cause debt and contribute to homelessness;
 - Trying to ensure that Housing Benefit payments coincide with rental periods;
 - Ensuring that Housing Benefit is paid promptly;
 - Ensuring that the use of Interim Awards becomes standard practice;
 - Ensuring that changes in circumstances are dealt with speedily.

INTRODUCTION

This report reviews the nature and extent of homelessness in East Dorset. In particular it focuses on:

- Existing levels of homelessness;
- The causes of homelessness within the local authority area;
- Current service provision for homeless people/households;
- Identifying gaps in the provision of current services.

Reflecting the local authority's desire to develop a more pro-active and preventative approach to addressing housing need, this report identifies a number of strategies that it may wish to adopt in ensuring that this particular aspect of housing need is tackled effectively, with targeted resources aimed at preventing and addressing homelessness issues.

In order to gain a snapshot of the nature of the homelessness problem in East Dorset, this report draws on a number of different sources of information. These resources include publications and statistics from:

- The Office of the Deputy Prime Minister;
- The Department of Transport, Local Government and the Regions (DTLR);
- East Dorset District Council (EDDC) publications and statistics (including Housing Investment Programme (HIP) submissions and P1E returns);
- Dorset County Council (including Dorset Social Services and Dorset Youth and Community Service);
- Information from a range of social housing providers, and voluntary agencies providing advice and support within the local authority's area.

HOMELESSNESS

National and Regional Picture

Any attempt to gauge the nature and size of the homelessness population, whether at a local, regional or national level, remains problematic. The following two factors will always come into play.

A problem with data

This issue can be summarised in one short sentence: '*We do not know the size of the homeless population*'. In part, this problem is exacerbated by the variety of different organisations involved in meeting the needs of the homeless (central and local government, social housing providers, voluntary agencies), their competing agendas, and the particular groups of homeless people they serve (such as families, single people and young single people).

This, in conjunction with varying methods of monitoring and data collection, means that statistics appearing at a local, regional or national level are not co-terminous. Consequently, some homeless people will appear in two or more agencies' data, whilst others may be ignored. At the same time, data that is collected on '*households*' may fail to identify and recognise the actual number of individuals present within a particular 'family'.

A problem with definitions

As the term '*household*' demonstrates, definitions pose a stumbling block in calculating the number of people who are homeless.

At a fundamental level the problem with definitions can be summarised as reflecting the *rooflessness versus temporary accommodation* debate. The issue becomes confusing when we consider the different definitions used to define temporary accommodation, and how certain forms of temporary accommodation may leave the occupier at a greater risk of becoming homeless than others.

Amongst this general level of confusion, the most reliable indicator which acts to highlight general trends in homelessness is the information provided by local authorities through their HIP returns and P1Es. Every local authority is required to provide a range of common statistical information, amongst which is data related to the number of households seeking support under the homelessness provisions of the Housing Acts 1985 and 1996.

However, while all the data collected by local authorities are consistent and reliable, they cannot be interpreted as recording an accurate level of homelessness. Given that local authority responsibilities towards different categories of homeless people vary, those who are either intentionally homeless or not in priority need may self-select and fail to seek advice and support from the local authority concerned.

The most reliable indicator of the levels of homelessness, therefore, concerns those who are unintentionally homeless and in priority need. Table 1 (below) highlights that between 1997/8 and 2000/1 the number of households that fell into these two categories in England grew by 11% from 102,650 to 114,350.

Table 1: Statutory Homelessness by Region.

Region	Unintentionally homeless and in priority need during 1997/8	Unintentionally homeless and in priority need during 2000/1	% Change	Number per 1,000 households in 2000/1
North East	4,380	5,220	19%	4.8
North West	13,060	13,350	2%	4.7
Yorks & Humber	9,130	9,150	0%	4.3
East Midlands	7,550	7,370	-2%	4.3
West Midlands	14,670	13,860	-6%	6.4
East of England	8,120	9,800	21%	4.3
London	24,570	29,630	21%	9.5
South East	12,170	14,760	21%	4.4
South West	9,000	11,210	25%	5.4
Total	102,650	114,350	11%	5.5

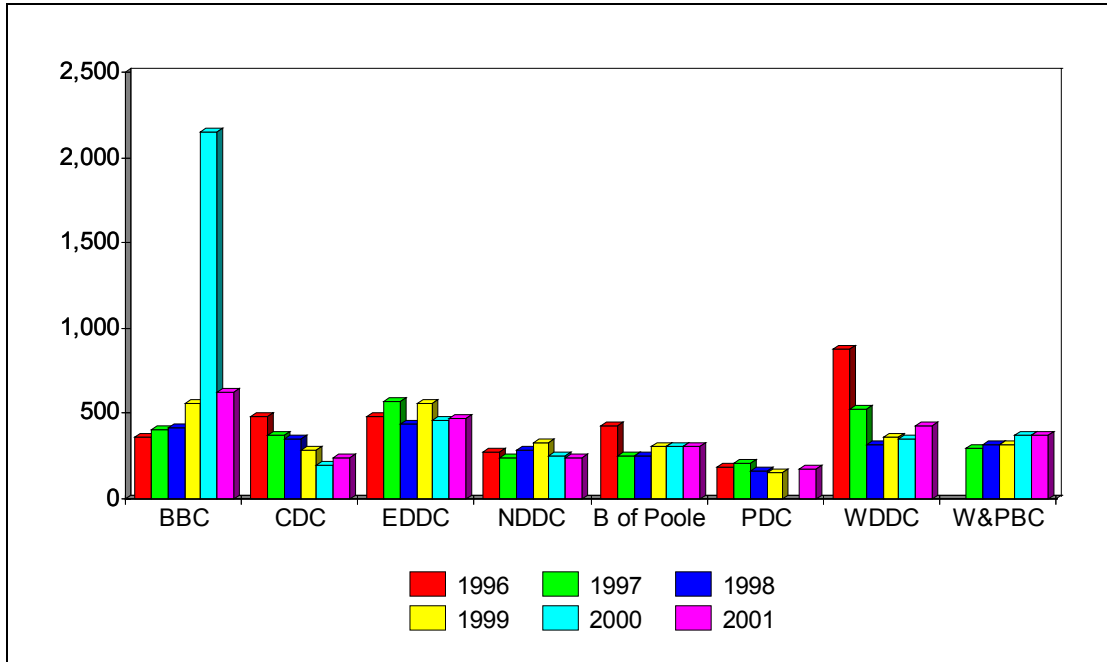
Source: DTLR (2002a).

As this table demonstrates, this increase in numbers was not experienced consistently across England. The East Midlands region, for example, witnessed a reduction in the number of households accepted as homeless, while the figures for Yorkshire and Humberside remained static. The remaining regions experienced an increase ranging from 2% to 25%. It is significant that the South West region experienced the highest growth in homelessness acceptances during this four-year period.

Homelessness in East Dorset & Wider County

The homelessness situation within Dorset reflects the position across the whole of England. Indeed, as Figure 1 (below) demonstrates, the number of homelessness applications across the local authority areas within the county vary.

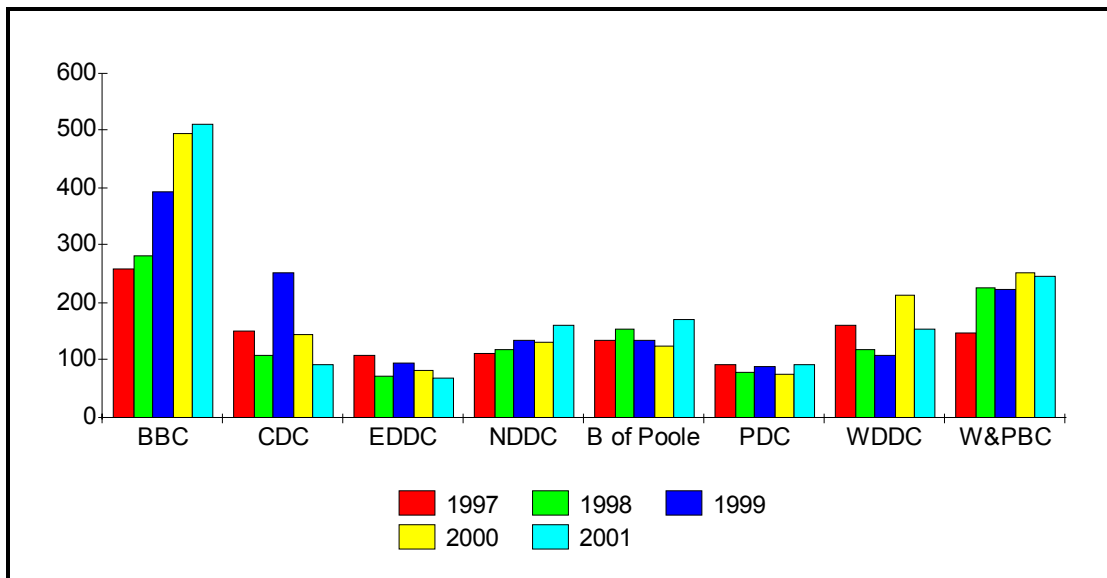
Figure 1. Number of Homelessness Applications in Dorset: 1996-2001.



Source: Dobson (2002). **Key:** (see below).

It is interesting to note that, while there has been some variation in the number of applications, the total figure in 1996/97 compares well with that in 2001/02. Despite the comparability in the level of applications between 1996/97 and 2001/02, Figure 2 (below) highlights that the number of acceptances by East Dorset District Council has gradually declined since 1997. At the same time, the data relating to other local authorities within the county have remained fairly static (Purbeck) or declined (as with West Dorset between 2000 and 2001). It is difficult to identify the reasons for this variation.

Figure 2. Number of Homelessness Acceptances in Dorset: 1997-2001.



Source: Dobson (2002).

Key: BBC = Bournemouth Borough Council; CDC = Christchurch District Council; EDDC = East Dorset District Council; NDDC = North Dorset District Council; BoP = Borough of Poole; PDC = Purbeck District Council; WDDC = West Dorset District Council; W&PBC = Weymouth & Portland Borough Council.

When we consider the number of acceptances per 1000 households, an increasingly common approach to measuring homelessness, Table 2 demonstrates that East Dorset has one of the lowest rates of acceptances in Dorset.

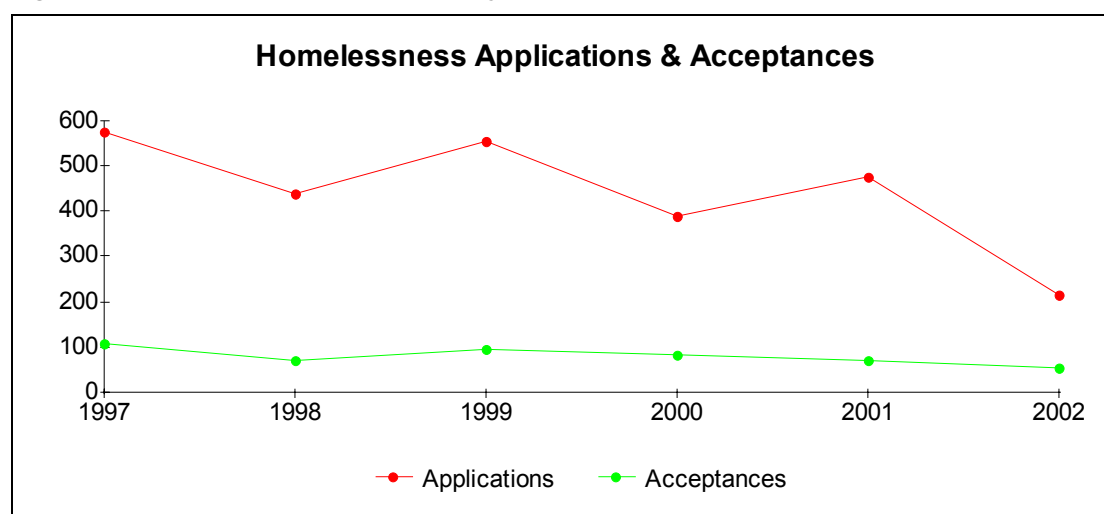
Table 2. Homelessness Acceptances per 1000 Households in Dorset.

	Acceptances per 1,000 households: 3rd Quarter 2002/03	Acceptances per 1,000 households: 4th Quarter 2002/03
England	1.6	1.5
Bournemouth	4.0	3.8
Christchurch	1.8	0.3
East Dorset	0.3	0.4
North Dorset	1.9	1.6
Poole	0.8	0.8
Purbeck	0.7	0.8
West Dorset	0.6	0.7
Weymouth & Portland	2.5	2.1

Source: Office of the Deputy Prime Minister (2003).

Another way of considering the trends in homelessness in the district is to consider the ratio of acceptances per application. Figure 3 (below) highlights that the ratio of acceptances to applications has varied significantly in the past few years. In 1996/97, for example, 18.8% of applications became translated into acceptances. This declined to 16.2% in the following year, while in 1999/2000 the figure rose to 21.1%. The most recent figures suggest that a quarter of those who apply for assistance are eventually accepted as being in priority need and unintentionally homeless.

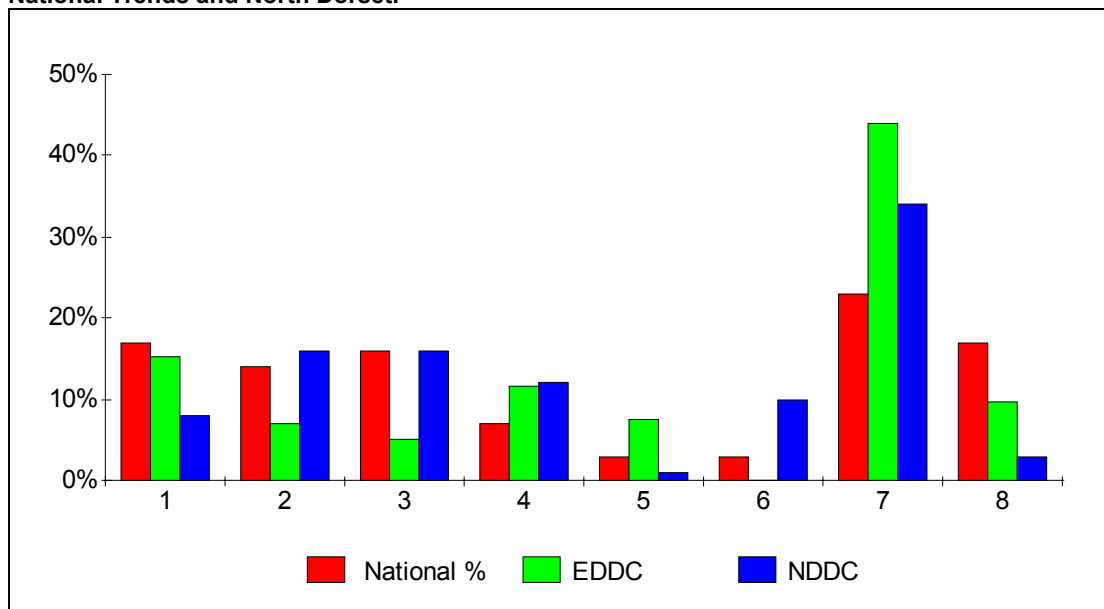
Figure 3. Applications and Acceptances by EDDC: 1996-2002.



Source: EDDC P1E returns 1997-2002.

It is difficult to come to a conclusion as to why there is this level of variation in the figures. It is possible, however, that some of the variation is a result of the pressures that operate within the service that processes homelessness applications. At times of high demand and staff sickness and holidays, for example, rates of acceptances are likely to increase.

Figure 4. A Comparison between the Causes of Homelessness in East Dorset, with English National Trends and North Dorset.



Data relates to EDDC aggregated P1E figures from 1999/2000-Sept 2002.

Key: 1 = Parents no longer willing or able to accommodate; 2 = Friends no longer willing or able to accommodate; 3 = Violent breakdown of a relationship; 4 = Non-violent breakdown of a relationship; 5 = Mortgage arrears; 6 = Rent arrears; 7 = End of Assured Shorthold Tenancy; 8 = Other reasons.

Figure 4 (above) suggests that homelessness in East Dorset is due to local issues that bear little resemblance to national trends. Indeed, in many instances the data produced does not compare with the trends of a neighbouring authority. In part, as the discussion below will note, this is a reflection of the housing tenure patterns in the district.

The table suggests that, if the local authority is to adopt a more preventative approach to responding to homelessness and housing need, it should concentrate on three major areas. These three areas concern:

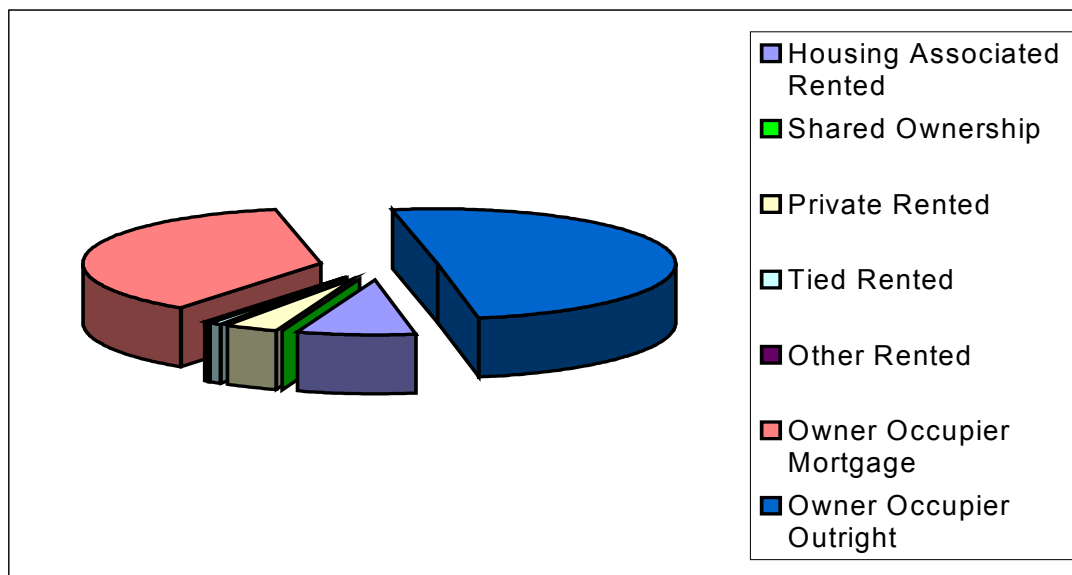
- Ending of an Assured Shorthold Tenancy;
- Homelessness as a result of parents unwilling or no longer able to accommodate;
- Non-violent breakdown of adult relationships.

These three areas accounted for over 70% of the acceptances in the county between April 1999 and September 2002. Recommendations concerning the nature of the work that should be undertaken are listed below.

In addition to concentrating on these three particular areas, Figure 4 also highlights that the number of households that become homeless as a consequence of mortgage arrears are significantly high. Indeed, the figures for East Dorset are more than twice the national average, and three times the rate in North Dorset. Again, this is likely to be a consequence of the distinct housing profile in the area, which is considered below.

Housing Tenure in East Dorset

Figure 5. Housing Tenure in East Dorset.



Source: David Couttie & Associates (2002a).

Figure 5 (above) notes that East Dorset's housing tenure is particularly skewed towards owner occupation. Indeed, Figure 5 demonstrates that over half the property in the district is owned outright without a mortgage. This is likely to indicate a large number of retired people living in the district, while it may also provide evidence of the high income levels that occur within the area. When we consider Table 3, it is clear that the mean income in East Dorset is the highest within the old shire county. In 1999, the mean income in East Dorset was over £4,000 higher than the mean income in Weymouth & Portland. It is likely that many of those resident within East Dorset have employment in Bournemouth, Southampton and beyond.

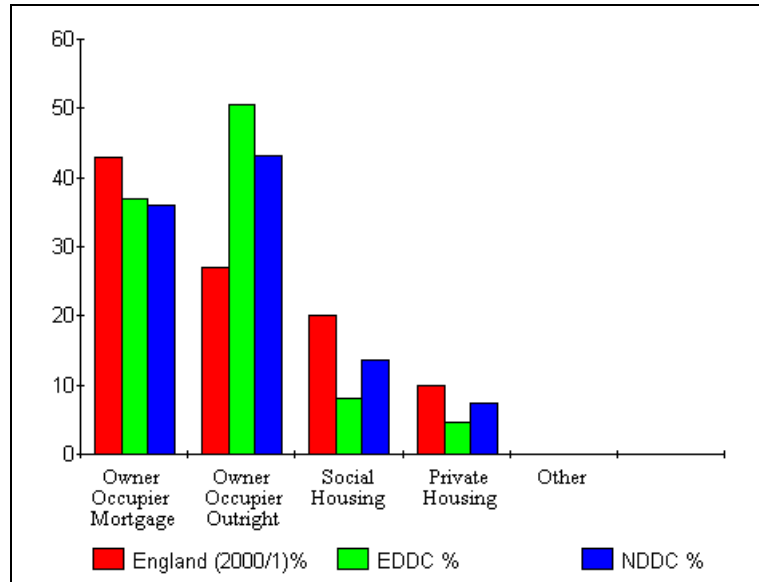
Table 3. Mean Incomes in 'Old' Dorset Local Authorities: 1999.

Local Authority Districts	Mean Income	National Ranking
East Dorset	£22,600	144
North Dorset	£20,800	230
Purbeck	£20,300	256
Christchurch	£19,600	304
West Dorset	£19,500	309
Weymouth & Portland	£18,500	372

Source: Dorset Data Online (2002).

Returning to the subject of the housing profile in East Dorset, Figure 6 compares that which exists in East Dorset with the national picture and with the neighbouring district of North Dorset.

Figure 6. A Comparison between Housing Tenure in England, East Dorset and North Dorset.



Source: DTLR (2002b), David Couttie & Associates (2002a, 2002b).

Figure 6 (above) demonstrates that, while there are far fewer people buying their own homes in East Dorset, the number of households living in property that has been bought outright is nearly twice the national average. This ‘capital rich – income rich’ population are likely to be able to address their current and future housing needs.

Figure 6 also highlights that the district has less than half the national average level of property in the social housing sector and half the national average of properties in the private rented sector. This suggests that those in housing need will be competing for a small number of properties. As such, many are unlikely to have their needs met locally, and might migrate to Bournemouth, Poole or even North Dorset.

If the level of privately rented properties is lower than expected, Table 4 (below) highlights that this sector also lacks many basic facilities that are taken for granted in the owner occupied and social housing sectors.

Table 4. Access to Basic Facilities by Housing Tenure.

Heating/insulation facilities	All tenures %	Owner occupied with mortgage	Owner occupied no mortgage	Private rented	HA rented	Shared ownership*
HWTI	83.0	82.6	85.6	73.8	72.6	88.2
CH-F	89.8	93.7	92.0	61.0	73.2	69.1
CH-P	6.0	3.9	5.3	12.1	16.8	10.3
LI	82.0	87.4	84.9	42.5	58.1	89.7
DG-F	73.2	73.6	76.9	39.7	67.8	35.7
DG-P	13.7	15.5	12.8	13.9	9.9	43.7
WPI	63.4	65.9	68.7	31.6	34.6	39.4
CWI	44.4	46.0	47.8	5.6	36.6	35.2

Source: David Couttie & Associates (2002a). * Low volume of data

Key: Heating/Insulation facilities: HWTI = Hot water tank insulated; CH-F = Central heating, full; CH-P = Central heating, partial; LI = loft insulation; DG-F = double glazing, full; DG-P = Double glazing, partial; WPI = Water pipe insulation; CWI = Cavity wall insulation.

Table 5 (below) highlights that privately rented accommodation is more likely to be less energy efficient. Indeed, half the properties in the rented sector require improved heating, while over a third of the properties require either damp proofing or insulation.

Table 5. Work required on Property by Tenure.

Work required	Owner occupied with mortgage	Owner occupied no mortgage	Private rented	HA rented	Shared ownership*
Additional security	42.7	32.8	31.5	25.8	35.0
Improved heating	24.5	15.1	50.5	40.2	49.5
Re-wiring	15.6	16.9	28.1	15.3	49.5
Damp proofing	6.5	5.1	36.9	22.1	0.0
Roof repairs	16.2	19.5	17.2	9.4	14.5
Window repairs	38.1	30.5	47.6	35.8	75.9
Insulation	25.3	22.3	36.7	21.8	9.6

Source: David Couttie & Associates (2002a). * Low volume of data

One of the clearer pictures that emerges from this data concerns the fact that the scarcity of property in the private rented sector is compounded by the poor standards that exist within those properties. An inevitable issue arises as to whether the private rented sector is part of the homelessness problem rather than a contribution to the solution.

Clearly, when considering preventative strategies, the local authority has a double challenge: increase the number of properties and improve the standard of accommodation available.

Services and Organisations Working with the Homeless in East Dorset

In order to capture a picture of the range of services provided to homeless people within the district, and to gather a wider assessment of the causes of homelessness, a questionnaire was distributed to all agencies working with this client group. Unfortunately only a few of those agencies completed the questionnaires and returned them for analysis.

East Dorset Housing Association (EDHA)

The services provided by East Dorset Housing Association are:

- The processing of homeless applications up to and including decision-making;
- Advice to individuals;
- Management of four homeless hostels;
- Operation of a rent deposit scheme.

The work is funded under contract to East Dorset District Council and is subject to Best Value. It is re-tendered on a quinquennial basis.

The number of homeless people seen by EDHA during the past three years has fluctuated:

- 2000: 483
- 2001: 364
- 2002: 401

The major reasons for their homelessness have been:

- Loss of private sector tenancy;
- Parents/friends no longer able to accommodate them.

Recently, the reasons for homeless families have been more complex. There is an increase in the number of households experiencing serial homelessness. The Association supports tenants by ensuring that they are registered on the waiting list, and by offering a rent deposit scheme for those in the private sector.

EDHA's relationship with agencies such as Social Services, who deal with vulnerable young people and Housing Benefit, could be better.

Health

South East Dorset Primary Care Trust

It is widely acknowledged that homeless people (and particularly those sleeping rough) have more significant health needs than the general population (Crisis 2002). It has also been shown that a significant number of homeless people suffer multiple health needs that include drug and alcohol dependency problems and underlying physical health problems (Bevan and Van Doom, 2002). In addition, it must not be assumed that homeless people will necessarily access primary care services in the same way that others might. One survey found that the homeless people interviewed were almost 40 times more likely not to be registered with a GP than the average person (Wilson, 2002). Those interviewed were also nearly three times more likely than the general population not to have seen a GP in the last year.

Homeless people often access primary care services through signing up with a GP practice as a 'temporary resident', as their care is often deemed 'immediately necessary'. This apparently common practice runs contrary to the advice of The Royal College of General Practitioners which states that, wherever possible, homeless persons should be registered permanently (Statement on Homelessness and Primary Care, 2002). It has been suggested that while 'temporary' status may bring a reasonable level of one-off service, a person needing care for a longer-term, chronic condition will have problems in accessing ongoing care in the normal way. It is also extremely unlikely that patient notes will be passed on from any previous surgery, affecting the continuity of care. Clearly, by definition the nature of homelessness means that people are very mobile, so patient notes will always need to be passed on more regularly than those of other people. This process may become easier with the introduction of electronic patient records.

There would seem to be a number of reasons for continuing to register homeless people as temporary residents, and at least two of these should be recognised as significant factors when considering policies affecting services. First, for GPs, who are independent contractors of healthcare, there are greater financial incentives attached to signing up patients as 'temporary residents'. Second, temporary residents can be 'de-registered' within eight days without any reason being required. This offers a safety net to GPs who may find it difficult to deal with homeless people. Potential difficulties may include anti-social behaviour (there are higher rates of drug and alcohol dependency problems amongst the homeless), but perhaps more importantly there may be difficulties in responding to complex health needs that cannot be dealt with independently of the individual's social needs.

Beyond the issue of registration there are particular problems with accessing appointments. Many practices work largely on an appointment only basis, which is likely to be off-putting to homeless people, so a policy of immediate access for the homeless is encouraged. A more complicated problem is that of appointments for secondary care services that rely on postal communication, which is of course difficult for homeless people.

The perception, from talking to local health services providers, is that most people who are street homeless tend to go into Bournemouth. There is, however, no clear understanding of how homeless people access healthcare services generally across the South East Dorset PCT area. Local observations suggest that the situation is unlikely to be very different from the picture nationally, in that homeless people can often only sign up as 'temporary residents' in primary care, and that they are likely to use A&E departments and minor injury units when accessing GP services becomes problematic (Wilson, 2002). These 'walk-in' services have traditionally provided invaluable care to homeless people, but it can be argued that they are not necessarily best placed to deal with the complex and multifaceted health needs that homeless people present. It is worth mentioning that analysis has shown that the use of A&E by the homeless can be up to three times more expensive than a GP appointment (North et al. 1996).

Dorset Healthcare NHS Trust

Dorset Healthcare NHS Trust provides mental health services to South East Dorset. Nationally, at least one in five homeless people suffer from a severe mental health problem (Crisis, 1999), and homeless people are eight times more likely to suffer from mental ill health than the general population (Centre for Housing Policy, 1994).

The Community Mental Health Teams (CMHTs) that serve South East Dorset actively work to prevent homelessness by supporting those who are at risk of losing their accommodation. Mental health problems appear to decrease the person's ability to maintain their accommodation, so intervention and support prior to eviction is of critical importance.

Annually, there are very few assessments made (no more than six) of people who are already homeless. CMHTs tend to work more with people who have experienced homelessness previously, often in Bournemouth, and have now moved back into South East Dorset. If overnight accommodation for those who are street homeless was ever to be developed in South East Dorset, the Trust expects that numbers would increase and that services would alter accordingly.

The Trust has recently worked with Signpost Housing to develop a four-bedded unit of accommodation at Sandford. This move-on accommodation helps prevent 'bed blocking' on entering and exiting the mental health system, giving service users much needed breathing space in order for them to find suitable accommodation in the community. The project has only been running for three months and so far has been operating at maximum capacity. The Trust is continuing to assess the level of need and may attempt to develop a unit with three further beds in the Christchurch area if necessary.

Recommendations relating to health

All healthcare services have to work hard to ensure that the health needs of homeless people are adequately met. It has shown that primary care services, if unchecked, are particularly liable to precipitate the inverse care law (Tudor-Hart, 1971) in serving people who are homeless. The law states that the availability of medical care tends to vary inversely with the need for it in the population served. This is undesirable not only from the perspective of homeless people; it is also incompatible with the Government's public health drive to redress health inequalities. Despite there being no direct reference to homelessness in the Department of Health's 'Priorities and Planning Framework', considering many other objectives within that document, it would appear to be critical that the needs of the homeless population are recognised in PCT Local Development Plans.

Access into primary care is clearly a major issue for homeless people. South East Dorset PCT could start to address this by developing a policy of inclusion which recommends that homeless people are registered with GPs as permanent residents. Administratively, this is done through using the address of the GP practice as the person's home address. Financial incentives to encourage the registration of homeless people may also be needed.

Elsewhere across the UK specialist services have been developed to meet the needs of homeless people. There is some disagreement as to whether the development of such services has a positive effect on influencing mainstream services to become more inclusive of the homeless, or whether mainstream services feel 'let off the hook' in terms of their response. This poses the question: if mainstream services are sensitive to the needs of homeless people, is there a need for specialist services? Other homeless reviews have come up with what would seem to be a pragmatic solution in suggesting the employment of a detached worker (probably most realistic would be a health visitor), dedicated to working with people who are homeless. This raises several issues, least of all how the worker would effectively access and serve homeless

people, but what is clear is that they would need to be able to link effectively with all GP practices, facilitating access to the full range of services, and be part of a wider strategy to improve accessibility for homeless people. The level of need and geographical spread of South East Dorset may not justify, or even inhibit, this type of approach, but in the light of health inequalities and the current drive to improve access, it is certainly worth discussion.

All GP services need to be equipped with knowledge and resources to ensure that they are able to meet the often complex health needs of homeless people. This could include the provision of training to Primary Care Teams on homelessness and the needs of homeless people. It is likely that homeless people will also be in contact with other service providers, so a co-ordinated provision of healthcare should be sought that involves working closely with other agencies.

Walk-in providers of healthcare such as A&E departments (in this case in neighbouring Poole and Bournemouth) and minor injury units should actively seek to link homeless people into primary care. Ideally they could be armed with a local services pack for homeless people.

Primary Care Trusts are potentially well positioned to help with mapping incidences of homelessness. This is due to their advanced and constantly updated IT data collection systems. At the moment there may be some difficulty in interrogating databases to identify the homeless due to the registration issues already mentioned. This problem would undoubtedly be solved by registering homeless people as 'permanent residents', as described above.

Local services

Dorset County Council (DCC)

DCC refers homeless individuals to services such as East Dorset Housing Association (EDHA). Dorset County Council Social Services may become involved if the local authority makes a referral to the local office of Social Services where other issues have been identified, e.g. mental ill health, vulnerable young people, drug/alcohol problem, learning disability.

In order to assist in securing and maintaining accommodation, Social Services is involved in the following ways:

Adult Services

Those who present to Social Services as homeless will be referred to EDHA, or be given information to contact SHELTER, or be given the

phone number of the local hostels (according to EDDC there are four), or finally, will be advised to speak to the CAB at Wimborne.

Children's Service

Referrals are made to EDHA if a family is at risk of eviction, or to Youth Advice Services, Doors Information and Advice Centre, the Planet, Quay Foyer, or Connexions, if they are young people.

More funding is needed to provide more/better-supported accommodation, to widen the range of supported accommodation, and enable the District Council to fund more general needs and move-on accommodation.

Social Services has good relationships with the partner agencies but in the case of EDHA it is dependent on which officer is dealing with the issue. Frequent frustration occurs when neither agency seems able to assist the homeless person, or where each agency has high expectations of the others. In Purbeck, a social worker is on a working liaison group for Children's Service issues as the Social Services team in Ferndown have to cover Purbeck as well as East Dorset. This has been very beneficial. EDHA are happy to participate in case conferences where family issues arise.

Social Services Physical Disability Services Team

This part of Social Services provides specialist accommodation when there is no other alternative. The applicants are means tested. The Team supports applications to registered social landlords (RSLs) in relation to needs/disability.

The Team has a constructive relationship with partner organisations that are involved in responding to homelessness.

East Dorset Drugs and Alcohol Advisory Services (EDDAAS)

EDDAAS provides one-to-one support around addiction. It is funded through a pooled Treatment Budget from Bournemouth and Dorset Drugs Advisory Team for three years.

In the past three years, approximately 80 homeless people have been seen by the service. The major reasons for their homelessness were:

- Family breakdown;
- Drug and alcohol problems;
- Problems experienced by ex-offenders.

More recently the homeless people they have seen have been predominantly male.

To assist service users in securing/maintaining accommodation EDDAAS refers them to Bournemouth Churches Housing Association.

Youth Offending Team

The Youth Offending Team provides support for young offenders aged 14-17 in terms of sourcing social housing and acting as an advocate. To support tenants, the service will challenge local authority decisions, advocate where eviction is threatened and make referrals to secure housing using referral protocols. The service would like to help in the development of a wider range of suitable accommodation to meet the varying needs of young people who offend. It would also like to encourage the development of more move-on accommodation and assist in the development of suitable accommodation.

The service has secure funding through the Youth Justice Board and Social Services. The relationship with other agencies is generally good.

The service does not collect data on the numbers of homeless service users seen during a year, but the major reasons for their homelessness are family breakdown and poor or unsuitable accommodation.

Shelter

Shelter's Bournemouth and Taunton Housing Aid Centres both cover the East Dorset area offering general housing advice but with specialist knowledge of homeless law. Advocacy is provided for service users in dealings with local housing authorities as well as other statutory and voluntary agencies. There is a telephone advice service for local Citizens Advice Bureaux (National Homeless Advice Service) and other agencies with a housing query. Recently an outreach service based at Ferndown CAB was piloted and is currently on hold pending further research.

Shelter funds its own main advice service throughout Dorset. It is undergoing a national review of its housing services, which may have implications for future funding. The Legal Services Commission funds two outreach sessions per month in East Dorset. This funding is secure for three years, but must meet a set number of hours worth of advice and assistance as per the contract.

Homeless people seen in the last three years:

- 2001/02: 80 homeless/potentially homeless households;
- 2000/01: 63 households;
- 1999/00: 67 households.

The major reasons for their homelessness:

- Termination of Assured Shorthold Tenancies/loss of other private rented accommodation;

- Family breakdown;
- Relationship breakdown.

Shelter has seen an increase in homeless individuals/families with higher and/or more complex needs in the last few years. However, these households may have always been there and it is only recently that their needs are starting to be recognised (through national policy and, subsequently, at a local level) and addressed through the development of new as well as existing services.

Shelter's service users can access information regarding private rented accommodation and use office facilities (although no specific 'accommodation finding' service is provided).

Preventative work to help maintain accommodation includes negotiation with both private and social landlords (e.g. landlord tenant disputes), negotiation with Housing Benefit departments (e.g. to secure backdated payments and resolve problems with rent arrears), and defending possession proceedings in Court.

Shelter would like to raise awareness of its preventative work and would particularly like to be viewed by local authorities as an agency that can assist and complement their own work by providing independent advice for individuals at an earlier stage.

Shelter is hoping to see a 'roll-out' across the regions of its 'Homeless to Home' Project (a resettlement/tenancy sustainment scheme for households moving from temporary to permanent housing piloted in Bristol, Birmingham and Sheffield). This is dependent on future funding.

A varying degree of antagonism exists between Shelter Housing Advice Centres (HACs) and some local housing authorities/contracted agencies due to the nature of respective roles, specifically around challenges to homeless decisions. The Homelessness Act 2002 has provided an opportunity for Shelter to consciously build stronger and more effective relationships with local authorities through the support being offered regarding the implementation of the new legislation. Shelter is looking to further develop good relationships with other statutory agencies and maintain strong partnerships with the voluntary sector.

**Wimborne Citizens
Advice Bureau
(CAB)**

Wimborne CAB offers advice and representation to homeless people. This service is funded by local authorities, the Lottery, other Trusts and donations. The funding is not secure, and East Dorset has reduced the core grant during the last three years.

The figures for homeless clients seen during last three years:

	Female	Male
2000-2001:	49	28
2001-2002:	30	9
2002-2003:	27	26

The major reasons for their homelessness are family breakdown and personal problems.

Ringwood Citizens Advice Bureau (CAB)

Like its neighbour in Wimborne, this bureau offers both generalist and specific advice on housing issues. They often refer to Nightstop and hostels for emergency housing.

Unusually, this CAB claimed to have no statistical records on the number of homeless clients it has worked with, or data on those threatened with homelessness. It is recommended that this Bureau collects such data.

The major reasons for homelessness that the CAB has encountered are:

- Relationship breakdown;
- Debt.

Recently the CAB has come across some housing difficulties encountered by those returning or arriving from abroad. In order to assist people in maintaining tenancies, the CAB:

- Advises on options;
- Signpost or refers to specialist agencies;
- Gives money advice.

The relationship with other agencies is good. In particular they value the work of the Floating Support Worker employed by Hyde Housing Association, but consider that there is a need for other workers to undertake the work required.

The Planet (Wimborne)

The Planet is a Youth Advice and Information shop managed by Dorset Youth and Community Service and funded by the County Council. The Youth Offending Team, Connexions and a drop-in teenage health project also work in the building. The types of service provided by the Planet to young homeless people are:

- Referral and sometimes transport to EDHA and Social Services;
- Information;
- Use of phone.

In order to assist in the securing/maintenance of accommodation, the Planet will:

- Act as advocate;
- Ring up agencies on the young person's behalf;
- Find emergency accommodation. This tends to be Bed and Breakfast and comes out of their budget;
- Refer to Connexions.

The Planet sees between 14 and 15 homeless young people per year. There is a rise in the summer. Most youth homelessness is hidden as young people sleep on others' couches.

The major reasons for their homelessness are:

- Relationship breakdown;
- Issues with family;
- Drug and alcohol misuse.

In recent years the homeless young people have been younger and they are more chaotic with multiple issues. Many only want respite and could be reconciled with their families with mediation. There are also problems that result from split families where there are issues with step-parents.

The relationship with other agencies is good and they attend the East Dorset District Operational Group (Housing Forum).

Connexions Dorset North and East Division

Connexions work with young people between 13-19 years of age. The service is a national Government initiative, enabling young people to have "the best start in life". The delivery staff offers young people a universal signposting and intensive support service on the myriad of issues facing young people. Part of this work is with young people who experience homelessness. The service supports young people to gain adequate housing through developing partnerships with local and national organisations, statutory agencies and enabling young people to understand and work with the complexities of housing provision and support which exists. Part of the role of the personal advisors is to support young people to access specialist support networks in housing, i.e. Advice and Information Centres for young people.

It is a new service with on-going funding through the Connexions Service National Unit – DFES.

It is not possible to give data about homelessness at present. Connexions claims to have a sophisticated Management Information Database, which is evolving and should provide data in the future.

Bourne Housing Society	<p>The society manages 18 two and three bedroomed houses under the shared ownership scheme in East Dorset. These properties are funded and maintained by private finance. It generally sees young couples and young families. The houses are marketed through local estate agents.</p>
Waverley House	<p>Waverley House provides fully and partly supported accommodation to homeless young people aged 16-25 years. It is funded by the Supporting People Fund, Housing Benefit and residents' contributions (assessed on earning or benefit levels). Funding is secure for a year.</p> <p>About 35 homeless young people are seen per year. They are usually post care or have become estranged from their parents. In recent years Waverley House has encountered more 16-year-olds and young people with drug problems who are homeless.</p> <p>To secure accommodation, new clients are put on the common housing register and then to maintain tenancy, work is put into life skills.</p>
Dorset Residential Landowners Association (DRLA)	<p>The Association's members are housing providers; some take applicants from the local authority. Its aim is to work for quality in the private rented sector. The Association has a recognised code of practice. It encourages residents to comply with the terms of the tenancy agreement. A scheme based on gaining accredited tenancy status, which operates in Poole, is about to be extended across Dorset.</p> <p>DRLA keeps up to date on legislation that affects both landlord and tenant. It will assist new and aspiring landlords to set up in business.</p> <p>The DRLA officers represent member landlords in meetings with the local authority and at Housing Forums. Most members have a good relationship with East Dorset District Council.</p>
Dave Wells Properties	<p>Dave Wells Properties provides accommodation in 1600 letting units in 350 properties across Poole, Bournemouth and East Dorset. While accepting referrals from most organisations, the preference is for tenants without drug and alcohol issues. The reason for this is that people with these issues can be anti-social as tenants. However, it has been possible to avoid problems by housing these people in a more remote area, as they are often sober by the time they get home. Also, more detached properties can be suitable for those people still using alcohol as it is less likely to disturb others.</p> <p>The accommodation is paid for by the tenants and Housing Benefit. Many tenants use the rent deposit scheme.</p>

When a tenant is referred, they will be shown potential accommodation and given an idea of what the rules and regulations of tenancy are. Anti-social behaviour and rent non-payment is not tolerated.

Floating Support for tenants is provided at present by Bournemouth Churches Housing Association but Dave Wells also plans to provide Floating Support in the future. Currently assistance is given in filling in Housing Benefit and other forms which perplex tenants.

RECOMMENDATIONS

Recommendations Concerning a Preventative Strategy

As noted above, an analysis of the local authority's P1Es highlight a need to focus on three main areas. These concern:

- Ending of an Assured Shorthold Tenancy;
- Homelessness as a result of parents unwilling or no longer able to accommodate;
- Non-violent breakdown of adult relationships.

Ending of an Assured Shorthold Tenancy (AST)

Assured Shorthold Tenancies are likely to be brought to an end for a number of reasons. Indeed, this category is unhelpful for it simply masks a range of reasons, which may require different remedies. On the one hand the end of a tenancy may simply help the landlord to be free of a troublesome tenant, while on the other hand it may help a landlord to:

- Increase the rent;
- Free the property:
 - for sale;
 - for conversion;
 - for another rental market (i.e. holiday accommodation).

It is clear that further research is required on this area, and the local authority is recommended to request that more detailed information is collected from EDHA as a matter of course when responding to homeless applications.

A strategy that seeks to reduce the number of households becoming homeless as a consequence of the ending of an AST cannot be divorced from one that considers improving the number of properties in the private rented sector as well as increasing standards.

As such, there is a need to develop an approach which increases the number of private rented properties. In undertaking this work the local authority should consider:

- Developing a landlord accreditation scheme;
- Exploring ways in which the Buy-to-Let scheme might be better promoted;
- Establishing protocols/contracts with local landlords, which guarantee regular payments of Housing Benefit and transparency in calculations.

In order to improve the standard of accommodation the local authority might want to consider ways in which various renovation grants might be targeted to landlords, especially those who lease properties to EDHA or another RSL.

Homelessness as a result of parents unwilling or no longer able to accommodate

Leaving home is usually regarded as part of a staged move towards independent living, where young adults are able to draw on the support offered by parents and wider family members, and opportunities for returning home on a temporary basis might continue to be available.

Those young people who are made homeless through parents no longer willing or able to accommodate them are unlikely to have the ongoing support of parents and wider family members. Here independence is often sudden and many young people will lack the day-to-day skills that independence requires. In many instances the homelessness that results for young people as a result of this issue, is just one of a number of other social issues.

In pursuing a preventative strategy regarding this aspect of homelessness, the local authority should consider funding mediation programmes for parents and their teenage children. These programmes should be targeted at the most vulnerable groups, and funding should be tied to clear evidence of success.

Non-violent breakdown of adult relationships

The breakdown of adult relationships has a major impact on housing need. While the authority cannot turn back the tide of national trends, it should consider funding mediation services for couples. Indeed, it might consider working with one or more RSLs and pilot such services for a group of tenants in order to assess the success of such a strategy.

Additional Recommendations

Money Advice Services

The level of mortgage arrears in the area highlights a need to consider funding specialist money advice services. Such services might be appropriate for those in shared ownership schemes, and the authority is recommended to conduct further research in order to identify the vulnerable groups.

It must be noted that as a result of the poor standard of accommodation in the private rented sector, many tenants are likely to be paying a higher percentage of their income towards fuel costs. It is likely that these people will represent the poorest part of the local population. As a consequence many are likely to suffer fuel debt. Money Advice Services will prove useful in addressing this aspect of housing need.

The compilation and collection of consistent data on homelessness

This report has noted that it is difficult to assess the nature and level of homelessness in a given area. In part, this is a consequence of organisations not gathering reliable and consistent data. Indeed, some agencies do not collect data on the numbers of people they see, or the problems with which they present. The absence of such data raises significant questions related to quality assurance mechanisms. The local authority should consider the following:

- Developing a standard statistical form that could be used across all organisations, in order to assess, monitor and review the needs of the homeless;
- Making all funding to local homeless/housing organisations conditional on the satisfactory compilation and supply of such data sheets;
- Withdrawing funding from those services that cannot demonstrate quality assurance mechanisms in their agencies.

Recommendations regarding the availability of accommodation

In addition to the points identified above, there is a need to develop a strategy that allows for:

- Affordable social housing and private rented accommodation (this requires closer work with, and clearer information from, Housing Benefit);
- A greater range of accommodation for specialist groups of people, including:
 - Locally based move-on accommodation for young people living in supported housing projects ('silting up' of projects often leads to tenant frustration and subsequent eviction);
 - Short term, respite accommodation for young people (e.g. Nightstop);
 - It is recommended that young people are involved in the design and development of housing projects, which aim to meet their needs;
 - Accessible accommodation for those with mobility problems/wheelchair users;
 - Provision for single men;
 - Appropriate accommodation for young offenders, e.g. high support, medium support and low support projects that do not set tenants up to fail;
 - Accommodation for young people who are disabled but need to leave the family home;
- Explore the need for further work on Living Over the Shop and Empty Property Projects;
- Ensure that the provision of social housing is an aspect of all private housing developments.

Recommendations Regarding Supporting Tenants/Tenancies

- Explore the need for further tenancy support workers in the private rented sector;
- Explore the need to expand the landlord accreditation scheme;
- Explore the viability of not clawing back monies owed via the rent deposit/rent in advance schemes;
- Consider aftercare services for people with drug and alcohol problems, and those leaving prison;
- Explore the need to undertake a review of Housing Benefit, paying particular attention to:
 - The nature of the information that landlords and tenants receive regarding Housing Benefit;
 - Undertaking further research concerning whether current levels of Housing Benefit cause debt and contribute to homelessness;
 - Trying to ensure that Housing Benefit payments coincide with rental periods;
 - Ensuring that Housing Benefit is paid promptly;
 - Ensuring that the use of Interim Awards become standard practice;
 - Ensuring that changes in circumstances are dealt with speedily.

Recommendations Regarding Emergency Situations

There is a need to develop:

- A transport voucher system for young people in emergency situations;
- A network of approved Bed and Breakfast accommodation.

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