HOUSING FIRST WALES ACCREDITATION

ACHREDIAD TAI YN GYNTAF CYMRU

ACCREDITATION REPORT

THE SALVATION ARMY HOUSING FIRST CARDIFF PROJECT

JULY 2021

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HOUSING FIRST NETWORK WALES

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1. INTRODUCTION

Housing First is a recovery-oriented approach to ending homelessness that centres on quickly moving people experiencing homelessness into independent and permanent housing and then providing additional support as needed. The concept has been applied most specifically with people who are sleeping rough or at least very marginally housed, and who have chronic and complex support needs. It was developed in New York in the 1990s, primarily by community psychologist Sam Tsemberis. Tsemberis found that providing housing to vulnerable clients who were living on the streets, without the kinds of preconditions usually implemented in approaches to reducing homelessness, had a hugely beneficial impact on the clients' lives.

Over the years, robust international evidence has proven how effective Housing First can be. By implementing Housing First in Wales, we have a real chance to help people who have spent years sleeping rough to access and maintain accommodation for the long term.

In order to have the greatest possible impact, it is vital that projects calling themselves Housing First, or claiming to deliver this approach, are doing so in accordance with the Housing First principles for Wales. There are, of course, many people and projects doing fantastic work across the country, which don't happen to be Housing First. But those that claim to be Housing First must adhere to the principles.

These principles were developed by the Housing First Wales Network, based on international definitions and building on work by Homeless Link in England. The Network wanted to make sure that the Housing First principles being used in Wales were appropriate for the Welsh context.

The principles are shown in a subsequent section of this report. They can also be found online in English and Welsh, with more detail about what they mean in practice, and a basic scoring system for support providers to assess their fidelity to these principles. International evidence and a substantial amount of published material clearly demonstrate that when Housing First's principles are followed, the approach is at its most effective.

In the next section, the main steps of the accreditation process are depicted visually. The methodology for the accreditation, and how the information was gathered, is also detailed.

Additional context: COVID

Since the first accreditation was awarded via this process, the COVID-19 pandemic has had a huge impact on the sector. The purpose of this report is not to list or discuss all the implications of the pandemic on homelessness and Housing First specifically. The Housing First Network, it's Sub Groups, Cymorth Cymru, and various other fora have been discussing the impact of the pandemic on homelessness in Wales, as well as implications for Housing First. Guidance outlining these discussions has already been published, and more is likely to follow.

It should be noted, however, that the tranches of funding that have been released by Welsh Government as part of its response to the virus, while welcome, have made it more important than ever that the Housing First principles are adhered to by projects calling themselves Housing First. The increased focus on housing-led approaches in Wales has meant that rapid rehousing models, as well as Housing First with its much more intensive support, need to be clearly defined.

Broadly speaking, the methodology associated with this accreditation process has not changed because of the pandemic, although some specific practices were slightly altered – interviews, for example, have been carried out using online video calling tools. Similarly, the questions asked of people and organisations did not focus disproportionately heavily on responses to the pandemic, given that the Housing First principles remain the same, and the HF Network's stance is clear. To put it simply, a project can consider its support Housing First even if it has softened delivery on a principle, as long as there is a clear plan for returning to full delivery of that principle as soon as possible, and an understanding that this softening has taken place. Abandoning a principle, even with good reason, means that the term 'Housing First' cannot be used. That said, where good practice in relation to the pandemic has been discussed, or identifiable impacts of COVID-19 on Housing First delivery listed, the material is included here.

DEVELOPING THE ACCREDITATION

As the development and delivery of Housing First projects in Wales increased, it became clear that a mechanism to ensure fidelity with the principles would be required. As such, the role of Housing First Policy and Practice Co-ordinator (hereafter referred to as 'the Co-ordinator') was funded by Welsh Government, to work within Cymorth Cymru. With the support of colleagues, and the Housing First Wales Network, the Co-ordinator developed an Assessment Framework, to evaluate a Housing First project's fidelity to the principles listed above.

This report details the findings and outcomes of this Assessment Framework being applied to the Salvation Army Cardiff Housing First project.

It should be noted that this report does not seek to evaluate the effectiveness of Housing First as a model, which has been done repeatedly over many years – nor does it seek to evaluate the 'quality' of the support delivered within the Salvation Army Cardiff Housing First project. This is for the commissioning body and funders to monitor and ensure. The view taken by the Housing First Network Wales, and the Co-ordinator, is that if a project delivers Housing First according to the principles above, it is likely to deliver support in an effective way, transforming lives in the process.

THE PROCESS

PRE STAGE	Initial conversations with provider.
STAGE ONE	Commitments agreement signed; documents sent to Co-ordinator. Interview plan agreed and carried out according to Assessment Framework.
STAGE TWO	Interim Recommendations Report shared with provider. Recommendations phase.
STAGE THREE	Final Report shared with Accreditation Panel. Final accreditation decision made.

HOUSING FIRST PRINCIPLES

1. People have a right to a home that is affordable, secure, habitable, adequate both physically and culturally, and with availability of services (as per UN International Covenant on Economic, Social and Cultural Rights). It should also be dispersed in the community and not as part of an institution.

2. Housing and support are separated.

3. The service is targeted at individuals who demonstrate a repeat pattern of disengagement with hostel accommodation and/ or, individuals accessing rough sleeping or accessing EOS (Emergency Overnight Stay) at the point when the referral is made.

4. Flexible support is provided for as long as it is needed.

5. An active engagement approach is used.

6. Individuals have choice and control.

7. A harm reduction approach to substance misuse is used.

8. The service is delivered in a psychologically-informed, trauma-informed, gender-informed way that is sensitive and aware of protected characteristics.

9. The service is based on people's strengths, goals and aspirations, and as such has an explicit commitment to a small caseload.

10. The widest range of services are involved from the outset (health, substance misuse, mental health, police), so individuals can access them if needed or wanted.

2. METHODOLOGY

This research was carried out as per the Housing First Wales Accreditation Assessment Framework, devised by the Housing First Policy and Practice Co-ordinator in partnership with the Housing First Wales Network and the Welsh Government.

POINT OF CONTACT AND EVIDENCE SOURCES

- The main point of contact at the project in Cardiff (Catherine Docherty, Housing First and Outreach Manager), agreed upon and liaised with the Co-ordinator throughout the process.
- Evidence for adherence to each principle comes from two sources:
  - Documentation provided by the Salvation Army Housing First Cardiff Team
  - Interviews carried out by the Co-ordinator and Cymorth Cymru's Research Officer

THE INTERVIEWS

- It should be noted that, due to the ongoing COVID-19 pandemic (which led to various levels of 'lockdown' across Wales during the accreditation period), these interviews were carried out using online conferencing software. In almost all cases, interviews were done via video call, to ensure that the experience of face-to-face contact was replicated as closely as possible. Two interviews were carried out over the telephone.
- Thirteen people associated with the project were interviewed, including members of the Housing First team, the team's managers, senior staff from the Welsh arm of the Salvation Army, staff from the housing associations who work with the project, local mental health and substance use experts, and clients. The Co-ordinator carried out all the interviews except those involving two clients, due to timing and logistical issues. Consent forms and privacy notes reflect the involvement of another Cymorth Cymru staff member. Cymorth Cymru's then-Policy and Communications Officer attended one interview to take notes, because consent for recording was not provided.
- Three current clients were interviewed – all were in their properties as current Housing First tenants.
- In all cases, the relevant consent forms were signed, and interviews recorded. In one case, consent wasn't received for recording, so the Policy and Communications Officer attended to take notes, with the agreement of the interviewee. It should be noted that because the project employs one specific Outreach Worker, they are in theory identifiable in this report. They have provided additional consent for this.
- Two local Probation Officers working with the Salvation Army project in Cardiff engaged in fairly brief email exchanges, to bolster evidence from the interview process.

THE DOCUMENTATION

- Documentation was requested as per the Assessment Framework, or identified by the Housing First and Outreach Manager as being of use. Additional documents were provided after the project received its Interim Recommendations Report, to evidence the response.
- In all cases, any identifying elements for specific service users were redacted from the documents prior to them being set to the Co-ordinator.
- Hard copies of documentation have been kept in a secure place, and electronic materials stored in a protected folder online. All evidence will be destroyed four months after completion of the accreditation process.

EVIDENCE TYPE, QUALITY AND SCORING

- Evidence from each type was catalogued in the Interim Recommendations Report, which has only been seen by the Co-ordinator, staff at the project, and key Cymorth Cymru staff for quality control purposes.

- Evidence sources divided into five types:
    - Internal policy documentation
    - External policy documentation
    - Practitioner interviews
    - External Interviews
    - Client interviews

- Evidence was scored as being very low, low, adequate, high or very high – in part, this scoring takes into account the variety of different evidence types (that is, the more types that are represented, the better – making a higher score more likely). Evidence scores should be read in conjunction with the associated explanatory notes. This is discussed in more detail in the next section.

- Areas of concern were identified, and any issues with a particular principle were outlined in the Interim Recommendations Report that was shared with the project.

RECOMMENDATION AND BEST PRACTICE PLAN

- Various recommendations were devised, based on evidence scores, and any issues identified.

- A 'Best Practice Action Plan' was devised alongside the Interim Recommendations Report and shared with the project, going into more detail about the work associated with each recommendation. This will be referenced in follow-up reports.

- Recommendations and the Best Practice Action Plan were communicated to the Housing First and Outreach Manager.

- For some points, the Housing First and Outreach Manager provided evidence of what was being done to meet the recommendations already. New documentation was produced in some cases.

- In other examples, they expressed a commitment to specific actions based on the recommendations.

- In response, the Co-ordinator drew together timescales so it was clear when updates or evidence of action are expected.

- This evidence and / or action commitment was added to the Recommendations Report.

- In this case, accreditation has been recommended. The recommendations included in the Interim Recommendations Report are considered 'best practice' recommendations; that is, as long as the project makes a commitment to consider or act on them, accreditation is still recommended.

- There are additional recommendations to consider. Members of the Accreditation Panel agreed that further recommendations should be made to the project, with accreditation still awarded as long as the project, via the Housing First and Outreach Manager, commits to carrying them out. This decision was made because the recommendations added by the Panel, based on the discussions had during the Panel meeting, were deemed significant. That said, most of the further recommendations are oriented around *continuing* certain practices, rather than *beginning* entirely 'from scratch'.

FINAL REPORT PRODUCED

- This report forms the main piece of evidence which members of the Housing First Accreditation Panel used as the basis of their decision whether to provide accreditation, or not, to the Salvation Army Housing First Cardiff project.

- The finalised version of this report will be translated into Welsh, with both copies being appropriately branded, and then shared with the Salvation Army team in Cardiff and the appropriate contacts in Welsh Government. Some sections of this report were added after the Accreditation Panel met.

- The Salvation Army Cardiff team can then decide whether to publish and/or share this report.

PANEL DISCUSSION

- The panel met and discussed this final report. Sections have been added at the end of the report to make clear what these discussions involved.

- As mentioned above, several recommendations have been added with the consent of the panel, which will be included in follow-up work.

PROJECT CONTEXT

The Salvation Army's Housing First work in Cardiff began in June 2017, when a six-month innovation grant was awarded to the organisation. This half-year period was used to research the Housing First model, as well its context compared to other models. Project staff explain that the aim became establishing an 'authentic, high-fidelity Housing First service'. As this research went on, drafts of the service specification were developed. This document has changed over time, and various drafts have informed the accreditation process.

Another important part of this early service development was communicating with the various partners who would be so key to delivering true Housing First. Staff members took a roadshow approach, delivering presentations that explained Housing First as a model and clarified the mission of the Cardiff team. These partners included housing associations, the local authority, the health service, substance misuse experts, as well as representatives of the criminal justice system. Similarly, the project team worked with the Salvation Army Corps to meet practical needs that would come from moving people, often with few or no possessions, into new homes.

During the presentations on the initial roadshow, as the team Manager put it, the Salvation Army team spoke 'honestly and with passion' about the Housing First model. It became clear how important the multi-disciplinary approach would be. It was also apparent that, while building relationships with clients and potential clients would be core to the team's work, the links and relationships developed between different organisations and individuals working to support those clients would be no less important. As such, a multi-agency Steering Group was established.

Additional funding from Cardiff Council was awarded to the Salvation Army in Cardiff, so that they could deliver five units of support to locally entrenched rough sleepers. At this point, rough sleeper numbers in the city were around eighty to ninety individuals out at any one time. It seemed to the Salvation Army team that the Housing First approach could act as a different and innovative model, meeting the needs of people who had been without homes for, in some cases, years or even decades.

The Salvation Army Cardiff's first client moved into their home in mid-December 2017. A few months later, in March 2018, the team worked with Cardiff Council to bid for an increase from Welsh Government to the existing Housing First funding. Because of this, five units was increased by ten to fifteen. In March 2019, funding for another five units was awarded to the project; in March 2020, the same thing happened. As such, at the time of writing – April 2021 - the Salvation Army project in Cardiff is delivering twenty-five support units.

The project has created twenty-four tenancies since the project's inception, with twenty-one of those individuals still in tenancy at the time of the accreditation process; this results in a sustainment rate of 88%. More clients are waiting tenancy offers and being engaged via outreach, with several others about to be accepted into new homes.

According to staff, since the onset of the COVID-19 pandemic, 'it has been immensely important…to continue to provide…high quality intensive support…that helps our clients to flourish'. The organisation has introduced a Safe Mission Plan, a strategy that aims to keep staff and other stakeholders safe within office space, and to keep everyone involved safe while members of staff do outreach work. The service has continued to support clients into new homes during the pandemic, while working as per government guidance. Digital inclusion and engaging with clients in new, more innovative ways have risen as priorities to the top of the agenda – not just for this project, but for support providers generally. At the same time, however, face-to-face contact with Salvation Army clients has continued wherever possible, as have diversionary activities that align with government guidelines.

I am told that the project team continues to work with clients in 'a flexible, assertive and caring way'. As the vaccination programme continues across Wales, the project manager hopes for an 'easing of lockdown restrictions within the next few months which will enable [the Cardiff Salvation Army team] to return to a full support schedule'.

FIDELITY EVIDENCE LEVEL SCORING

In the following text, the evidence level was scored according to the following options:

| Very low | Low | Adequate | High | Very high |

Categories of evidence based on sources were as follows:

Abbreviation	Evidence Type
IPD	Internal policy document - a document governing the way Housing First is implemented, created within the Housing First team itself.
EPD	External policy document - a document governing or affecting the way Housing First is implemented, created by an organisation or individual outside the Housing First team (the local authority, for example).
PI	Practitioner interview - an interview carried out with a member of the Housing First team, who has experience delivering the service on a day-to-day basis.
EI	External interview - an interview carried out with someone outside the Housing First team itself, but who is a stakeholder when it comes to the delivery of Housing First (some interviewees, for example, worked for a different part of the local authority, but sat on the Housing First Steering Group).
CI	Client interview - an interview carried out with a client, service user, or citizen, receiving support from the Housing First team and either accommodated or waiting to be accommodated in Housing First accommodation.

RECOMMENDATION EVIDENCE LEVEL

The evidence provided in response to the recommendations has also been scored, but using a simpler scale than the evidence relating to an entire principle. (It is worth noting again that the recommendations made to the Salvation Army Cardiff Housing First project should be classed as 'best practice' recommendations, rather than recommendations that affect the accreditation).

| None | Low | Adequate | High |

Additionally, the timescale agreed for recommendations to be acted on have been graded as follows:

- Short term: Up to six months
- Medium term: Six to twelve months
- Long term: More than a year

There was an additional category added during this iteration of the process – an 'ongoing' action that could also be short, medium or long term. This is used to refer to actions that do not have a clear end point but should be built into the continuous work of the project.

PRINCIPLE ONE EVIDENCE LEVEL   Very high

People have a right to a home that is affordable, secure, habitable, adequate both physically and culturally, and with availability of services (as per UN International Covenant on Economic, Social and Cultural Rights). It should also be dispersed in the community and not as part of an institution.

Summary notes

As per the Recommendations Report, the evidence for principle one was scored as 'very high', with evidence coming in each of the five categories. There was a clear commitment from all Salvation Army staff, as well as many external stakeholders, to the idea that tenants didn't need to meet any conditions, or set themselves any particular goals, to be housed via the Cardiff project.

Only one potential client was not accepted by the Steering Group, members of which asked that the team spend more time building a relationship with the client. This was very early during the project's lifespan, and the project's outreach capacity was still developing. As one person says of this period, the team was still 'finding [its] feet'. It seemed that said client was not particularly interesting in moving into Housing First accommodation. The Steering Group suggested that the Salvation Army team work on further developing the relationship with this client, so they could better understand the person's needs. In the end, the team helped source more suitable accommodation. In fact, I have been told that the word 'declined' is now avoided at the project, to help create an environment where everything possible is done to help somebody. In this particular example, if this potential client started showing more interest in Housing First accommodation, the team would absolutely have been willing to continue building that relationship with a view to the Steering Group accepting the person. It is commendable that the team also learned from this experience, developing more capacity to engage intensively on the street and build stronger relationships with clients and potential clients. This case was clearly and appropriately documented, and the path has always been open, should the person want to return; this would be true for anybody else.

All the clients spoken to as part of the accreditation process reinforced the fact that no conditions were imposed on them, and they did not feel that anything was expected from them as they made their accommodation home. All clients also expressed happiness with the security and standard of their homes.

When it comes to accommodation quality, clear processes are identified in tenancy agreements that commit landlords to carrying out repairs. Salvation Army staff ensure that clients see a property before moving in, and when working with private landlords, will also make sure that they make clear if a client's support needs demand particular consideration as they attend to carry out repairs. Project staff will also attend if a client wants this. Any repairs or modifications needed to homes are reported immediately by project staff, who seek clear timelines for the work.

As one member of staff put it, by email: 'The safety and comfort of our clients is paramount to us.' One support worker also told a story during interview of a client visiting a house that was unsuitable, with 'wires' visible in the home – getting the chance to see it meant the client was able to turn the property down, looking for somewhere in better condition. In this particular case, the support worker followed up with the housing association to challenge the quality of the accommodation. By empowering the client to make an informed choice, the project staff facilitated a situation wherein the client could make a decision about their own home – a powerful early moment in their Housing First journey.

One client contrasted the support they received from the Salvation Army with other support that hadn't gone so well, making clear that no conditions were attached to living in their current accommodation. When asked what they were told by Salvation Army staff before moving in, the client's first response was to mention the 'kind words' spoken to them, emphasising these kind words over anything else. This client also explained how the current accommodation was affordable and this led to them feeling 'less stressed'. Another client explained that 'it was down to me how much or how often I engaged with [support workers]'.

It was clear that clients were given the opportunity to shape their own homes, and eagerly took that opportunity, with support from the project – one client took evident pride in moving the camera around during the interview, displaying a living area that they had chosen to keep tidy, with framed posters on the walls and many of the items and accessories one would expect in any modern home (audio systems, televisions and the like). Given the development of the COVID pandemic, it is more important than ever that homes feel safe, as people are expected to remain in them for extended periods of time. Digital inclusion also plays an increased role at present, and while this will be discussed further elsewhere, the mere fact that clients carried out interviews with laptops also highlights the project's work in this area.

The properties available to clients at the project are scattered across Cardiff, varying distances from the city centre. A number of stakeholders have commented on this, discussing 'various localities for the accommodation'. One client discussed their desire to move away from people they found 'irritating' or threatening, and to live further from the city centre than they had in the past. This client highlighted the fact that he discussed this with the project staff, and these choices about accommodation location were indeed respected.

Areas of concern or mitigation

The Commitments Agreement document features this phrase: '[support workers] would like to meet with [tenants] on a weekly basis.' This could be taken to mean that there is an expectation, however small, of clients engaging with support in a regular way. Discussions with project staff made it clear that there is no such expectation – this phrase simply points out that support workers would prefer to make weekly contact, if the client chooses to do so. In fact, signing the Commitments Agreement is not mandatory for clients. It's also worth pointing out that contact between support workers and clients is flexible, based on a client's wishes and choices – meetings could occur outside the house, for example, or consist of a conversation over the telephone.

Recommendations

There were no recommendations made associated with this principle.

PRINCIPLE TWO EVIDENCE LEVEL   Very high

Housing and support are separated.

Summary notes

The evidence for principle two is scored as 'very high'. The Cardiff project is set up in such a way that there is a clear separation between housing and support, and clarity around different roles on either side of this separation. It is also clear that communication across this separation has improved and developed over time. Interviews with representatives from the various housing associations involved in the project show a clear commitment to Housing First as a concept, as well as an understandable focus on the housing management aspects that come with Housing First – this is as it should be.

There was also a clear focus on the part of these individuals and organisations to learn from lessons and apply this knowledge going forward – some serious incidents concerning damage to property has clearly led to lengthy discussion between housing management and project support staff. Understandably, confidence in Housing First was a little shaken in light of these incidents, but that seems to have improved considerably. Similarly, as time has passed, an understanding of the different aspects of Housing First provision has developed on both sides: for example, one representative of a housing association mentioned that the Salvation Army staff now have a better understanding the 'wider impact' of a person's behaviour on, and that person's relationship with, the community in which they live.

Both groups of people spoke very highly of each other, and valuable relationships now exist between the staff and organisations providing housing and support. It is clear that the different roles that exist at both the support provider and the housing associations work together well – from managerial staff through to frontline staff. One support worker, for example, explained that because they work so closely with clients, they also develop close working relationships with housing management staff.

Clients also seemed to understand the difference between housing management and support provision, and in no way perceived their support workers as anything other than advocates. The clients spoken to could identify the housing associations they had signed an agreement with by name, and as they did so, seemed to clearly speak of these organisations as separate. One client pointed out that they had been nominated for an award by their housing association for being in accommodation for a year, and for the progress they had made – this highlights the fact that housing associations can and do take a strength-based approach and do not need to work in a solely punitive way. Another client spoke of a good relationship with their housing officer, which meant they rarely needed to see each other (although this client saw a lot of their support worker).

Similarly, representatives of social landlords spoke about their tenants in a way that demonstrated how well they knew about and understood the challenges their tenants might be facing. This clearly suggests that housing management staff takes an empathetic approach, and understand the important role that support plays.

It is clear that the COVID-19 pandemic has had a huge impact on staff from the housing associations working with the project, as well as project staff (and, of course, clients). As such, these strong relationships are more important now than ever, and open, honest communication between the different stakeholders must continue. Housing association representatives made clear how important face-to-face visits are when it comes to clients, and discussed how they have developed a protocol to carry out visits safely – Salvation Army staff have done the same thing. One person working at a housing association pointed out that they 'rely on a good relationship with the Salvation Army; it's about good support, clear communication and being prepared to dig deep when needed' [emphasis mine].

Areas of concern and mitigation

The role of the Tenancy Support Officers, working for some of the social landlords, seems a little less clear. Additionally, the addiction and behaviour document mentions decisions being 'made with a landlord'. This was discussed with project staff and it is clear that this simply refers to the strong working relationship that develops between the support side and the housing management side, and the concept of working together. Landlords would never be told anything a client hadn't consented to share, which clearly fits the idea of support worker as advocate.

Recommendations

Timescale: Short term

1. Ensure that project documentation is up-to-date and reflects Housing First specifically when necessary

Timescale: Ongoing

2. Continue to ensure that relationships between support provider and housing association representatives remain strong, and that lessons are learned from serious issues

Timescale: Medium-long term / ongoing

3. Ensure buy-in to, and understanding of, Housing First, are developed in partners but particularly in housing associations. Work to make sure buy-in remains strong after serious issues

4. Ensure that the role of housing officers, tenancy support officers, and support workers are clearly defined and all have strong relationships

Response to recommendations

Coincidentally, it turns out that the Cardiff project was planning, or had already begun, to update a lot of the documentation, both to ensure it focused specifically on Housing First provision rather than general support offered elsewhere in the organisation, and to reflect the lessons learned in the Housing First project over time. The new service specification in particular contrasts other types of support with Housing First, meaning that readers will better understand exactly what makes this model so effective.

The new role guidance clearly outlines the different roles of staff and other stakeholders involved in the project, meaning that the specific work undertaken by housing officers, support workers, and tenancy support officers is more clearly delineated – which, in turn, means that relationships can be developed more strongly, as people understand more about what their colleagues do.

I have been sent the meeting minutes and other documentation related to learning lessons from county lines and cuckooing issues. It is clear that a wealth of knowledge now exists across the various stakeholders involved in the project, and strategic and operational discussions about such issues take place regularly. Additionally, I have seen materials aimed at educating vulnerable clients about cuckooing and county lines activities.

Recommendations evidence rating: High

PRINCIPLE THREE EVIDENCE LEVEL   High

The service is targeted at individuals who demonstrate a repeat pattern of disengagement with hostel accommodation and/ or, individuals accessing rough sleeping or accessing EOS (Emergency Overnight Stay) at the point when the referral is made.

Summary notes

This principle was given an evidence score of 'high'. A variety of strong evidence reinforces the fact that the Salvation Army project in Cardiff is supporting the group of people widely considered to benefit most from a Housing First approach, as well as fulfilling the project's own aims in terms of working with people experiencing difficulties maintaining other forms of accommodation. It seems that a large proportion of clients were living on the streets at the point of first contact, and have been let down by the system repeatedly. Previous accreditation work has also highlighted the fact that those benefiting most from Housing First tend to have had interactions with the criminal justice system, which is certainly true here; I was told that 'most' of the clients who have led street-based lives are on probation.

The Steering Group minutes show that nearly all the clients they discuss fit the description in the principles. In one case, it was agreed by staff and a client that there were alternatives to Housing First which might suit that client better. If a situation like this were to occur again, it will be carefully logged, and will provoke additional conversations that lead to someone being accepted to the project later. One of the representatives of a housing association who sits on the Steering Group highlighted the fact that to ensure that clients who fit the criteria for Housing First are supported, background information from mental health, probation, and other agencies is used.

The manager of the team pointed out that early during the project's lifespan, they worked with people who were currently on the streets and dealing with fairly severe mental health issues. Their examples evidence not just the active engagement approach, but the fact that the clients with whom the project engages fit the criteria listed in the text of principle three. This person went on to point out that the project works with people who 'have some demonstrable history of being unable to successfully sustain other housing options', as well as being 'homeless' at the point of referral – it was made clear to me that 'homeless' in this context could mean a variety of things, from sofa-surfing, to sleeping rough, to living in emergency or temporary accommodation. Apparently, a remark during outreach as simple as a reference to mental health issues like 'I can't cope in hostels' would trigger an investigation into whether this person would be suitable for the Salvation Army project in Cardiff.

Similarly, the project's Outreach Worker discussed some of the venues they would look to engage with clients and start building relationships – clearly services aimed at rough sleepers (though not exclusively so), like the 'purple bus' and 'breakfast run' services operating in Cardiff. This highlights the fact that the project is clearly working to provide support to those who would benefit most from Housing First.

Interviews with the clients, carried out sensitively, also demonstrated that clients perceive themselves as fitting the description given in principle three. One client cut right to the heart of the matter by saying, 'If it weren't for the Salvation Army, I'd have been screwed. I'd be dead.'

Areas of concern and mitigation

It has already been mentioned that in one instance, a potential Housing First client agreed with project staff that Housing First was not the best approach for them. While this has been documented, and is addressed fully elsewhere in this document, it seems wise to include a recommendation to be doubly sure that this is documented and monitored fully. This is addressed below.

Recommendations

5. Ensure that reasons for turning a potential client away at Steering Group level are documented, reviewed and robust

Response to recommendations

Steering Group minutes are already taken, which contain information about clients accepted into the project, as well as any not accepted (this is very rare, as only one person has not been accepted so far). Steering Group minutes clearly show clients being discussed fairly, and clients who are being re-referred equally fairly.

The new updated Service Specification also makes clearer that documentation will be kept around all decision-making, and highlights a 'falling through the net' process for the rare client not accepted onto the project – a multi-disciplinary approach with assertive outreach from the Outreach Worker, collaborating to determine whether another housing solution can be found, or whether re-referral into the Salvation Army Cardiff project makes most sense. It is admirable that the project took an active, trauma-informed approach to the client who wasn't accepted into the project (but was supported in finding more suitable support at a different service) – but might have been at some point. If this happens again, and a client is turned away but accepted later on, the relationship will be stronger because of this approach.

Recommendations evidence level: High

PRINCIPLE FOUR EVIDENCE LEVEL   High

Flexible support is provided for as long as it is needed.

Summary notes

A wide variety of strong evidence leads to a score of 'high' for principle four. The flexibility of the support provided by the Salvation Army team in Cardiff, with considerable input from other stakeholders and partner organisations, is clear. By focusing on the strengths and goals of clients, as these evolve over time, and taking a trauma-informed approach – both of which will be discussed further – the outreach worker and support workers ensure that clients receive support that works best for them. The choice and control that clients have over their engagement with support is also impressive.

While the COVID pandemic has had repercussions when it comes to face-to-face support, the project has made admirable strides to make sure the support remains flexible. When clients move in – an exciting but potentially daunting experience – the team makes efforts to leave items that belong to the client, or small welcoming gifts, in the property. Where possible, staff have met with clients using the relevant PPE, use of which is explicitly referenced in the project documentation. They have also made efforts to ensure that clients have other options available, whether these involve phone or online contact. Clients have been supported in outdoor environments, taking walks for example. Similarly, clients who were enjoyed gaming and quizzes have been supported to download quiz and gaming apps. One of the clients interviewed pointed out that support had not changed in a detrimental way because of the COVID pandemic.

The role of the Chaplain is interesting here. While the Chaplain is not, and should not, be a substitute for therapeutic support – I have received reassurances that this is the case – this role can provide considerable comfort to someone who wants to receive religious support. Similarly, the Chaplain is available to have an informal chat with any client – something which can be very valuable to anybody. At the same time, no religious support is forced on anyone, and the project is committed to ensure the presence of a Chaplain doesn't make clients of non-Christian religions uncomfortable. Taken as a whole, the Chaplain's presence appears to be immensely positive for certain clients.

Speaking of clients, all those spoken to reinforce and re-emphasise the team's open focus on flexibility. They have also all been open about a complete lack of timing restraints – there is no sense, for instance, that there are certain specific support goals tied to certain time periods. Clients who have been in the project for several years feel comfortable and confident that they'll continue to receive the support they need for years to come. 'If I need [my support worker] to come down every day,' one client explained, 'they'll be round every day. If I need them to come to see me every fortnight, they'll come down every fortnight.' Another client who was interviewed described their ideal support sessions: going shopping with a support worker, and regular breakfasts at a nearby café. One client described how on a particular incident they behaved aggressively towards staff, who made clear that this behaviour wasn't acceptable, but re-approached him the next day to discuss how he could best be supported through this period – an example, too, of a trauma-informed approach. As one member of staff put it – almost all other types of homelessness service have an end in mind; 'Housing First doesn't have an end.'

One member of the team summed this up by explaining that although it might seem simple, a lot of what constitutes flexible support comes down to when and where people want to meet. There is a Commitments Agreement document that is entirely optional for clients to sign, but it can start the conversation about how support might work. The range of diversionary activities the project runs, which are discussed in more detail elsewhere, also highlight flexibility and adapting to a client's needs.

Interestingly, one member of the team explained that although clients can engage with support workers in any way they choose, so-called 'normal working hours' are discussed with clients after some time has passed in accommodation. This is in no way restrictive, or coercive, but staff think it is potentially useful to make clear that some of the people or services clients might engage with in day-to-day life (banks or GPs, for example) might not work in the same way as Housing First. This open, honest approach to flexibility has the potential to be very effective in helping clients settle into a community and rebuild their lives, and several members of staff spent time discussing honesty and frankness as vital elements of support and communication.

It should also be noted that digital inclusion is a vital part of maintaining contact with clients, now more than ever in light of the COVID-19 pandemic. Clients have access to the Internet and devices; in fact, the laptop of one of the clients spoken to had recently broken, and it was replaced by staff.

Areas of concern and mitigation

The suggestion has been made, particularly concerning some of the more serious incidents that have taken place in some of the project's properties, that support workers involved in Housing First require considerable experience – the implication being, that this experience was not always present. That said, all the evidence I've seen leads me to believe that the right people have been recruited thus far, and experience at the project generally can only increase with time, and has clearly done so.

Additionally, we discussed the risk associated with clients becoming too attached to one support worker. This risk, where a client might take a particular member of staff leaving or simply not being available, might always be apparent, but because of the COVID-19 pandemic, it bears special consideration.

Any commissioned service, in theory, is only funded for a specific amount of time, before funding is either renewed or stopped. This fact means that staff at a Housing First project might be aware that their work, technically, has a kind of time restriction. This wider issue is something that has been discussed in Housing First Network meetings, and the consensus is that members of project staff should engage with their clients as if no time restrictions are in place; I have also heard the view expressed that staff should provide some gentle encouragement to ensuring clients are prepared for the fact that support might change over time. The nuances here would benefit from another discussion in the Network. At the Salvation Army project in Cardiff, all the clients interviewed agreed their support was not time-limited, and while senior project staff did mention this issue in the context of needing reliable, long-lasting funding (something that the Housing First Network, Cymorth Cymru, and other service providers have consistently called for), it is clear that clients were never exposed to such issues.

Recommendations

There were no recommendations made associated with this principle.

PRINCIPLE FIVE EVIDENCE LEVEL   High

An active engagement approach is used.

Summary notes

The Salvation Army project in Cardiff employs an Outreach Worker, specifically tasked with taking an assertive and active approach when it comes to outreach and engaging with clients and potential clients, often on the streets where they're living. It is worth noting that this Outreach Worker has commented on some of what they perceive as the positive aspects of the COVID-19 pandemic – people being more willing to engage and more likely to be interested in Housing First as a path out of homelessness that will work for them. Outreach work is being carried out face-to-face as much as is possible, while adhering to distancing guidelines and making use of Personal Protective Equipment. The flexibility of support, as discussed above, also means that clients might be contacted via phone, and that meeting places might vary.

Evidence shows that this outreach work is excellent, and effective.

The Outreach Worker spoke candidly about their work, and was spoken highly of by other members of the team, as well as colleagues in housing associations. Clearly, strong relationships have developed over time. Several probation workers mentioned the obvious impact that the Salvation Army's outreach work has had on their clients who were waiting for accommodation, emphasising the clear difference between clients who were involved in the Housing First project and many who were not.

The Outreach Worker differentiated this project's outreach work from 'just contact', repeatedly using words like 'active', 'assertive' and 'assertive support'. One advantage of the employment of one specific member of staff to focus on outreach was evident from our discussions: the fact that this person has become very well known among the communities that the project is trying to reach. Word of mouth ends up building interest in the project, and trusting relationships are built over time. A key part of the role, as the member of staff puts it, is 'getting [their] name known, and what [the Outreach Worker does] out there.'

When discussing what phrases like 'active engagement' and 'assertive outreach' mean to them, the Outreach Worker referenced key themes such as : flexibility of support; seeking any opportunity to develop a relationship and build trust, rather than being appointment-led; and maintaining contact as long as the client was happy to. The word 'persistent' was used, as was the idea that nobody would ever be penalised for not showing up for something, or deciding they weren't ready for support at a particular time. This approach could be as simple as bumping into someone at the breakfast run and taking them for a coffee to see how things are going, rather than scheduling a specific appointment.

The idea of honesty as part of outreach and support has been emphasised throughout this process. During the interview, the following phrases came up: '[it's about] doing what I say I'm going to do' and '[project staff] can deliver on what we promise'. Interestingly, the Outreach Worker discussed a difficult situation they encountered: at one point, a client with whom the Outreach Worker was engaging had misinterpreted their relationship, and was sending inappropriate text messages. The situation was resolved through the same approach: by having an open, honest dialogue with the client, the Outreach Worker made clear that the relationship was a supportive but professional one.

The programme of diversionary activities also begins at the outreach stage; the worker mentioned trips 'outside the city, just so [the client or potential client] can have a break.' The contrast with more traditional, less flexible forms of outreach and support - the kind that potential clients have probably experienced and been let down by – means that the Salvation Army's approach is more likely be effective. The worker will also support clients with practical matters like obtaining prescriptions, getting up on time for appointments, and getting around.

Other members of staff discussed their involvement in outreach earlier during the project's lifespan, focusing on very similar aspects: respecting a person's space, and checking that an individual wanted to keep talking with members of project staff, while at the same time building a consistent, trusting relationship.

Evidence of this approach was reinforced by one of the clients spoken to, who discussed their time on the streets as they started to engage with Salvation Army staff. There is a sense that the engagement and outreach work is flexible, client-led, and honest, which leads to effective relationships being developed – and effective relationships between clients and project staff are key to good Housing First.

External stakeholders like probation officers have seen the impact of this approach on people in their caseloads who are project clients, and speak very highly of this outreach work. If a client or potential client is given a prison sentence or taken to hospital, the outreach work will continue in those places, strengthening links between client and project, and making it clear that Housing First as a model will do its utmost to not let someone down.

Areas of concern and mitigation

Despite the effectiveness evident in the project's approach to active engagement, the original service specification provided did not include a section covering assertive outreach and active engagement specifically, though the concepts were mentioned. In general, the documentation lacked references to outreach work. As it is a key part of the Housing First journey, it merits the proper attention in project documentation. A new specification was being drafted as this accreditation process was ongoing – in the updated document, there is a much more coherent focus on outreach, which is given a full section.

Similarly, the fact that the project employs a dedicated Outreach Worker comes with advantages as well as a potential disadvantage – clients who have become close to this worker during the assertive outreach phase, and developed a strong relationship, are subsequently faced with a transition to working with one of the support workers. It appears that this has not caused any issues up to this point, but the potential remains.

This was discussed with the Outreach Worker, who described some of the steps taken to ease this transition, and what might happen if it became difficult. There is, for example, considerable overlap in terms of client contact between the Outreach Worker and support workers. The client's views and needs are consistently assessed and meetings with both members of staff take place before the client transitions fully into engaging with a support worker. If a client was experiencing difficulties in moving on from the Outreach Worker, then said worker would arrange to stay on and provide more of the support going forward. This arrangement would benefit from some review, as in theory this could lead to workload issues.

Recommendations

Timescale: Long term and ongoing

6. Continue to ensure that the transition between outreach staff and support workers is managed thoughtfully and carefully

Timescale: Short term

7. Ensure that the active engagement approach is adequately documented, whether in the service specification or separate policies

Response to recommendations

A new document, 'Housing First Engagement Guidance', has been produced, which details the project's approach to outreach in a clear and concise way. Not only that, the updated Service Specification discusses outreach in a separate section. Another new document, the 'moving in feedback form', involves asking clients questions about the moving-in process, to determine – in fairly broad terms – what worked well and what didn't, from the client's perspective. This is another avenue for clients to discuss difficulties transitioning from outreach into accommodation, so could potentially highlight issues for the team to examine. As long as this transition is considered at a practical level on a day-by-day-basis, and this documentation is not the only way it is thought through, considerable progress has been made on these recommendations already.

Recommendations evidence level: High

PRINCIPLE SIX EVIDENCE LEVEL

Individuals have choice and control.

Summary notes

The variety of evidence provided for this principle results in a score of 'high'. Choice and control are key concepts for the project's stakeholders. First, every client interviewed spoke about the fact that they had control over when, how, and how often they met and engaged with their support workers. This ranged from a strict routine of weekly shopping trips, which the client wanted, to more occasional informal chats. There is evidence that this ethos continues strongly despite the ongoing pandemic; staff strive to keep themselves and their clients safe while still allowing those clients as much choice and control as possible. One client in particular, as has been mentioned elsewhere, asked their support worker to join them for breakfast every week in a local café. At one point, the café was closed due to lockdown rules, and the client decided that going for a walk in the area would be the best option – so this is what happened.

Every stakeholder working as part of the project team emphasised the importance of choice and control. Clients entering the project might not have had any control for a long time, and, additionally, might not yet have a clear sense of who they are, what they might be interested in, and what they want to do with their time. The excellent programme of diversionary activities, which will also be referenced elsewhere, offers a wide variety of choices. (This is, in part, why the maintenance of this programme is so important, though lockdown restrictions might have an impact on how it works.)

Choice is the driving factor when it comes to where clients are accommodated – as noted previously, the project maintains properties across Cardiff, and clients are encouraged to express where they would like to live. One client explained that 'of course [they were given a choice], flat out. If [they] didn't want to [move] somewhere, [they'd] say, "No, f**k off. I don't want to go there!"'

Similarly, there have been multiple instances of clients moving to new properties. This is not seen as a failure of any kind, and is always client-led; in the same way that anybody else might want to move house for a number of reasons, a client might have decided they wanted to live somewhere quieter and further out of the city centre – to take one example. It seems that support workers understand the importance of talking through choices and options with clients, and providing expertise and advice based on their years of experience, while ultimately leaving it up to the client. One member of the team calls this a 'normal part of the journey', likening it to anybody deciding to move house.

There is a similar commitment to choice and control when it comes to how clients decorate, clean, and arrange their accommodation – or choose not to. Allowing clients control over their environment aligns with a psychologically-informed and therapeutic approach to support, as well as clearly supporting the core focus of the project on providing as much choice and control as possible. Clients during interviews have proudly shown the interviewers their homes, via webcam, almost letting the footage speak for itself.

In the same way, staff speak about how choice and control are regularly given to clients as part of their support. In one example, a member of staff described how diversionary activities would be 'promoted' to a client: '[we'd say], "oh, by the way...we're doing this activity today. Would you like to join in with us and do that?" And if [the client] chooses to, brilliant, and if [they don't], that's [fine], you know?' While the absence of conditionality has already been discussed in relation to principle one, the language used by this member of staff reinforces how embedded the ideas of choice and control for clients are, as does the follow-up statement, 'nobody is beholden to us. Nobody has to do anything that we tell them to do. People can have their home in exactly the style that wish to have it.' One member of staff talked about how they had to overcome concerns about a client who didn't want a bed, and accept that 'that was [their] choice'.

This choice-oriented approach is emphasised from the very beginning of the client's Housing First journey, during the outreach and relationship-building work. This concept was summed up in one interview like so: 'this whole process starts on the foot of, this is who [the project staff are] and this is [what the project has] to offer – would you like to be part of this?' This member of staff contrasted the Housing First approach with their perception of 'every other transition into accommodation that [a client] has experienced, which is "You are going here, you are going to this emergency bed, and at maybe eleven o'clock at night…you now have to move somewhere."' Comments like this highlight and prove how much choice and control are valued by staff.

All of this was also apparent when speaking to clients. One client called it 'too good to be true' that they could make decisions about their support. This person commented that they 'like structure' in their lives, and as such arrange regular support sessions at the same time each week. This example shows how linked choice and personal strengths are – by giving clients choice, they can exercise their concepts of what they believe in, what they enjoy, and what they value. The idea of a person-centred approach is of course more clearly evident in principle nine, but it is worth understanding how these principles link to each other.

As has been discussed above, one client turned down a property because of visible wires and other safety concerns; the support worker who had taken the client there also expressed reservations, but ultimately, it was the client's choice not to move in.

Areas of concern and mitigation

Some of the documentation featured religious language, referencing Christian values. A specific example of this is dealt with in the recommendations associated with principle seven. This is worth mentioning here because of the risk that any religious language or practice associated with support might affect the choice and control clients have – or, crucially, the perception of choice and control that clients have. A client might feel less welcome if subjected to language referencing beliefs they don't share, for example – even if in practical terms, they are not treated any differently.

The accreditation process in general, as well as additional conversations with staff about this topic, have completely convinced me that no client would ever be refused support, or worked with differently, based on who they happen to be. Similarly, whether a client has certain religious beliefs or not will not affect their support. A subsequent recommendation concerns a specific piece of religious language; it is worth pointing out here that, after our discussions, the team has committed to regularly consider inclusivity and how to ensure that project practice is actively inclusive. Changing language that has been set by a UK-wide organisation is likely to be outside the control of the project in Cardiff. As such, this commitment to consider how such language could and could not affect the day-to-day work of the team is welcome.

Recommendations

There were no recommendations made associated with this principle.

PRINCIPLE SEVEN EVIDENCE LEVEL High

A harm reduction approach to substance misuse is used.

Summary notes

This principle has been scored as 'high'. Several policy and guidance documents are dedicated to forming the harm reduction approach in effect at the Salvation Army project in Cardiff. Many of these documents are very specific and focussed: they highlight a commitment to keeping clients safe while respecting their decisions; for example, there are separate documents covering addiction and its effect on behaviour; self-harm and suicide; and how clients' medication should be handled. It should be noted that the project has a thoroughly-written infectious disease procedure, with a comprehensive discussion about use of Personal Protective Equipment. While this guidance is clearly applicable to the current COVID-19 pandemic, this work appears to have been done prior to the spread of the virus, which likely put the project in an excellent position to keep staff and clients supported and safe.

There are also examples of working to support clients in mitigating harms that don't necessarily come directly from drug or alcohol use – in particular, examples appear in the 'Treating People with Dignity' policy. Clients who choose to continue using drugs or alcohol are supported and advised to stay safe, without being judging, punished, or forced into making decisions that they don't want to make. Naloxone is provided and staff and clients are educated about blood borne viruses and other medical risks.

The above approach was also evident in the client interviews. One client discussed their alcohol use, which had dropped considerably after they moved into their Salvation Army accommodation. While this kind of drop often occurs because of the stability that comes with having a home, it is important to point out that this client did explain that their support worker discussed their alcohol use, and how the client could remain as safe as possible by being aware of the effect different quantities of alcohol had on them, and being aware of the venue in which drinking was taking place.

Additionally, discussions with substance use and healthcare professionals working closely with the project reinforced the strong evidence of a harm reduction approach. One person highlighted the offering of blood borne virus testing right from the start of engaging with a client or potential client. The focus is on making clear that such illnesses are 'not a death sentence'. During discussions about substance use with these professionals, 'joined-up' thinking takes place: mental health and physical health are also talked about, as key parts of one puzzle. I was told that during the COVID-19 pandemic, an increased focus on telephone conversations between clients and substance use workers has actually led to increased engagement.

Another enabler that has been crucial to weathering the pandemic is the strong working relationship that exists between these professionals and support workers at the Salvation Army. Support workers have been 'amazing at reducing challenge' for substance use services – in large part because they communicate so well, by updating colleagues and always being at the other end of a phone. As one substance use worker put it, the 'Salvation Army have been absolutely brilliant'.

It should also be noted that the attitudes and approaches to harm reduction, substance use and alcohol use demonstrated by representatives of the various social landlords working with the Salvation Army team are exemplary. Rather than the attitude being punitive, such issues are clearly seen as a support issue, and the landlords are committed to working with clients to maintain tenancies in spite of or despite it.

Areas of concern and mitigation

In the previous principle, the idea of religious language was raised. Older documentation made reference to a 'Christian approach to harm reduction'. This was discussed with senior members of staff involved in the Cardiff project, and it was emphasised to me that this only referred to values like compassion and empathy. My understanding of the project and the way it works, gleaned from this accreditation, leads me to believe this assertion entirely. That said, as discussed above, language like this can affect perception of the service and could have an impact on someone's willingness to engage with it.

It is encouraging, then, that new harm reduction documentation has been produced that contains no such phrase. I am completely satisfied that the harm reduction approach taken at the project aligns with the Housing First model, and what the Housing First Network takes 'harm reduction' to mean (as is detailed in the glossary at the end of this document).

As has been discussed elsewhere, the recommendation associated with this principle is not necessarily merely focused on harm reduction, and could have been included for a different principle, but remains here because of the specifically phrased religious language that existed in an older version of the project's documentation.

An additional minor concern came up from the same harm reduction documentation. As is often the case with a topic like harm reduction (drug use involves a wide range of stakeholders and enforcers, with different agendas and perspectives) some of the documents provided contained phrases that didn't perfectly align with a harm reduction ethos. For example, some references to the handling and disposal of drugs, and informing of the police, seem to run somewhat counter to a harm reduction policy. However, it is important that policy documents align with the UK legislation governing illegal or prescription-only substances. In practical terms, what are most important are the approaches and attitudes of the people providing support – and all the people interviewed were committed to harm reduction.

Recommendations

Timescale: Medium term

8. Reflect on religious language in Housing First documentation and consider how it might be interpreted by clients and other stakeholders, reinforcing messages of inclusivity where appropriate.

Response to recommendations

As previously mentioned, the updated service specification includes no religious language, but instead highlights the values that the Salvation Army follows when delivering support. While changing the language used by the wider organisation to express its core values is beyond the remit of this project, it is clear to me that the team are committed to ensuring that their focus on equality and delivering Housing First is free from constraint. Upcoming team meetings will focus on how inclusivity is ensured (subsequent sections of this report, focusing on the Accreditation Panel discussion, discuss how inclusivity can and should be made more active). Similarly, there are plans to begin a project, which is only conceptual at this point, that seeks to examine how support and faith-based work done by, for example, the Chaplain, should or should not interact.

Recommendations evidence level: Adequate

PRINCIPLE EIGHT EVIDENCE LEVEL   High

The service is delivered in a psychologically-informed, trauma-informed, gender-informed way that is sensitive and aware of protected characteristics.

Summary notes:

The origins of the evidence presented to support this principle result in a score of 'high'. Comparatively, a very large proportion of the project documentation provided includes clear evidence of a trauma-informed approach, and a commitment to understanding the impact of trauma on both clients and staff.

This commitment is evident in nearly everything the Cardiff project does – whether this is logging an incident, carrying out a risk assessment, working with a client using substances, or dealing with a suspected death, to name just a few examples – these events or potential events are all discussed in detail in documentation. The service specification also makes clear that this commitment is at the core of what the project does.

Interviews clearly reinforce this. Clients spoke earnestly about how their support workers worked to understand their trauma, where appropriate, and how they'd work together to shape a support plan with those traumas in mind. One client emphatically explained that their support worker understood the various traumas and difficulties they had experiencing and were still experiencing – saying, 'Yes. Yes. [My support worker] really [understands]' [emphasis added to reflect my perception of intonation]. These difficulties were considerable, but the client described how they worked with their support worker to engage with a support plan that took this trauma into account.

Another client mentioned the fact that their support worker, and other staff at the project, understood their traumas – in rare instances where these traumas have led to aggression, support workers have reacted appropriately and re-approached the client after a period of time, when the client felt calmer. This response has come from an understanding on the part of both the client and members of staff that this is the best way of handling such situations. The trauma-informed, empathetic approach was highlighted by the client acknowledging that 'it takes a lot of patience and tolerance to put up with me'.

Staff also feel supported in this area. Support workers talked about the flexibility, understanding and empathetic nature of their line managers and senior management. This is a vital part of Housing First, as staff who are not well-supported can end up dealing with a considerable amount of deferred trauma. Senior staff at the project highlighted their flexibility and willingness to 'be there' for their members of staff. One senior team member used the phrase 'emotional regulation' to reinforce the importance of taking time to reflect in a project where emotions can often run high. A different manager highlighted the use of one-to-one reflective sessions for members of their team. The regular, and relatively frequent staff supervision sessions that can last for 'two hours, if that's how long [a staff member] wants to talk for'.

The team also discussed being there for each other, taking over when necessary (including in one case of a prolonged hospital wait for a client). Members of the team also discussed how supported they felt in terms of undertaking training courses and learning new skills to benefit their mental health as well as their clients' mental health. One support worker, for example, mentioned learning 'counselling skills' which had a benefit on how they 'interact in conversations with clients', as well as their reflective practice. Several members of staff also mentioned training in trauma-informed practice.

As has been referenced elsewhere, staff and clients are also kept as safe as possible from other hazards and traumas – the use of Personal Protective Equipment in certain situations is included in the documentation, a policy that now seems vital in the light of the COVID-19 pandemic.

Similarly, discussion earlier in this document highlighted the fact that representatives of housing associations evidence trauma-informed perspectives, both in their work at the Steering Group meetings and in their day-to-day work with clients.

What is more, professionals from other organisations – substance use teams and probation, to name two – also emphasised the fact that a client's mental health is considered at every stage of the process. One substance use specialist lamented the fact that using drugs or alcohol can act as a barrier for clients looking to engage with mental health services, and highlighted part of their role as 'breaking [down these] barriers'.

Interestingly, the diversionary activity programme was discussed with a senior team member, in terms of its effect on staff – going for long arranged walks with clients and colleagues can be a way of defusing deferred trauma or taking the focus away from a recent difficult decision or conversation. As such, diversionary activities can have an immensely positive effect on staff, clients, and the relationship between the two. Examples like this makes it clear that trauma-informed practice is evident in all the work being done at the project.

Areas of concern and mitigation

Clients have been affected by cuckooing and county lines activity, on several occasions, and there has been at least one serious incident involving costly damage. Cuckooing and other ways in which county lines drug dealing manifest can be a clear and dangerous source of trauma. As such, staff need to continue to ensure that they are committed a trauma-informed approach that learns from such incidents and continues to engage with clients in spite of issues.

That being said, all the interviewees who discussed serious incidents, including cuckooing and county lines, were able to elucidate lessons learned, and mentioned discussions that had taken place about these lessons. Representatives of some of the housing associations contacted during interviews had clearly put a lot of thought into county lines, even highlighting several lessons they'd pass on to anyone experiencing similar issues: a better understanding of clients and potential clients early on means a better awareness of whether they might be vulnerable to cuckooing; a key goal when experiencing these issues is to create an environment that criminal gangs wouldn't want to operate in; and that the locality of a property is relevant to its vulnerability.

Another cause for concern is the fact that the protected characteristics are mentioned several times across the documentation – but only fully and clearly listed in relation to harassment. Given that inclusivity and acceptance are key parts of Housing First, and the protected characteristics exist as a clear legal framework for this kind of practice, they also need to be clearly listed and linked to support; that is to say, the documentation should show a clear acceptance that nobody would be refused support on the basis of any protected characteristic.

It is clear from my conversations and research that the project that awareness of protected characteristics are built into the project, and nobody would be turned away from, or refused any aspect of, support based on such characteristics. While the documentation updates are a simple matter, being actively inclusive and mindful of protected characteristics was highlighted as vital by the Panel, and as such this issue is discussed later on in some detail.

Recommendations

Timescale: Medium-long term / ongoing

9. Ensure that lessons learned from cuckooing and county lines incidents are disseminated among all stakeholders

Timescale: Short term

10. Bolster references to protected characteristics and gender across documentation, particularly in relation to support, by listing them fully

Response to recommendations

New documentation has been provided which properly lists the protected characteristics, as they relate to clients and inclusion. While this addresses the recommendation at a basic level, the members of the Accreditation Panel highlighted that more pro-active approaches beyond the inclusion of protected characteristics in documentation are a vital part of being actively inclusive. This is discussed later on in the document, although it is worth noting that members of staff at the project do undergo diversity training.

I have also been sent documentation that reflects the efforts to disseminate lessons learned about cuckooing and county lines – not just to staff and colleagues at other organisations, but for clients too. It is clear that considerable work has gone into this, and mechanisms now exist to learn from serious incidents, ensuring that learning takes place across all project stakeholders. The focus on reflective practice – which is part of a psychologically-informed approach - will also be vital to continue this learning. Additionally, the project has provided new documentation that seeks to gather feedback from clients about their move-in. This shows a commendable focus on trying to identify any parts of the Housing First journey that could be traumatic for some people.

Recommendations evidence level: High

PRINCIPLE NINE EVIDENCE LEVEL **High**

The service is based on people's strengths, goals and aspirations, and as such has an explicit commitment to a small caseload.

Summary notes

The evidence for this principle is scored as 'high'. Beyond giving clients as much choice as possible, and working with clients in a trauma-informed and therapeutic way, the Cardiff team focuses on supporting clients to relearn (and rebuild, if necessary) who they are, what they enjoy doing, and what their goals might be (these goals might vary in scope from seemingly small to much larger in scope).

An impressive cross-section of the documentation and interviews demonstrates this focus, a key part of which is the excellent programme of diversionary activities. Clients are given the opportunity to take part in outdoor activities, to participate in online discussions, and to engage with the communities around them to whatever extent they choose. While the activities clients can involve themselves in are understandably reduced during a lockdown situation, there are signs that the project is still working hard to preserve the diversionary activities. One client who enjoyed online gaming, quizzes and puzzles was supported to install quiz apps on their phone. Several clients have participated in cooking classes.

I was told about a simple yet effective innovation at the project: members of staff take their strengths and interests, and help clients learn more about theirs by participating. For example, one member of staff is keen on woodworking and architecture, so clients can participate in carrying out repairs or making things. Another member of staff enjoys playing videogames, so can and does play online with clients. In this context, additionally, the availability of the Chaplain becomes an important resource: clients who want religious support and insight, and who feel they draw strength from such discussion, can participate in this with the Chaplain – as has happened on several occasions.

The concept of continued tenancy maintenance as a strength is clearly important to the project. Similarly, tenancy maintenance can be and is seen as a set of worthwhile skills that clients can develop. As one member of staff put it, having one's own accommodation requires an 'enormous amount of responsibility'. As such, basic but powerful gestures – simply termed 'nice things' by one support worker - focus on this kind of achievement. Anniversary cards signed by the staff are given to clients when they have been with the project for a year. Similarly, photos are taken with clients and staff at key points during a tenancy, and staff and clients work together on memory books. As has been discussed earlier, a housing association working with the Salvation Army nominated one of the clients interviewed for this process for an award. This award was for maintaining a tenancy so well and for a long period of time. This demonstrates the fact that it is not only support workers who can look for strengths and bolster them.

This might seem like a small matter, but for someone who, in their perception, has not achieved anything positive for a long time, this approach can make a real difference. Clients recognise this too – one of them explained that they were already 'quite good' at budgeting and managing their finances, because of the nature of their previous accommodation. Once the support worker in question recognised this, they empowered the client by involving them in discussions about benefits and finances, allowing them to 'showcase', so to speak, their skills and strengths in this area.

Similarly, a new form has been created to gather feedback from clients about the moving-in process. This has already been mentioned as evidence of a trauma-informed approach, but I argue it also fits within a strengths-based model: by seeking the views of clients, staff are making it clear that their insight and views are valued and worthwhile. Another way in which clients' views are valued is during the recruitment process. One person discussed how efforts to include clients on recruitment panels failed, because clients 'didn't want to do it'. The team, therefore, found another way of building on client's knowledge and insight – clients are informally asked 'what qualities' they would value in support workers. Client responses have had a huge impact on the recruitment process, making it more values-based.

When it comes to the caseload numbers, there is a clear commitment to a maximum of five cases per worker, and there is evidence that everybody involved understands this. Interviews and documents have proved that staff react quickly to the needs of clients, supporting each other or taking on different tasks when necessary. During the meeting of the Accreditation Panel, the Housing First and Outreach Manager explained the on-call approach, and how members of staff who support clients out of hours can then take Time in Lieu, so should never work more hours than their colleagues. As such, the balance between being there for clients when needed and safeguarding staff well-being has been struck.

Areas of concern and mitigation

As the next recommendation makes clear, the only real area of concern here is the potential risk of the COVID-19 pandemic threatening the excellent work being done when it comes to clients' strengths – the diversionary activities that reinforce such strengths are also examples of trauma-informed work. As such, it is vital that these continue in some form

Recommendations

Timescale: Medium-long term

11. Ensure the project protects its excellent diversionary activities, even in light of COVID

Response to recommendations

When it comes to diversionary activities, it has been made clear to me that this has been continued to its utmost during the COVID-19 pandemic, even where it has necessitated some creativity on the part of staff. More online activities have taken place, as well as the facilitation of clients to take more ownership of things they want to do (the previously discussed example of a staff member installing various quiz apps on a client's phone would count here). Clearly, the timely focus on digital inclusion taken at the project has paid off during lockdown. That said, socially distanced activities and walks have still taken place, where possible, during the pandemic. I am convinced that the commitment to diversionary activities has not wavered due to the pandemic; staff must continue their creative efforts to support clients in all kinds of beneficial activities.

Recommendations evidence level: High

PRINCIPLE TEN EVIDENCE LEVEL High

The widest range of services are involved from the outset (health, substance misuse, mental health, police), so individuals can access them if needed or wanted.

Summary notes:

The evidence for this category has been scored as 'high'. Documentation and interview evidence demonstrate that key services and their staff are built into the working of the project – specialist substance use nurses, probation officers, and local police officers, to name a few examples. Such individuals all spoke highly of the Salvation Army project in Cardiff project, and have clearly developed strong working relationships with project staff. The context still seems to depend more on dedicated, passionate people than a strategic involvement of other agencies, there is still evidence that the widest range of services were brought in at the project's start. The service specification clearly builds in other services; 'fast-track referrals' are mentioned, and stakeholders from a wide range of other services are included in Steering Group meetings. Many of the other documents acknowledge the role of other services.

Interviews reinforced this impression; clients spoke of their engagement with other organisations and the support they received in doing so – being driven to hospital appointments and accompanied in said appointments. Similarly, as part of benefit maximisation and client support, close relationships with the DWP and local job centres have been developed. Not only are clients supported in accessing other agencies, the project will proactively co-ordinate this access, and work with agencies to provide the most effective support possible.

The Steering Group comprises individuals from organisations representing the health service as well as the criminal justice system, which means that those perspectives are built into the client's journey from the beginning. The fact that this group will stay up-to-date with the clients' journeys means that the insight that comes from different sectors all contributes to decision-making and support as time passes.

As mentioned in an earlier section, substance use professionals have discussed their close working relationships with the Salvation Army team, and the fact that frequent, open communication – as well as working holistically by always considering mental health, physical health, and substance use or alcohol issues together – was key in pre-empting issues. As one substance use professional put it, '[I feel like I] can pick up the phone any time'. This person also highlighted the need for 'flexibility', and working around rather than within existing structures, before going on to explain that they worked with client support workers to 'empower clients to speak up', which is an excellent expression of the concepts of client-centred work and providing control. More practical issues were highlighted; for example, ensuring that prescription pick-up days and times worked for clients, especially during the COVID-19 pandemic, are key.

Several probation workers have also highlighted strong working relationships, and the fact that the Salvation Army Cardiff project has had a positive effect by reducing the offending behaviour of certain clients. One of these professionals said that the Salvation Army have 'gone the extra mile in support of one of [their] cases'. Another one described the project as having 'transformed the life' of one client, highlighting in particular the assertive outreach and active engagement. Again, this person described the excellent support in encouraging rehabilitation, but also highlighted the 'brilliant' support they received from project staff in working with clients.

The police have also worked with the project team, delivering county lines training to the staff. Apparently, this relationship improved considerably over time, after serious county lines and cuckooing incidents demonstrated the seriousness of the associated risks.

Clients mostly highlighted the fact that support workers would take them to appointments, and work closely with professionals in other fields, like substance use.

Areas of concern and mitigation

Support workers highlighted tension between the medical model, and how health services engage with clients with mental health and substance use issues (while emphasising the commitment of individual members of staff in the health service). This issue goes beyond this project and the Housing First Network needs to be aware of this and ensure it is discussed appropriately.

The recommendations below come from discussions with senior staff, which focused on the importance of the principles and Housing First as a model, even in the face of challenges like the pandemic. Similarly, Housing First projects must receive the funding they need to deliver a model of support that aligns with the principles to the people who will most benefit. What's more, external stakeholders need to be properly involved and show a strategic commitment to the work. Involvement of such individuals and organisations on the Steering Group is a great example of this, but given the challenging times in which the project is operating, it is worth reiterating the vital nature of this kind of strategic buy-in.

Recommendations

Timescale: Medium-long term / ongoing

12. Salvation Army Cardiff should, when working with external partners, continue to make the case for Housing First, using evidence from the project and promoting the model, to ensure Housing First clients are prioritised for housing and support.

13. The project should resist when discussions, especially with commissioners, regress away from the Housing First principles, potentially because of COVID-19. Again, the case for Housing First must be made, and evidence from the project used to bolster use of the model

Timescale: Ongoing

14. Continue to build and maintain excellent relationships with non-housing partners, encouraging strategic and systemic commitment to providing multi-agency support to Housing First clients.

Response to recommendations

As is the case with some of the other recommendations, this will need following up over time – initially, I've committed to contacting the project in roughly six months to talk through this. The team are committed to acting on the above recommendations, and have shared a list of various stakeholder groups with which they will communicate to encourage understanding of and buy-in to Housing First, from strategic to operational levels, with everyone in between. Originally, events were planned to further this goal, but the COVID-19 pandemic has likely changed this, at least for some time. Nevertheless, the team have committed to continuing to engage with local stakeholders as much as possible, including via strategic discussion groups established by the local authority. Senior staff at the project are developing a delivery plan that will advocate for additional Housing First units, and are gathering evidence to bolster communication on a daily basis.

To some extent, the work of developing understanding of, and strategic buy-in to, Housing First, needs to happen across Wales and is therefore a shared objective with the Welsh Government, the Housing First Network and Cymorth Cymru. As such, these conversations will continue to take place during meetings of the Network and other relevant strategic groups.

Recommendations evidence level: Adequate

5. ACCREDITATION RECOMMENDATION AND CONCLUSION

This section was written prior to the Accreditation Panel meeting.

I recommend that the Salvation Army project in Cardiff be accredited as a Housing First Wales project.

While there are areas of concern associated with some of the principles, the overall evidence scores are excellent throughout (all of them scored as 'high' or 'very high'). Most of the areas of concern are relatively minor and easily dealt with. Some of the more serious ones – such as local authorities ensuring they remain bought into Housing First, and understand it – are understood by the Salvation Army team, who have committed to action. I have discussed the fact that I will be following these actions up in due course, with a view to developing a shorter follow-up report.

Other areas of concern, like the use of religious language in some documentation, were to some extent pre-empted by new documentation that in many cases was already in development at the project. This highlights the fact that the project is constantly evolving, and members of staff continue to reflect on their work, addressing issues as they go.

The response to the original Recommendations Report, and the commitment shown by the team in addressing some of the areas of concern, lead me to recommend that this count as a 'Best Practice Recommendation', and that despite some outstanding actions, the project should be accredited at this stage. As mentioned above, these actions will be discussed over time with the Housing First and Outreach Manager.

The documentation developed at the project is robust, and deals with all the principles in detail. Interviews with a wide range of stakeholders, including clients, reinforce the understanding of, and commitment to, a reflective and evolving Housing First model being delivered to those who need it most.

It should be noted that the eagerness with which the Salvation Army staff, as well as external stakeholders, got involved with this process is commendable, and it displays the fact that all are willing to be challenged, if it means delivering Housing First more effectively

6. ACCREDITATION PANEL MEETING

As per the Panel's Terms of Reference, three members of the Panel met with the Housing First Policy and Practice Co-ordinator and Cymorth Cymru's Director. To make a final decision on accreditation, the Terms of Reference dictate that a majority of the panel members must agree on a decision. The Panel spent most of the working day discussing the accreditation process, this report and specific examples of practice that demonstrate adherence to each principle. The Housing First and Outreach Manager at the Cardiff project joined the Panel to answer specific questions and shed more light on aspects of project the Panel had queries about. The Panel identified several issues that will be part of a wider conversation about Housing First in Wales, facilitated by the Housing First Network. The Panel also agreed upon some additional recommendations, which appear below.

ISSUES RAISED DURING PANEL MEETING

Tension between safeguarding and choice

The tension between safeguarding clients, while giving them the freedom to make their own choices, is a complex part of Housing First that should be discussed at the Network. In this accreditation process, we have seen the example of a client not wanting to sleep on a bed, which a support worker initially struggled to accept, before realising that they had to accept this choice. This prompted a question during the Panel meeting about how members of staff dealt with the tension between choices service users might make that put them at greater risk than simply choosing not to sleep on a bed, and how they could resolve it for themselves in way that didn't lead to deferred trauma for staff.

This is most apparent, according to the Project Manager, in the level of drug use among certain clients. Taking a harm reduction approach, as mandated by the principles, means accepting that clients will be doing things that are potentially unsafe. One could say that this particular example of a service user putting themselves at potential risk is, therefore, clearly addressed in the principles. However, it would be worth discussing this with the Network to see if there are other examples of how safeguarding and choice might interact that are so overt.

Inclusivity and support

The experience of the Project suggests that the rough sleeping population of Cardiff is overwhelmingly male. While this might be true, research and anecdotal evidence – such as that provided by the project Manager to the Panel when answering questions – suggest that women experience homelessness differently. They are more likely to be, for example, sofa surfing. The project is fulfilling its own mission, which is to provide intensive support to people who have been rough sleeping, are experiencing difficulties maintaining a tenancy, and likely dealing with mental health issues. Similarly, the project's work aligns with the third principle, which identifies the group most likely to benefit from Housing First.

However, to deliver support which truly aligns with principle 8 and its references to protected characteristics, a service needs to go beyond merely 'not discriminating' and be genuinely, actively inclusive. This might include referral routes and outreach procedures that work with people experiencing different kinds of homelessness. The panel also discussed the importance of support that meets the needs of women experiencing homelessness, who may have experienced domestic abuse or sexual violence and may also have been separated from their children as a result of trauma, abuse, homelessness and other issues. The need for Housing First staff to have the training, knowledge and skills to support women with these experiences, and to have developed the links with specialist services, was highlighted as being central to a gender informed approach. The additional recommendations numbered 15 and 18 address this issue.

The Housing First Network would benefit from discussing this, and sharing good practice with projects beyond this one. The fact that a higher proportion of rough sleepers tend to be male, and there is likely to be more hidden homelessness among women, is likely to be true across Wales. To be truly inclusive and gender-informed, Housing First projects need to think about how to reach hidden populations who might not be experiencing the most visible form of homelessness.

Referral processes

It is clear that the Project has been on a journey, and staff and external stakeholders alike have learned many lessons over time; relationships with housing associations in particularly have developed and improved. As discussed above alongside the new recommendations, more active referral processes will be necessitated by the fact that fewer people live on the streets of Cardiff, because of the city's response to the COVID-19 pandemic, and its focus on ending rough sleeping during lockdown. The Manager has committed to considering routes that ensure the most complex clients – the people most in need of Housing First – can come into the project and, crucially, feel welcomed - regardless of background.

24/7 support and avoiding dependence

One of the discussions among panel members was related to how the project was able to provide flexible 24/7 support, how to maintain continuity of support during staff absence or turnover, and how to avoid dependency on a single support worker. In order to provide 24/7 flexible support, the manager outlined how boundaries were important, with clearly defined core hours when clients could contact their support worker. Outside of these hours, clients can contact the organisation's hostel, where night staff are fully briefed on HF clients, and they can contact the designated out-of-hours staff member if necessary. The manager also said that staff members had the option to work flexible hours and could, for example, support someone on a weekend and take the hours back during the week. In order to manage the impact of absence on caseloads, the project manager described how additional support could be provided by the manager and co-ordinator and how a through handover is undertaken if staff will be away for more than a couple of days. They also outlined their team approach in order to avoid dependency on a single staff member, where clients have a designated support worker but know other members of the staff team and can approach them for support

GOOD PRACTICE FOR OTHER PROVIDERS

The answers to the Panel's questions provided by the Project Manager contained many references to good practice, which will be summarised here for other providers:

- The use of personal budgets for clients, which strike the Manager as crucial for effective Housing First
- Thorough handover if members of staff are going on leave or will be away for more than a day, to ensure consistency of support and a shared understanding of different clients
- A robust on-call system to ensure 24/7 access to support, with an understanding that more minor issues would at first be resolved over the phone, when possible. If clients want support over the weekend, staff will do this, and take time back during the week

Following a discussion among panel members, it was agreed that the Housing First Policy and Practice Co-ordinator would ask for further clarification from the project manager before the panel made their final decision. The Co-ordinator set up a further, final interview with the Project Manager. This interview is summarised below, before the additional issues, both local and national, are detailed.

ADDITIONAL INTERVIEW

The additional questions for the Manager focused on the role of the Steering Group; the Accreditation Panel suggested we needed to ensure that no gatekeeping was being carried out by members of the Steering Group, and that no conditions were being placed on potential clients before they were able to access Housing First accommodation and support. Similarly, the Panel wanted to confirm that potential clients were not subject to more scrutiny that someone going through a different accommodation pathway. The Manager made clear that the Steering Group has gone on a journey, and members have gained greater understanding of the model and principles since the project's inception, including the importance of housing being provided without conditionality. They emphasised that clients were not subject to any kind of conditionality. Rather than being subject to scrutiny, the Manager described the Steering Group process as 'match-making', to use what people know about a client and pair them with accommodation that most aligns with their choices, making it most likely to feel like home to them.

ADDITIONAL RECOMMENDATIONS

Members of the Panel agreed that, based on their discussion and the evidence provided, the following recommendations should be put to the Salvation Army Cardiff project. These will be considered alongside the others during follow-up work.

Timescale: Long term / ongoing

15. The project should consider developing referral routes that capture people beyond the Assertive Outreach route. In particular, these routes should build on the project's existing commitment to a definition of homelessness beyond 'rough sleeping', which would likely be more inclusive, and might involve supporting people of different genders and backgrounds – thus being part of a fully gender informed approach.

Timescale: Long term / ongoing

16. The project should continue to develop its approach to inclusivity, continuing to provide equality and diversity training for all staff and consider how it can actively promote an inclusive approach to ensure that people from a diverse range of backgrounds and protected characteristics feel welcome within the project; this is distinct from merely 'not discriminating'.

Timescale: Short term / ongoing

17. The Steering Group must never act as barrier to someone being allocated accommodation, and the primacy of choice and control must always be respected. Text along these lines should be added to the Terms of Reference for the group.

Timescale: Long term / ongoing

18. The project should continue to develop its understanding of gender informed approaches, building on existing work to develop the skills and knowledge of the staff team regarding VAWDASV, and developing partnerships with specialist services to ensure that women with complex support needs have access to trauma informed, multi-agency, specialist support where it is required.

Response to recommendations

These recommendations were put to the Manager of the Salvation Army Cardiff project during the follow-up interview, and a commitment was made to working on them. The Manager accepted that, when it comes to gender-informed approaches and an inclusivity that actively seeks the most complex cases, the Project was on a journey, and more steps would be taken. Members of staff at the project already undergo training in diversity, inclusion and protected characteristics. Some of the work on building relationships with organisations with expertise in domestic violence, and violence against women, which had already begun, was slightly delayed by COVID-19. The team has committed to continuing this work, and bolstering it: the Manager has started to attend meetings of the Housing First for Women Sub Group set up by the Housing First Network. What is more, a member of staff has been assigned the task of establishing a more robustly gender-informed approach.

When it comes to referral routes that are more actively inclusive, and might ensure the most complex cases are considered, rather than focusing on people sleeping rough (who are more likely to be male), the Manager accepted that some thinking needs to be done here. They also made the excellent point that orienting a referral process around people sleeping rough would be a somewhat obsolete approach, given the local response to the COVID-19 pandemic: there simply aren't that many people on the streets of Cardiff any more.

Clearly, some of these issues are not unique to the Salvation Army Project in Cardiff, and the Manager also committed to fully engaging with conversations about these topics during Network and other appropriate conversations. It was also accepted that the use of a Steering Group model might necessitate a commitment, in the groups Terms of Reference, to ensure the group never acts as a barrier to someone finding support, or as additional scrutiny that would not be applied to someone seeking accommodation via another route. There is no evidence that any gatekeeping or imposition of conditionality has taken place, but the Manager has committed to ensuring that this remains the case.

7. AWARDING

Cymorth Cymru, after meeting with the panel, was pleased to announce full accreditation to The Salvation Army - Housing First Cardiff.

Awarded by Cymorth Cymru:

- **Alex Osmond (**Housing First Policy and Practice Coordinator)
- **Katie Dalton (**Director)

With thanks to our Accreditation Panel:

- **Edith England (Cardiff University)**
- **Alex Smith (Homeless Link)**
- **Joy Williams (Local Authority Housing Networks)**

8. GLOSSARY

Various terms are used throughout the documents associated with the Housing First Wales Accreditation. So that different stakeholders understand exactly what we mean when we use certain phrases, we have devised this brief glossary. Any questions about the terms here should be addressed to the Housing First Policy and Practice Coordinator.

- **Active engagement/assertive outreach** – these terms refer to an approach to engaging with and communicating with clients or potential clients, whether they are experiencing or at risk of homelessness, or potentially suited to Housing First specifically. Essentially, working in an active or assertive way means a support worker should bear in mind that the person they are trying to reach might have many reasons not to want to engage. Some of these might be short-term and temporary while others might be more ingrained. While respecting the right of anybody not to engage with someone else, support workers should be willing to try different approaches with their clients – at the same time as working in a way that is trauma-informed and person-centred.

For example, a support worker might be on the receiving end of verbal abuse, and should make it clear that they are willing to draw a line under it if the client decides at any point they want to talk (while also making it clear that such abuse is not acceptable). Support workers, understanding that somebody might not want to talk to them at one moment, might tell a client that they will be sitting in a nearby café, should they change their mind. Support workers will need to be patient and understanding. A support worker might suggest a venue for speaking that they perceive would put a client most at ease – a local park, for example. Because many of the clients suited for Housing First will have been let down by the system repeatedly, active and assertive engagement means making clear that the same thing will not happen in this instance, and that the support worker will always be willing to talk; however a client is feeling, and whatever trauma they have internalised, 'the system' as represented by a support worker or outreach worker will be there for them when they are ready. Building relationships takes time, of course, and support workers should be prepared to put this time in.

Engaging in an assertive way means ensuring that the different organisations, individuals and agencies are committed to the same approach, so that it becomes a multi-disciplinary way of working. That said, it should be remembered that certain clients might have difficult relationships with certain organisations, and as such, the support offered should be separate from any specific organisation or agency.

Support workers and other people offering support should be willing to meet clients in a variety of settings – in a police station after an arrest, for example, or in a GP's surgery. Similarly, clients should be seen at a variety of times – people might swap shifts to see clients at night, for example, or in the early morning.

A key element of active engagement is that clients are offered a situation better than the one they are currently in – for example, the might prefer bed and breakfast accommodation to a hostel place. Support workers should, in effect, have a toolkit of approaches, in recognition of the fact that different clients might have very different needs and engage differently.

- **Choice and control** – these concepts are fundamental to the delivery of Housing First, but can mean a range of different things. In practice, choice and control refers to the support and accommodation being client-led. For example, choice might refer to the client expressing a preference for an area in which they want to live – but might equally refer to them taking the lead role in deciding how their home should be decorated.

  Control means giving them an active role in these decision processes. The fact that Housing First imposes no conditions on tenants, beyond the basic requirements any tenancy agreement would impose, means that basic choices like whether to engage with a specific kind of support are down to the client.

  It should be noted that, at a minimum, clients usually need to commit to at least having a conversation with a support worker at regular intervals. Housing First support workers often need to build relationships with clients, so that they can discuss the choices open to clients in a fair, open and non-judgemental way. As one Housing First worker has put it: "How can we know what a client wants if we don't talk to them?"

  Support workers should bear in mind that different clients will have different needs, and encourage them to make positive changes to their lives, while still respecting their decisions. This requires compassion, respect and understanding. Support workers should not offer help that clients do not need, and should be open and honest about the various choices that might exist at a particular point in time.

- **External organisation** – service, organisation or agency that is neither the support provider engaged in delivering Housing First, nor the landlord letting the accommodation, but is built into the Housing First project as a key stakeholder. See the definition for 'stakeholder', below.

- **Fidelity** – the extent to which a Housing First project aligns with the principles of the approach; in this case, the principles drawn up by the Housing First Network Wales.

- **Gender-informed approaches** – a service that, when planning and providing support, considers how a person's perceived gender might affect their situation and support needs. It is more likely, for example, that a female sleeping rough has experienced domestic violence; this might necessitate 'target hardening' for their accommodation, or affect their choice of accommodation. Services should also be able to respond sensitively to requests for male or female support workers where appropriate.

- **Harm reduction** – policies and approaches aimed towards reducing the negative consequences of drug use, while emphasising the quality of life of an individual over the cessation of their drug use. A harm reduction approach accepts drug use a complex phenomenon and focuses on keeping people safe, and on the rights and needs of people who use drugs. For a more complete definition, visit this page at the Harm Reduction Coalition.

- **Housing First accredited project** – a service that adheres to the principles drawn up by the Housing First Network and has gone through the accreditation process before being awarded accreditation.

- **Housing First Network Wales** – the group of experts and practitioners in housing, homelessness, and related fields, who meet to oversee the implementation of Housing First across Wales, and how it can be carried out effectively.

- **Housing First Network Wales Accreditation** – sometimes abbreviated to 'Accreditation', it affirms that a project delivers Housing First according to the principles drawn up by the Housing First Network Wales. Organisations that do not receive accreditation do not deliver Housing First, but may well deliver an effective and necessary service.

- **Housing First target clients/client group** - This phrase will be used throughout the assessment process and associated documents. Housing First works most effectively with people who tend to experience issues with substance use and mental health. In many cases, but not exclusively, they will have experienced or be experiencing rough sleeping, or homelessness of some sort. They may have engaged with various services and organisations to varying extents.

- **Housing management** - A collection of activities taking place as part of the letting of a rented property; including, but not limited to, rent collection, housing maintenance, dealing with ASB, and resolving disputes with neighbours. Housing management tasks are usually carried out by a landlord, whether private or social.

- **Landlord** – the organisation or individual letting the accommodation to a Housing First client.

- **Potential Housing First project** - a project undergoing assessment for the Housing First accreditation.

- **Psychologically-informed approaches/environments** – support approaches and environments that take into account a person's psychological context, and work according to the five principles listed in this document, as well as reflective practice.

- **RSL Management Function** – the arm of a Registered Social Landlord acting as landlord according to the definition in this glossary. This will often involve activities such as collecting rent, addressing concerns or complaints about or from tenants, overseeing repair and maintenance and other similar duties.

- **Separation of housing and support** – In order to ensure closest adherence to the Housing First principles, there should be no undue influence on the way support is provided to clients. It must be accepted that the provision of housing is not conditional on engagement with support; people accessing Housing First need to be assured that the support provider is there to focus entirely on support issues, and this will not affect their housing. Housing management activities are to be kept as separate as possible – for example, support workers will not deliver or enforce such activities (rent collection, for instance, or ASB enforcement). They might, however, choose to discuss such issues with tenants, acting as advocates for the clients.

- **Service provider** – the organisation delivering the potential Housing First project support, as opposed to letting the accommodation itself. This may be abbreviated to 'provider' or 'provider organisation' in various documents.

- **Stakeholder** – any agency, organisation, group or individual involved in a Housing First project and therefore likely to be part of the accreditation process. These would include, but might not be limited to, the commissioning team, staff at the service provider, representatives of the health service, representatives of local mental health teams, representatives of local criminal justice, representatives of local substance misuse teams, and the tenants themselves, as well as clients who might be engaging with an organisation but who have not yet been accommodated in a Housing First property.

- **Trauma-informed approaches** - models that recognise the trauma that people have faced in their lives and structure systems around recognising and responding to that trauma. This definition comes from AVA.

This is a living glossary - if you think other terms should be included, please contact us directly.