	It is proposed that the core accommodation is between 10 and 15 units and the cluster accommodation is made up of smaller units between (1- 4) attached to the core accommodation?
Q1a.	What are the positives and benefits of the proposed model for singles and childless couples?
	- Good model as it allows staged support to be provided for higher and lower support - Model needs to support a mix of support needs - Sometimes having different providers can help if the relationship between the client and provider breaks down - From a financial point of view, the cost of running an 8 unit core and a 15 unit core would not be much different. The proposed range offers existing providers flexibility if they already have properties in place. - Smaller accommodation is more positive than larger accommodation - You can see people more quickly and pick up issues more quickly, especially quieter clients, although this depends on the staff ratio - You can focus more on individual needs and monitor more effectively - Smaller accommodation is better for moving to independent living - Geography of core and cluster can increase travel time and cost to both staff and clients - Units are about right. More support in smaller units of accommodation is better for relationship building - You have issues in larger accommodation e.g. Lower Hastings Street design of building. People can get isolated in smaller units. Hard to match in shared units. Works with 2 in cluster accommodation. Dynamics of having an odd number may not always work based on experience. - Difficult to say if 10 to 15 is better. Some smaller projects provide more support. - Smaller units means less institutionalised and all support workers know all the clients so key working is always necessary. - If core is responsible for deciding who needs cluster then you can get more continuity of support and appropriate mix individual - Benefits are that it promotes independent living as you can taper support between core and cluster and cheaper - Learning to pay for utilities and budgeting skills in cluster promotes independence - Having a transition into cluster gives clients an insight into living in a community environment as opposed to a complete change which can come as a shock - There has to be an assessment of support needs not just a statutory homeless decision by SAR - Hostels don't have much control about 'move on'. If there is a cluster

		may be able to influence this. Provider can be move individual back to core if needed

- There are some benefits to having an all female accommodation
- Larger organisations get the benefit of having different choices of move on.
- Could all cores feed into other clusters? For some individuals this may be of benefit if have specific needs
- Park Lodge (average stay is 4 months) have satellite accommodation and therefore operate a core and cluster model already
- Client group dictates size of core and cluster, some smaller for different needs
- Severn Street worked well because the provider chose who is in the accommodation.
- No route out for unsupported asylum seekers who may already be in existing accommodation. Need to ensure there are no barriers to move on
- Get continuity of staffing from core to cluster
- Action homeless has a core within 28 units (which works well). Look at what works well and not the number of units
- Assumes ground zero where already have hostels in place (with planning permission).
- Make best use of existing buildings and organisations already in place and fine tune what's already available.
- Providers have dealt with cuts before so look at other ways of saving money.
- Throwing the baby out with the bathwater and can make cost savings without doing this.

	It is proposed that the core accommodation is between 10 and 15 units and the cluster accommodation is made up of smaller units between (1- 4) attached to the core accommodation?
Q1b.	What are the potential barriers?
Daksha	- Lack of referrals from the SAR will mean a loss of income for providers - There is a language barrier for asylum seekers who won't understand what a core and cluster is. - If providers are required to source accommodation there is an issue of quality and minimum standards - The lead in time for providers without accommodation can be between 3 months and 6 months and LCC need to be mindful of this. - Some providers have let clients stay permanently within a property with a single tenancy and found another property rather than move the client - There are no one bedroom flats. There are two bedroom flats available however the bedroom tax has a negative impact on clients - LCC is obsessed by local connection. - Need to know the make up of the core and cluster to identify if it is more cost effective as it could be worse depending on core and cluster set up. - Who makes the referral to the Cluster and what information goes with the client? This is important for the decision making process. - Conflict between clients and dynamics of relationships within the core and cluster need to be taken into consideration. There needs to be some autonomy to core and cluster provider over managing potential conflict. - Clients are unable to move on if suitable accommodation is not there. - There is bed blocking and backlog to move on. - If higher support required in the core then staffing levels need to be appropriate. - You can create dependency by having 24 hour staff cover. Need to have duty during the day time and building staff during the night time. - Getting the right people to share accommodation. You need the right level of staff to provide high level support and be able to provide support to the cluster - Where are the cores going to be? - Will the criteria for high level support change? Will it become lower? - The eligibility criteria are being piloted and the impact will need to be looked at. - What plans would need to be in place after 6 months to enable clients to move on? - Shared cooking/ bathroom/ lounge facilities could be a problem with managing these facilities in cluster accommodation - Housing benefit going to fund core and tenancy arrangements – if people refuse to move then may need to go to court. Easier to move

		clients if on a licence agreement.
		• If SAR has 'control' there could be issues regarding the mix of clients
		• People being moved just to manage voids e.g. if had a female only unit what do you do with vacancies?
		• People need different models based on different needs
		• Clients may see cluster as home and therefore reluctant to move on
		• Staff need to be trained more in benefits because of changes in universal credit, bedroom tax etc. therefore people need more welfare advice.
		• Proposed core and cluster could create more costs if LCC implementing as a cost saving exercise.
		• Even after a long period in cluster accommodation, tenancies can breakdown
		• Likely to have ongoing problems with move on/ independent accommodation
		• Cluster units can turn into permanent accommodation then provider can identify new cluster units – some providers already do this

	It is proposed that the core accommodation is between 10 and 15 units and the cluster accommodation is made up of smaller units between (1- 4) attached to the core accommodation?
Q1c	What are the potential solutions to address the barriers?
Daksha	- Allow providers to operate more flexibly by providers identifying how many units the SAR will have access to. - Allocate dedicated beds to LCC - There needs to be a minimum checklist of standards for accommodation used by providers and landlords. - Clarity of core an cluster models and costs for support needed by client - Availability of more single accommodation for move on - If SAR refers directly to a cluster because there is a vacancy the provider needs a say in this. - Have two bed units to ensure matching of clients works - In London – Centre Point have 9am to 9pm duty staff and then building staff overnight. - Right level of staff needed. Currently 1 staff to 15 clients in shared accommodation and this is similar in STAR in that staff have 15 client caseload. - I staff to 5 clients in core would be more ideal - Will need to be flexible to meet changing needs of clients - Use cluster as a shared house with support then pick another cluster so individuals stay. - People who move have knowledge of individuals and LCC must trust in organisations as commissioners. SAR could overstep their role during the whole process therefore must be done in consultation with providers - Get service users on board (with move on) which would be seen as positive if they can see it works. - In clusters individuals could be given responsibility for communal areas e.g. cleaning and could be given a discount on their rent although this arrangement could create its own set of problems

	The proposed length of stay is between 2 weeks and 6 months, with an average length of stay of 4 months.
Q2a.	What are the positives and benefits about the proposed length of stay?
	- Up to 2 years is too long. If the client requires intensity of support then other agencies should be involved. - Have to work quickly with clients - If someone is ready to move on because they have the practical skills and they are first time homeless they can be moved on quickly - Positive for clients if done in the right way - Clients are not as entrenched as they used to be - Why are we stating the length has to be between 2 weeks and 6 months? Just say average length of stay is 4 months - Leicester Holmes average is already 4 months - Can see the benefit of the timescale as it gives providers a focus to achieve the outcome of independent living. However this is an arbitrary figure

	The proposed length of stay is between 2 weeks and 6 months, with an average length of stay of 4 months.
Q2b.	What are the potential barriers?
Daksha	- There is a waiting list for move on accommodation. - It can take about 7 months before the client is seen by the social worker - Need to build trust with the client which can take a long time - Need to have other agencies on board to support client needs - Will providers be penalised if clients stay longer than 6 months. - A client with a drug and alcohol problem can take longer to stabilise. - There is no move on accommodation and therefore nowhere for tenants to go. - Landlords don't want to take on clients who are on benefits. - Serving notice on clients to make them move is not appropriate as they may not be ready to move and this will set them up to fail. 2 weeks to 6 months is an unrealistic timescale as not everyone will be ready to change. - When is the length of stay determined? e.g. start or mid-way? - Assessing needs takes time e.g. benefits. - Some people may not need to go into core and cluster model but elsewhere. - People fail if they are rushed- increases risks, repeat homelessness and suicides and therefore important to get timescales for move on correct as possible. - Where do they go after 6 months as there is limited move on. - If targets and penalties are attached it will stop effectiveness - Can't provide anything in 2 weeks - You would need to significantly increase staff to achieve average length of stay of 4 months. - People would not get through the eligibility criteria if there situation could be resolved in 2 weeks. - Would need to get different organisations to work together to support people in less time. - Timescale not realistic, need to be flexible. - Staffing levels and rent arrears are barriers - Availability of permanent accommodation - People will keep coming back because of short length of stay - If people have substance use or mental health problems often these issues prevent them from leaving temporary accommodation. - Getting people a diagnosis can take 3 to 4 months - Skills of staff managing independent accommodation – staff may not recognise support needs and deal with client as an anti-social behaviour case if staff don't recognise underlying issues - Need to trust organisations to move people on as appropriate - Not enough move on flats - Can take months to discover someones needs - Unable to turn round clients with complex needs in a short period - Needs to be a tracking system and identified key worker who would

	be accountable for ensuring client is making progress.
	• Finding appropriate move on and being clear whether people are willing to leave (happy) legal issues/ moral issues (aim to prevent homelessness).
	• Practical issues – anti social behaviours, arson, rent arrears, drug and alcohol - entrenched issues can be barriers to client moving into settled accommodation by 6 months.
	• Crude management tool to say length of stay should be 2 weeks to 6 months
	• The length of stay is a strange performance indicator as it could interfere with other needs and won't necessarily help clients to successfully move into settled accommodation
	• If the length of time is about cost then LCC should just say so

		The proposed length of stay is between 2 weeks and 6 months, with an average length of stay of 4 months.
Q2c.		What are the potential solutions to address the barriers?

- What mechanisms do LCC want to put in place for providers to demonstrate why a client hasn't moved on.
- Provide floating support for clients leaving the cluster.
- Not to put an unrealistic timeframe on the core and cluster
- More move on opportunities
- Need to look at case studies to justify why these timeframes have been determined
- Need evidence for why the core and cluster model has been proposed.
- Higher level of staff in accommodation
- Single access route will provide consistency
- Priority given to people leaving temporary accommodation to receive floating support
- Hostel workers do some follow up with clients to support them into independent accommodation when maybe they do not need floating support
- Needs to be flexible and allow exceptions for some people as they may not be able to make it out in 4 to 6 months
- Client centred approach with planned moves and communications
- More communication from internal income management team who sometimes identify rent arrears at a later stage so better communication earlier on is required.
- Should look at referring to prevention services earlier.
- New policy on old rent arrears. Sometimes historical rent arrears are put on client's rent account when they move into temporary accommodation and this has meant people have had to stay longer because of debt.
- If they apply for Housing Benefit, the letter goes to the client and the hostel worker is not aware of benefit payment or over payment and again this delays any support that could have been provided to client to support move on.
- We need a joined up approach between agencies and department to deal with benefits. Rent arrears and debt are the main issues that prevent clients from moving on.
- Just say the average is 4 months with exceptions
- Must get assessments correct to tailor support – not to be done at one sitting in 30 minutes
- Can build an ethos in organisations about expectations of moving on clients. Core should assess clients moving into cluster
- More move on accommodation
- Need a joined up approach if length of stay is going to work with other partners and agencies
- Accommodation has to be affordable so there is an incentive to work. Potential for cluster to manage this arrangement
- Private accommodation is temporary – not a solution – cost of bond within tenancy not affordable (even if get first bond from housing

		options).
		• There is no regulation of private landlords
		• To have a variety of accommodation across the city as the majority of single people want to live nearer the city centre.

	All referrals into temporary accommodation will be made by the SAR based on the eligibility criteria?
Q3a.	What are the positives and benefits of this arrangement?
Daksha	- No one project has all the high needs client. - Being able to track clients through the system and so they don't get lost or become institutionalised - Gatekeeping helps to keep costs down and manage budgets - Client has single point of access for assessment and referral and knows where to go – consistency of information - Depends what the eligibility criteria are and who decides this? - Positive – will be more transparent. - The people who need the services will get them – fairer way of distributing scarce resources - People currently side step HOC and go direct to VCS hostels - Probation can go directly to hostels if turned down by HOC. - Separate referral forms – Probation feel their clients will be disadvantaged with the new system. - Will SAR have the final say about the referral? - Whoever is making referrals must have a good understanding of provision available for clients - Communication from SAR and provider must be accurate - If SAR controls cluster – this won't work and will be a disaster - Eligibility is different from assessing support needs - The 'entrenched' list managed by LCC is useful. If have records of client history of what has happened in the past, this is helpful (especially drug and mental health) - SAR database will be useful (numbers available) so providers can inform SAR rather than HOC ring round for vacancies. This is better for services users so that you don't have to send them away. - Service user gives the information once rather than several times

	All referrals into temporary accommodation will be made by the SAR based on the eligibility criteria?
Q3b.	What are the barriers to this not working effectively?
Daksha	- Inconsistency of advice, funny rules and interpretation of local connection - The physical environment of HOC is not good with no access to toilets - Customer care is not good - Service does not provide a reason for the decisions that are made as there is nothing in writing - There has been a sharp increase in the number of referrals to Shelter about the decisions made by HOC - Europeans don't know the law and can't speak the language - Training has been offered on homelessness to HOC - There is a Gatekeeping culture at HOC - There is a private rented scheme but no properties to offer clients - The Leicester connection for young people is an issue for young people. Need to go the special circumstances panel - People who may not meet the eligibility criteria slip through the net or already have a difficult relationship with SAR and therefore not engaging with services - Will staff be trained effectively in assessing referrals - Rent arrears are a barrier to access - What provision is there for people who don't meet the criteria? - Role of SAR and impact on clients who are already using services use services and future impact in terms of client choice. - Will clusters be specific e.g. substance misuse or generic? Will they be specific to need i.e. high need or low need - Communication issues - Floating support do not get much information about client's needs to include positives and what has changed. Risk assessments are not available to floating support services. - Access to a better IT system - Feel SAR will be less flexible – interpretation of risk information. - Will SAR do risk assessments? - More resources for completing assessments, tracking and monitoring clients, triggers to gather more information - If providers can't look at mix of clients, is the understanding that providers must take clients as they are funded by LCC. - People lie in interviews and then you find out more about there needs when they are in accommodation - If client not a statutory duty or eligible, then VCS can currently take them. Who will work with them in the future? - If parents say you can go back there is a view that HOC will send the person home and they may not be aware that there is an issue e.g. sexual abuse or other complex issues. - Massive pressure on SAR to say no if there is no availability of accommodation

		• Providers will not have any flexibility to support clients outside of the eligibility criteria e.g. asylum seekers

	All referrals into temporary accommodation will be made by the SAR based on the eligibility criteria?
Q3c.	What are the potential solutions to address the barriers?
Daksha	- Thorough assessment and referral system - Temporary accommodation will not be appropriate for all referrals and providers need to be able to say 'no' to the SAR. - Need more private sector landlords signed up to LCC scheme - Don't play the eviction game just to get clients to move on - Culture of Housing Options needs to change so that realistic options are presented and address negative attitudes. - Having specific core and clusters to address needs has it's pros and cons - Temporary support needed for people without local connection as they are at risk of rough sleeping - Roving SAR officer to liaise with core and cluster to maintain contact and continuity. - Information on clients' needs to be collected and kept with client as they move through the pathway. - Involve providers at point of referral - Need to have consistent paperwork which includes a risk assessment - SAR will need a point of contact with agencies e.g. social services, probation etc. to carry out risk assessments - SAR will need specialist officers who can assess the support needs - Skills and experience in drug and alcohol/ mental health awareness. Officers will need training/ work experiences of what other providers do - Appropriate signposting to other services - SAR to refer to core and not to the cluster in order to be effective - Bigger core maybe needed to have people ready to move into cluster and have own waiting lists for clusters to manage turnover

	For singles and childless couples, there can be other additional factors that make the clients more vulnerable e.g. mental health, drug and alcohol problems
Q4a.	Are different types of core and cluster accommodation models required to support the different factors and support needs?
Daksha	- Need 24 hour support and depending on the client group may need to double up staff - It is better to have a mix of clients - There are a handful of elderly and frail clients - It is not wise to mix a drug and alcohol client with someone who is in recovery - Some clients benefit from going to specialist places others don't and therefore need to be flexible - However need to identify the practicality of putting someone in a specific cluster. May not be best for that individual due to compatibility or risks - Issue of being stigmatised once placed in a specialist environment - Not realistic to have specialist types - Better to do it on a support needs basis - Better to have a mixture of clients - If staff only work with high support clients, staff can burn out and lose skills - Maybe some men can't be placed in mixed accommodation because of risk issues - Maybe gender specific for BME - Assessment of risks must be consistent e.g. recovering alcoholics and current alcohol users not to be mixed and risks to be assessed. Providers concerns to be noted and acknowledged - Providers and SAR need to take into consideration issues relating to mental health issues and appropriate placement - Some mixing must be based on assessment - Flexibility about having single sex accommodation - Potential problems relating to abuse e.g. financial exploitation of clients - Entrenched drinkers benefit from specialist accommodation e.g. Evesham House

	For singles and childless couples, there can be other additional factors that make the clients more vulnerable e.g. mental health, drug and alcohol problems
Q4b.	There is a limited financial budget and therefore the services provided need to be prioritised. What order of priority would you place on the services you have identified for the different categories of needs highlighted?
	- There could be lots of categories under the heading of homelessness- alcohol, drug, mental health, sensory and physical disabilities, homelessness, older, marginalised, offender/ex-offenders. LGBT (lesbian, gender, bi-sexual and transgender), teenage parents. Based on these categories need proportionate budget but depends on risks identified. Difficult to allocate funding based on these categories. - Physical health needs to be taken into consideration where other vulnerabilities are present e.g. accessibility - Categories identified – risk, Domestic violence and cultural - Can't prioritise as all are important. - Domestic violence and cultural needs could be accommodated within clusters - Clients have multiple issues. Assessment should filter out risks - Single sex units are a priority because of safeguarding issues - Effective assessments by SAR will lead to better placements and more appropriately commissioned services. - Providers should have specific outcomes. STAR has 5 specific things to measure outcomes by. - Clusters can be used as specialised units - Should be a handover between core and cluster

	For singles and childless couples, there can be other additional factors that make the clients more vulnerable e.g. mental health, drug and alcohol problems
Q4c.	What are the positives and benefits of identifying different types of service provision?
	- There are pros and cons of separating clients based on support needs - Should expect providers to deal with low, medium and high support needs - All clients have individual support needs - Infers there is choice but actually there is less choice - Must be able to set sanctions for bed space provision – client must demonstrate that they are continuing to work with the relevant services - Tatlow House currently accommodates clients with mental health issues. - Couldn't see Tatlow House model working with drug and alcohol issues in a community setting - Problem of finding right accommodation for clients with specific disorders e.g. ADHD and even within disorders needs can vary. - Availability of independent accommodation

	For singles and childless couples, there can be other additional factors that make the clients more vulnerable e.g. mental health, drug and alcohol problems	
Q4d.	What are the potential barriers?	
	- Having a degree of choice about who comes into the project - Knock on effect on performance of providers - How will SAR assess everyone to identify the support needs - How thorough and accurate will the risk assessment be? - Gatekeeping culture, lack of understanding on law for eastern Europeans and homelessness in general - How to get people to go to the SAR in the first place? - Is the HOC the right place for making referrals? - Individuals hide vulnerability issues e.g. alcohol use but can't actually manage and does not become apparent until in the core and cluster. - People are presenting as vulnerable but it is to just get a council house. - Is there a re-assessment to identify changing needs after being placed in a core and cluster? - Having in place a recording and monitoring system so we know where everyone is placed. - Defining vulnerability – how long do we continue to support when people continue to go through the 'revolving door'. - Support mechanism to identify vulnerability is partly dependent on individual taking responsibility and wanting to change - Certain support needs cannot be met by the model where people are concentrated together. - Specialist services can work for mental health issues and sex workers - With male offenders specialist provision works with male provision - Clusters could provide more specialised support - Specialised accommodation may make move more difficult and voids are higher	

	For singles and childless couples, there can be other additional factors that make the clients more vulnerable e.g. mental health, drug and alcohol problems
Q4e.	What are the potential solutions to the barriers identified?
	- Two way relationship. Not saying no because you are cherry picking but because of identified risks - Option to decline by providers once they have completed the assessment. - Need full information before referral is made. Need to assess risk if there is missing information on the assessment - Include in the contract how the relationship is going to work - Meeting with Head of Service, improve communications with staff and build relationships - Have a robust monitoring and tracking system that other providers can also access. - If not meeting sanctions in core and cluster they can be asked to leave, however could the client re-present at SAR with another vulnerability e.g. rough sleeping in order to access accommodation again - How long can a client stay in temporary accommodation when not engaging with sanctions - Wider MDT meetings for individuals with a dictated timescale to resolve ongoing issues. Must include people in the MDT who can make decisions and not just representatives from the service area - Building relationships with local communities - Models being flexible to meet individual needs - Budget does not allow for specialist provision - Bigger budget if specialist provision required with more training and more staff.

	Floating support services will be offered to singles and childless couples leaving temporary accommodation as part of their support plan to move on into settled accommodation as needed.
Q5a.	What are the positives of the floating support services currently being provided and what works well?
Daksha	- Sharp are involved with the client one month before they move on - Generic floating support services should be commissioned - Works well when people want to and do engage with the service - Floating support provides timely support - Floating support provides consistency of support. Some clients may not have had this previously. - Have to be able to provide support on a sliding scale and also increase when necessary - It is area based. Officers know what services are in the area. - Service is not specialist. Better that it is generic. Match workers to client needs - Relatively well resourced. - Essential cog in the wheel. They alert other services if client is likely to revolve - Revolving door don't have a closing date. If client re-lapses the case is not closed. - Catch 22 is a good service but keeping losing funding - Specialist provision for high risk needs should remain with Sharp - Service available for any tenure and any client group - Benefit for client in leaving an organisation and moving forward with another provider - Locality based teams know the area, shops, faith organisations and services in that locality - Office based in local areas (not just in city centre) - See real side to people when providing floating support services - Border House has multi- agency worker and transfers client file to STAR as part of the handover - Accommodation providers will need to understand other services (e.g. STAR) and what they provide

	Floating support services will be offered to singles and childless couples leaving temporary accommodation as part of their support plan to move on into settled accommodation as needed.
Q5b.	What are the potential barriers and what doesn't work well?
	- Is there an argument for the core and cluster to provide the floating support as well? - Floating support is about sustaining tenancies - If the core and cluster provide the floating support, this could be too intense for any one support worker emotionally. - What services do STAR provide? - If the client feels they didn't want floating support then this could be a problem - If you visit a client 4 times and they are not engaging, is there a limit to how many attempts a provider should make? - There are cost implications. It is expensive to provide floating support. - Floating support is not available in the evenings and weekends – a crisis can occur at any time. - Staff need strong support to deal with client issues. Need to be able to manage time with a caseload and individual issues. - How do you measure whether floating support has been successful? - Sometimes a case closes before a client's needs are met. - There should not be a deadline of two years. Some people need support all their life. - There are some cases which are complex with mental health and drug and alcohol problems - If people don't 'sell it' and just leave a leaflet, people don't know what the service is. - Link between accommodation provider and floating support - Longer handover time with floating support – go into hostels and assess needs in order to be joined up. - If have trust with workers this help with positive move on - Pre –tenancy training funding gone

	Floating support services will be offered to singles and childless couples leaving temporary accommodation as part of their support plan to move on into settled accommodation as needed.	
Q5c.	What are the potential solutions to the barriers/ concerns and issues raised?	

- Make the referral early
- There should be a drop facility in the core for service users to access as when they need to.
- Core and cluster provide floating support for continuity of care
- Manager needs to provide appropriate support to workers to ensure they are managing their caseloads
- Clients with multiple failed tenancies need to have something in place e.g. support tied into 1st 6 months of a tenancy
- Drop in centre for people to get support from their peers
- Opportunity to go back to environments they know
- Opportunity for clients to go outside the home for support rather than support coming into the home
- Floating support services should have contact with clients before they move out of temporary accommodation.
- Better hand overs
- More resources
- Having an overall picture of what is available across the city
- There should be crisis support as required/out of hours service
- A crisis service even somewhere clients can ring
- Flexibility
- Have more resources for floating support which is more cost effective
- Measures of success could be length of stay, tenancy sustainment and outcomes for service user
- There should be core monitoring of benefits claimed etc

	The concept of floating support services is not always understood outside of housing related support providers. This is an opportunity to re-name the service.
Q5c.	What are your suggestions
	- Tenancy support worker - Housing Support worker - Changing the name without people understanding it is meaningless - Tenancy support - Floating Fluffy Friends - Home support - Resettlement and Tenancy Support - Keep calling it STAR or floating support - Resettlement and Tenancy Support