



COFNOD O BENDERFYNIAD WEDI'I DDIRPRWYO GAN SWYDDOG
RECORD OF DELEGATED OFFICER DECISION

Penderfyniad Allweddol | Key Decision ✓

PWNC | SUBJECT:

Rhondda Cynon Taf County Borough Council - Draft Housing Support Programme Strategy 2022/26

DIBEN YR ADRODDIAD | PURPOSE OF THE REPORT: In accordance with the requirements set out in Welsh Government Housing Support Grant Guidance, to seek delegated authority to submit to Welsh Government for consultation, the Draft Rhondda Cynon Taf Housing Support Programme Strategy, Draft Housing Support Needs Assessment and Draft Statement of Needs and undertake a broader consultation with Housing Support Programme stakeholder partners on the draft documents.

PENDERFYNIAD WEDI'I DDIRPRWYO | DELEGATED DECISION:

The draft Rhondda Cynon Taf Housing Support Programme Strategy, Draft Housing Support Needs Assessment and Draft Statement of Need are approved for submission to Welsh Government (Attached as Appendix 1-3).

A consultation be undertaken with Housing Support Programme stakeholder partners on the draft documents.

Llofnod y Prif Swyddog
Chief Officer Signature

Paul Mee

Enw (priflythrennau)
Name

04.02.2022

Dyddiad
Date

Mae'r penderfyniad yn cael ei wneud yn unol ag Adran 15 o Ddeddf Llywodraeth Leol 2000 (Swyddogaethau'r Corff Gweithredol) ac yn y cylch gorchwyl sy wedi'i nodi yn Adran 5 o Ran 3 o Gyfansoddiad y Cyngor.

The decision is taken in accordance with Section 15 of the Local Government Act, 2000 (Executive Functions) and in the terms set out in Section 5 of Part 3 of the Council's Constitution.

YMGYNGHORI | CONSULTATION



04.02.2022

LLOFNOD YR AELOD YMGYNGHOROL O'R CABINET
CONSULTEE CABINET MEMBER SIGNATURE

DYDDIAD | DATE

LLOFNOD SWYDDOG YMGYNGHOROL
CONSULTEE OFFICER SIGNATURE

DYDDIAD | DATE

RHEOLAU'R WEITHDREFN GALW-I-MEWN | CALL IN PROCEDURE RULES.

A YW'R PENDERFYNIAD YN UN BRYN A HEB FOD YN DESTUN PROSES GALW-I-MEWN GAN Y PWYLLGOR TROSOLWG A CHRAFFU?:

IS THE DECISION DEEMED URGENT AND NOT SUBJECT TO CALL-IN BY THE OVERVIEW AND SCRUTINY COMMITTEE:

YDY | YES

NAC YDY | NO✓

Rheswm dros fod yn fater brys | Reason for Urgency:

.....

Os yw'n cael ei ystyried yn fater brys - llofnod y Llywydd, y Dirprwy Lywydd neu Bennaeth y Gwasanaeth Cyflogedig yn cadarnhau cytundeb fod y penderfyniad arfaethedig yn rhesymol yn yr holl amgylchiadau iddo gael ei drin fel mater brys, yn unol â rheol gweithdrefn trosolwg a chraffu 17.2:

If deemed urgent - signature of Presiding Member or Deputy Presiding Member or Head of Paid Service confirming agreement that the proposed decision is reasonable in all the circumstances for it being treated as a matter of urgency, in accordance with the overview and scrutiny procedure rule 17.2:

.....
(Llywydd | Presiding Member)

.....
(Dyddiad | Date)

DS - Os yw hwn yn benderfyniad sy'n cael ei ail-ystyried yna does dim modd galw'r penderfyniad i mewn a bydd y penderfyniad yn dod i rym o'r dyddiad mae'r penderfyniad wedi'i lofnodi.

NB - If this is a reconsidered decision then the decision Cannot be Called In and the decision will take effect from the date the decision is signed.

AT DDEFNYDD Y SWYDDFA YN UNIG | FOR OFFICE USE ONLY

DYDDIADAU CYHOEDDI A GWEITHREDU | PUBLICATION & IMPLEMENTATION DATES

CYHOEDDI | PUBLICATION

Cyhoeddi ar Wefan y Cyngor | Publication on the Councils Website:- ____07.02.2022____

DYDDIAD | DATE

GWEITHREDU'R PENDERFYNIAD | IMPLEMENTATION OF THE DECISION

Nodwch: Fydd y penderfyniad hwn ddim yn dod i rym nac yn cael ei weithredu'n llawn nes cyn pen 3 diwrnod gwaith ar ôl ei gyhoeddi. Nod hyn yw ei alluogi i gael ei "Alw i Mewn" yn unol â Rheol 17.1, Rheolau Gweithdrefn Trosolwg a Chraffu.

Note: This decision will not come into force and may not be implemented until the expiry of 3 clear working days after its publication to enable it to be the subject to the Call-In Procedure in Rule 17.1 of the Overview and Scrutiny Procedure Rules.

Yn amodol ar y drefn "Galw i Mewn", caiff y penderfyniad ei roi ar waith ar / Subject to Call In the implementation date will be

____11.02.2022____
DYDDIAD / DATE

WEDI'I GYMERADWYO I'W GYHOEDDI: ✓ | APPROVED FOR PUBLICATION :✓

Rhagor o wybodaeth | Further Information:

Cyfadrn Directorate:	Public Health, Protection & Community Services
Enw'r Person Cyswllt Contact Name:	Cheryl Emery
Swydd Designation:	Head of Community Safety and Community Housing
Rhif Ffôn Telephone Number:	07825 728930

RHONDDA CYNON TAF COUNTY BOROUGH COUNCIL

KEY OFFICER DELEGATED DECISION

4TH FEBRUARY 2022

**RHONDDA CYNON TAF COUNTY BOROUGH COUNCIL –
DRAFT HOUSING SUPPORT PROGRAMME STRATEGY 2022/26**

**REPORT OF GROUP DIRECTOR, COMMUNITY AND CHILDREN'S SERVICES IN
DISCUSSIONS WITH THE RELEVANT PORTFOLIO HOLDER CLLR RHYS LEWIS,
CABINET MEMBER FOR STRONGER COMMUNITIES, WELL-BEING AND CULTURAL
SERVICES**

Author: Cheryl Emery – Head of Community Safety and Community Housing

1. PURPOSE OF THE REPORT

- 1.1 In accordance with the requirements set out in Welsh Government Housing Support Grant Guidance, to seek delegated authority to submit to Welsh Government for consultation the Draft Rhondda Cynon Taf Housing Support Programme Strategy, Draft Housing Support Needs Assessment and Draft Statement of Need and undertake a broader consultation with Housing Support Programme stakeholder partners on the draft documents.

2. RECOMMENDATIONS

It is recommended that:

- 2.1. The Draft Rhondda Cynon Taf Housing Support Programme Strategy, Draft Housing Support Needs Assessment and Draft Statement of Need are approved for submission to Welsh Government (Attached as Appendix 1-3).
- 2.2 A consultation be undertaken with Housing Support Programme stakeholder partners on the draft documents.

3. REASONS FOR RECOMMENDATIONS

- 3.1 A requirement of the Welsh Government grant conditions for the Housing Support Grant to the Council for 2022/23 is that the draft Housing Support Programme Strategy should be submitted to Welsh Government for comment prior to local approval and finalisation of the Strategy.

4. **BACKGROUND**

The Housing Support Grant

- 4.1 In April 2019, the Welsh Government established a **Children and Communities Grant** (CCG) (encompassing Flying Start, Families First, the Legacy Fund, Promoting Positive, Engagement for Young People, St David's Day Fund, Communities for Work Plus and Childcare and Play), and a single **Housing Support Grant** (HSG) (encompassing Supporting People, Homelessness Prevention and Rent Smart Wales Enforcement).
- 4.2 The HSG is an early intervention grant programme to support activity, which prevents people from becoming homeless through stabilising their housing situation, or helps potentially homeless people to find and maintain their accommodation.
- 4.3 The HSG does not fund the statutory duty on local authorities to prevent homelessness, instead HSG funded services augment, complement and support the statutory service. The purpose of the HSG is to prevent homelessness and support people to have the capability, independence, skills, and confidence to access and/or maintain a stable and suitable home.
- 4.4 The grant programme makes a significant contribution to the implementation of Part 2 of the Housing (Wales) Act 2014, which is focused on homelessness prevention. It also reduces or prevents the need for often more costly interventions, by other public services including the NHS and/or social care for individuals and families and, in some cases, people who fall into the criminal justice system.

Core Purpose and Eligibility of the Housing Support Grant

- 4.5 It is essential that the Housing Support Grant (HSG) has a clear and shared vision and is underpinned by strong values and its strategic objective. This includes how it works with and complement's other Welsh Government programmes.
- 4.6 Housing is a key priority area in the Welsh Government's Prosperity for All National Strategy, which sets out the vision that "We want everyone to live in a home that meets their needs and supports a healthy, successful and prosperous life".
- 4.7 The HSG supports the aim of working together to prevent homelessness and where it cannot be prevented ensuring "it is rare, brief and un-repeated". To do this we need to tackle the root cause of and work to enable people to stay in their own homes longer. Therefore, the HSG seeks to secure "A Wales where nobody is homeless" and everyone has a safe home where they can flourish and live a fulfilled, active and independent life".
- 4.8 In line with the expectations of Welsh Government, HSG funded services alongside allocations policy, housing management policy, the use of housing registers, and evictions should be co-ordinated to getting people into the rights homes, in the right place with the right support to succeed.

The Strategic Planning Process

- 4.9 Effective planning is key to the effective commissioning and procurement of Housing Support Grant (HSG) services to ensure the right outcomes are achieved to support the needs of people who use HSG services and to ensure value for money.
- 4.10 There is a requirement to develop a single strategy called the Housing Support Programme Strategy which incorporates the Local Authority's statutory duty to produce a homelessness strategy and the strategic planning requirements for the HSG. Therefore, becoming the single strategy for homelessness prevention and support. These mechanisms to develop the strategy have been used to inform the entirety of our approach Housing Support Programme that encompasses both the statutory homelessness duty funded through the revenue settlement and non-statutory preventative services funded through the HSG.
- 4.11 The HSP Strategy, as the single strategic document on housing support and homelessness prevention, also satisfies the existing statutory requirements for a homelessness strategy under Part 2 of the Housing (Wales) Act 2014 with the requirement not to produce a separate strategy
- 4.12 A requirement also of the strategic planning process is the need to carry out a comprehensive needs assessment which must be undertaken every four years, with a light touch review every two years. This should provide a single strategic view of our approach to homelessness prevention and housing support services.
- 4.13 The guidance requires that the needs assessment will include:
- Population needs assessment.
 - Local Authority well-being assessment.
 - Homelessness statistics and other housing data such as waiting lists.
 - Welsh index of multiple deprivation.
 - Feedback from service users.
 - Regional VAWDASV needs assessments.
 - Any relevant research/national publication.
 - Outcome's data non statutory homelessness data in this context should be understood to be outside the specific homelessness statutory duties on local authorities under the Housing (Wales) Act 2014.
 - Needs data from providers, Support Service Gateway Panels.
 - Unmet needs data over the last 12 months from providers,
 - Homelessness reviews.

5. RCT DRAFT HOUSING SUPPORT PROGRAMME STRATEGY

- 5.1 The draft Rhondda Cynon Taf Housing Support Programme Strategy was developed further to a review of homelessness services in the area, undertaken between October and December 2021. The approach taken has been one of co-production. An independent consultant was commissioned to undertake the

Housing Support Needs assessment which offered an independence from the Council and a fresh perspective to inform the draft Strategy.

5.2 The needs assessment has highlighted a number of issues that are reflected in the Draft Housing Support Programme Strategy and Action Plan, namely:

- The need for improved data sharing between the Council and HSG providers with Health, Probation and Education.
- The need for better joint working and access to services for people with mental health, substance misuse and where they are co-occurring.
- Continue to develop services for Violence Against Women, Domestic Abuse and Sexual Violence (VAWDASV).
- Build on the successes of the Housing First model in RCT towards Rapid Rehousing.
- Develop new approaches to providing support and accommodation for single homeless people.
- Understand what we need to do to better utilise private rented sector accommodation.
- Meeting the increasingly complex needs of people presenting as homeless in HSG services.
- Improve multi-agency responses and system working with reference to those who have complex and multiple support needs.
- Implement the new outcomes framework when agreed across HSG, Adult Social Care and Children's Service.

5.3 Preventing homelessness is better than dealing with the challenges that arise from homelessness. The Housing (Wales) Act 2014 has a focus on prevention and relief which is reinforced in the Welsh Government "Ending Homelessness Action Plan" which is split into four key areas, Partnerships, Rare, Brief and Non-recurring

5.4 There is no single reason why someone can end up without a home. Often someone facing homelessness approaches the Council for housing assistance for many reasons. The pandemic has changed the landscape across all aspects of our lives in Wales. The "No one Left Out" approach by Welsh Government which led to the removal of the Priority Need Order significantly increasing the number of homelessness presentations and placements in temporary accommodation, particularly for single homeless people who have multiple support needs.

5.5 The new, draft RCT Housing Support Programme Strategy builds on the success of the previous Homelessness Strategy and proposes to continue to focus on prevention and early intervention, whilst also undertaking targeted work on the identified issues highlighted in the Needs Assessment. The draft Strategy clearly sets out the practical ways the Council will achieve its aims and objectives in preventing homelessness and commissioning and delivering housing related support services in partnership.

6. EQUALITY AND DIVERSITY IMPLICATIONS / SOCIO-ECONOMIC DUTY

6.1 There are opportunities to advance equalities, improve access to services and improving housing options advice for those with protected characteristics who may

be vulnerable. An equality impact assessment and socio-economic assessment will be completed before the final Strategy is submitted for approval by Cabinet. There are no direct implications arising from the recommendation of this report to undertake a targeted consultation the draft Strategy.

7 WELSH LANGUAGE IMPLICATIONS

- 7.1 An assessment of the implications for the Welsh language will be completed before the final strategy is submitted for approval. There are no direct implications arising from the recommendation of this report to undertake a targeted consultation on the draft Strategy.

8. CONSULTATION / INVOLVEMENT

- 8.1 In developing the draft strategy, key stakeholder groups were surveyed/interviewed, including people that use/have used homelessness and support services. Key performance statistics were also analysed along with a review of relevant local and national policies. This included face to face meetings held with senior Council Officers and focus groups held with support providers and users of support services. Details of this work are set out in the draft needs assessment and the draft strategy appended to this report.

9. FINANCIAL IMPLICATION(S)

- 9.1 Various budgets are in place to support the Council's statutory responsibilities for homelessness and the delivery of housing related support services as identified in the draft Strategy. In addition to the Council's core budget for homelessness services, the Council has been awarded Housing Support Grant of just over £12 million for 2022/23 and receives Homelessness Prevention Grant of £95,267 to support the delivery of our Adult Housing First Projects.
- 9.2 Any financial implications arising from the delivery of key actions identified in the final HSP Strategy will be subject to further reports for decision as required.

10. LEGAL IMPLICATIONS OR LEGISLATION CONSIDERED

- 10.1 The legal duties and legislative requirements have been considered in accordance with the Housing (Wales) Act 2014 and the Welsh Government Housing Support Guidance document (April 2020, revised March 2021)

11. LINKS TO THE CORPORATE AND NATIONAL PRIORITIES AND THE WELL-BEING OF FUTURE GENERATIONS ACT

- 11.1 The Well-Being of Future Generations (Wales) Act 2015 ('the Act') places a 'well-being duty' on public bodies aimed at achieving 7 national well - Page 10 of 11 being goals for Wales - a Wales that is prosperous, resilient, healthier, more equal, has cohesive communities, a vibrant culture and thriving Welsh language, and is globally responsible.

- 11.2 In discharging its duties under the Act, the Council has set out and published well-being objectives designed to maximise its contribution to achieving the national well-being goals.
- 11.3 The well-being objectives are set out in RCTCBC's Corporate Plan. When exercising its functions, the Council is required to take all reasonable steps to meet its well-being objectives. This means that the decision makers should consider how the proposed decision will contribute towards meeting the well-being objectives and must be satisfied that all reasonable steps have been taken to meet those objectives.
- 11.4 The well-being duty also requires the Council to act in accordance with a 'sustainable development principle'. This principle requires the Council to act in a way which seeks to ensure that the needs of the present are met without compromising the ability of future generations to meet their own needs. Put simply, this means that Council decision makers must take account of the impact of their decisions on people living their lives in Wales in the future. In doing so, the Council must:
- Look to the long term.
 - Focus on prevention by understanding the root causes of problems.
 - Deliver an integrated approach to achieving the 7 national wellbeing goals.
 - Work in collaboration with others to find shared sustainable solutions.
 - Involve people from all sections of the community in the decisions which affect them.

12. CONCLUSION

- 12.1 The development, approval and delivery of a robust Housing Support Programme Strategy is key to ensuring RCTCBC continues to make positive progress towards preventing homelessness and ensuring where it does happen that it is short lived and not repeated. Our Housing Support Programme Strategy is fundamental to the development of a robust and effective spend plan for the significant WG HSG funding we receive. The draft Strategy must be considered by WG as part of a consultation requirement set out in the guidance. we are required to adhere to however wider partner feedback on the plan is also important for us to be able to finalise the Strategy. The risk of not sending the Housing Support Programme Strategy to Welsh Government for overview and scrutiny may result in the Council being open to legal challenge for failing to produce a mandatory document.

Appendices:

- Appendix 1: RCT Draft Housing Support Programme Strategy.
- Appendix 2: Draft RCT Housing Support Needs Assessment.
- Appendix 3: Draft RCT Statement of need.



LOCAL GOVERNMENT ACT 1972

AS AMENDED BY

THE LOCAL GOVERNMENT (ACCESS TO INFORMATION) ACT 1985

RHONDDA CYNON TAF COUNTY BOROUGH COUNCIL

KEY OFFICER DELEGATED DECISION

4TH FEBRUARY 2022

**REPORT OF GROUP DIRECTOR, COMMUNITY AND CHILDREN'S SERVICES IN
DISCUSSIONS WITH THE RELEVANT PORTFOLIO HOLDER CLLR RHYS LEWIS,
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**RHONDDA CYNON TAF COUNTY BOROUGH COUNCIL - DRAFT HOUSING
SUPPORT PROGRAMME STRATEGY 2022/26**

Officer to contact:

Cheryl Emery – Head of Community Safety and Community Housing

Rhondda Cynon Taf County Borough Council

Draft Housing Support Programme (HSP) Strategy
2022-26

January 2022

Contents

Housing Support Programme (HSP) Strategy 2022-26

Purpose of the Strategy

Legislative and Policy Context

National Context

Local/regional Context

Vision and Principles

Needs Assessment

Needs Assessment process

Key findings

Homelessness

COVID-19

Accommodation

Support Needs

Key Issues

Strategic Priorities

Stakeholder Engagement

Stakeholders Engaged With

Stakeholder Feedback

Impact Assessments

Impact Assessment Process

Key Findings

Implementing, Monitoring and Reviewing the Strategy

Working with Partners

Funding Sources

Monitoring, Reviewing and Evaluation Arrangements

Annex A

Action Plan

Annex B

Purpose of the Strategy

The Housing Support Grant (HSG) is an early intervention grant programme to support activity which prevents people from becoming homeless, stabilises their housing situation or helps potentially homeless people to find and keep accommodation. The grant is designed to augment, complement, and support statutory services, thus ensuring that the overall local offer helps people into the right homes, with the right support to succeed. It makes a significant contribution to the implementation of Part 2 of the Housing Act (Wales) 2014 which focuses on homelessness prevention. Services supported through the HSG should be person centered and address multiple problems vulnerable people who are homeless or likely to become homeless often face (for example debt, employment, substance misuse, violence against women, domestic and sexual abuse, and mental health problems). The services should ultimately reduce the need for costly intervention in these areas by other public services.

Strategic planning is key to the effective commissioning HSG services. This will help ensure that homelessness is prevented and that people needing services are supported appropriately. This will also help ensure value for money is achieved in deploying the grant. Welsh Government requires a single strategy incorporating a local authority's homelessness prevention and support and covering the statutory homeless duty funded through the revenue settlement and non-statutory, preventative services funded through the HSG. The strategy should recognise the inter-dependency between these elements and more widely with other public services providing support to vulnerable people.

Accordingly, this strategy for sets out the strategic priorities of RCT County Borough Council and its partner agencies for homelessness prevention and housing related support services over the coming 4 years (2022-26). It refreshes earlier priorities that were included in the Council's former homelessness strategy, and the HSG Delivery Plan for 2021-22. Development of the priorities was informed by a comprehensive need assessment exercise which included direct engagement with stakeholders within the Council, providers of support services and service users.

Legislative and Policy Context

National Context

Welsh Government has maintained a consistent focus on tackling homelessness in the context of the long-term impact of UK Government policy, in relation to austerity and welfare support, and other non-devolved policy areas that have an impact on homelessness such as the work of the Police and Prisons. Under Part 2 of the Housing (Wales) Act 2014, Local authorities have a new and strengthened duty to prevent and relieve homelessness which has led to a strengthening of local partnership arrangements.

The guiding principle remains one of preventing homelessness, but where this is not possible, ensuring it is brief and non-repeated. There is a renewed commitment to fundamentally reform homelessness services to focus on prevention and rapid rehousing. Understanding what works, what is promising, and what isn't effective will be crucial to Welsh Government in delivering its policy goals.

In turn, several key principles underpin the Welsh Government approach to homelessness prevention, and these should be enshrined across public and commissioned services. They are as follows:

- The earliest preventions are most effective and most cost effective and should always be the interventions of first choice.
- Tackling and preventing homelessness is a public services matter – rather than a ‘housing matter’.
- All services should place the individual at the centre and work together in a trauma informed way.
- The duties in Part 2 of the Housing (Wales) Act 2014 should be the last line of defence – not the first - and all services should work to the spirit not simply the letter of the law.
- Policy, service delivery and practice should be informed and shaped in a co-productive manner and by those with lived experience.

Under this broad approach, housing and homelessness policy and practice has continued to evolve in the period since the Housing Act came into force. This evolving landscape has included:

- Publication in 2016 of ‘Preventing Homelessness and Promoting Independence’ – essentially a pathway to economic independence for young people through housing advice, options, and homelessness prevention
- Introduction in 2016 of the ‘When I’m Ready’ arrangements under the Social Services and Wellbeing (Wales) Act (see below), which enabled young people in foster care to remain with their carers beyond the age of 18
- Publication in 2016 by Barnardo’s of the Care Leaver Accommodation and Support Framework aimed at supporting effective planning and provision of housing and support for young people and care leavers
- Introduction by Welsh Government of the ‘Housing First’ recovery-orientated approach to ending homelessness that centres on quickly moving people experiencing homelessness into independent and permanent housing and then providing additional support and services as needed.
- A renewed emphasis, in response to the Covid-19 pandemic on reducing street homelessness by providing temporary accommodation solutions, leading to publication by Welsh Government of Phase 2 planning guidance requiring local authorities and their partners to plan to ensure that all those brought into temporary accommodation are supported into long term accommodation, that the emphasis remains on prevention and keeping homelessness a rare, brief and non-repeated experience.
- Phase 3 planning guidance (2020) supporting the design and development of resilient, sustainable services for the future
- A series of focused campaigns including the End Youth Homelessness Cymru Campaign 2018, focusing on the needs of the LGBT+ community, supporting those with mental health issues and reducing links between homelessness and educational disengagement and the care system
- Significant additional investment by Welsh Government, notably £10m in 2019-20 to tackle youth homelessness through enhancing current provision and developing new services; and

launch of a £4.8m innovation fund in 2019-20 supporting 26 projects across Wales to new and innovative approaches to housing support

- A report to Welsh Government from the Homelessness Action Group in 2020 providing a holistic policy perspective to ending homelessness

A person-centred, multi-agency approach to homelessness requires a contribution from, and alignment, with other services. These service areas are themselves subject to specific legislation and policy, all broadly coalescing around the principles of prevention/ early intervention, person-centred support, promoting independence and providing sustainable solutions. Important areas of relevant legislation and policy are set out below.

The Wellbeing of Future Generations (Wales) Act 2015

The Act and seeks to strengthen existing governance arrangements for improving the social, economic and cultural wellbeing of Wales to ensure that present needs are met without compromising the ability of future generations to meet their own needs. Public bodies listed in the Act need to think about the long term, work better with people and communities and each other and look to prevent problems and take a more joined up approach.

For the first time public bodies listed in the Act must do what they do in a sustainable way. Public bodies need to make sure that when making decisions they take into account the impact they could have on people living their lives in Wales in the future.

It will expect them to:

- Work together better
- Involve people reflecting the diversity of our communities
- Look to the long term as well as focusing on now
- Take action to try and stop problems getting worse – or even stop them happening in the first place

Social Services and Wellbeing (Wales) Act 2014

The Act provides the power to create a coherent legal framework for Social Services in Wales.

It intends to reform and integrate social services law for people and make provision for:

- Improving the well-being outcomes for people who need care and support, and carers who need support.
- Co-ordination and partnership by public authorities with a view to improving the well-being of people.

There are 6 strategic priorities outlined in the Act:

- Maintaining and enhancing the wellbeing of people in need.
- A stronger voice and real control for citizens.
- Strong Direction and Local Accountability.
- Safeguarding and Protection.

- Regulation and Inspection.
- Services (Adoption and Transition).

The Act recognises the increase in the number of people accessing social services. In order to help meet and reduce the demand it outlines the need for increased comprehensive early intervention and intensive support services. There is a duty for local authorities to maintain and enhance the wellbeing of people in need in areas such as education, training and recreation, social and economic wellbeing and physical, mental health and emotional wellbeing.

Violence against Women, Domestic Abuse and Sexual Violence (Wales) Act 2015

The Violence against Women, Domestic Abuse and Sexual Violence (Wales) Act aims to:

- Improve the public sector response in Wales to such abuse and violence.
- Improve arrangements to promote awareness of, and prevent, protect and support victims of gender-based violence, domestic abuse and sexual violence
- Introduce a needs-based approach to developing strategies which will ensure strong strategic direction and strengthened accountability
- Ensure strategic level ownership, through appointment of a Ministerial Advisor who will have a role in advising Welsh Ministers and improving joint working amongst agencies across this sector
- Improve consistency, quality and join up of service provision in Wales

Substance Misuse Delivery Plan: 2019 to 2022 (Wales)

A national Delivery Plan to address substance misuse was published in October 2019 setting out the Welsh Government's key policy and operational priorities for the coming years in this area. The Plan has since been reviewed to consider where it needs to be updated in light of COVID-19 - particularly to meet the new challenges ahead.

The review considered the evidence highlighted by APBs and wider partners. It concluded that the original priority areas for the next three years remain relevant and have been reinforced during the pandemic. These priority areas are:

- Responding to co-occurring mental health problems which are common in substance misuse.
- Ensuring strong partnership working with housing and homelessness services to further develop the multi-disciplinary approach needed to support those with substance misuse issues who are homeless or at risk of homelessness.
- Ensuring that all prisons in Wales (and HMP Eastwood Park, women's prison) have a coordinated, transparent and consistent service for those with substance misuse problems in prison.
- Providing further support for families and carers of people who misuse substances.
- Improving access to services and ensuring people get the support and treatment when they need it. • Strengthening our multiagency working and care planning to meet people's needs
- Tackling dependence on prescription only medicines (POM) and over the counter medicines (OTC).
- Ensuring that appropriate and responsive alcohol misuse services are in place following the implementation of the Public Health (Minimum Price for Alcohol) (Wales) Act 2018 on 2 March 2020.

It is also appropriate to note the requirements of the Equalities Act 2010 when planning services to prevent homelessness and housing support. This Act covers the whole of the UK and provides protection for people discriminated against because they are perceived to have, or are associated with someone who has, a protected characteristic. These characteristics are:

- Age
- Disability
- Gender reassignment
- Marriage or civil partnership
- Pregnancy and maternity
- Race
- Religion or belief
- Sex
- Sexual orientation

Protection applies to the provision of services and public functions. In addition, a new Socio-Economic Duty was introduced in Wales in 2020 which requires public bodies, when making strategic decisions such as deciding priorities and setting objectives, to consider how their decisions might help reduce the inequalities associated with socio-economic disadvantage.

Local/regional Context

This strategy incorporates the wider vision of the Council and is aligned with the various strategies below to ensure the Housing Support Programme supports the Council to meet its ambitions for RCT.

Corporate Plan

The Council's Corporate Plan, Making A Difference, sets out the Council's priorities and directs everything it does.

The vision is to make Rhondda Cynon Taf 'the best place in Wales to live, work and play, where people and businesses are independent, healthy and prosperous. The Council is committed to delivering three main priorities: ·

- Ensuring People are independent, healthy, and successful; ·
- Creating Places: where people are proud to live, work and play; ·
- Enabling Prosperity: creating the opportunity for people and businesses to be innovative; be entrepreneurial; and fulfil their potential and prosper.

'My Own Front Door' A Plan for housing in later life 2016

The development of a specific Plan for Older Persons Housing is in recognition that some older persons housing issues and the type of provision required are very specific and that there are some gaps in existing provision, for example an oversupply of traditional sheltered housing in some areas of the Borough.

The Plan sets the direction for the provision of accommodation and housing services for older people and in essence establishes a "position statement" so that providers and partners are clear what the accommodation needs of older people are and how the Council would like to see those needs addressed.

The Council's vision is that "people in later life can live independently in their home of choice for as long as possible". In order that this vision can be realised, three strategic aims have been identified.

- Strategic Aim 1: Make available person centred and preventative support to minimise the escalation of critical need.
- Strategic Aim 2: Easily Accessible Information, Advice and Assistance.
- Strategic Aim 3: To enable a range of good quality housing choices that promotes independence, prolonged health, and well-being.

Accommodation and Support Strategy for Young People 16+ Years of Age Leaving Care 2019-2022

The Cwm Taf shared regional statement of intent for supporting children's young people and families sets out a shared vision that children, young people, and families in Cwm Taf live safe, healthy, and fulfilled lives and that they can achieve their full potential by building resilient communities. This strategy supports RCT Children's Services Delivery Plan 2018/2019 Priority 3 to ensure that children who cannot live with their parents live in suitable accommodation in RCT.

The aim of Rhondda Cynon Taf Children's Services, Children Looked After Quality Assurance Panel is to ensure that children looked after and care leavers in RCT receive good quality placements that support them to live safe, healthy, and fulfilled lives.

One of the Panel's key objectives is to identify a commissioning mix and range of placements that support children looked after and care leavers to achieve positive outcomes. To achieve this, a range of suitable accommodation needs to be provided that supports care leavers to develop the skills that enable them to move to full independence.

Regional Arrangements

The Cwm Taf Morgannwg (CTM) Regional Housing Support Group (RHSCG) provides advice to local authorities and other local stakeholders. Local authorities must work with neighbouring authorities to form Regional Housing Support Collaborative Groups (RHSCGs) co-terminus with Health Boards. Regional working provides a forum for local authorities to deliver those things which are best done regionally. These can be categorised as:

- (Cat) 1: Development of specialist services for which there is not a critical mass locally
 - There are five new regional projects (2021-2022), including:
 - Creation and launch of a Specialist Housing, Mental Health, Substance Misuse Team. In partnership with strategic leads in Health, ASB & Housing.

- Development of a Research/Scoping project to determine the need for a CTM Regional LGBT+ project. In partnership with Llamau and Ending Youth Homelessness Innovation project.
- Development of a Research/scoping project to determine the need for a BME project, specifically for those experiencing harmful cultural practices, alongside Housing related support needs.
- (Cat) 2: Development of regional services where justified by economies of scale
 - Proposal for new regional projects and pilot projects have been considered and approved by the RHSCG. In relation to all proposed and developing projects the HSG Leads receive advice and guidance from the group.
 - Stakeholders/ members of RHSCG have advised HSG leads of gaps in services and highlight the potential for partnership project development.
- (Cat) 3: Delivery of improvements to be achieved by collaboration
 - The RDC has been sharing data and collaborating with monitoring officers of affiliated groups. All regional projects, at all stages, are presented to the LA planning groups. Also, the two Housing representatives that sit on the RPB also sit on the RHSCG.
- (Cat) 4: Collaboration with other public services
 - Improving connections and forging partnerships with Key stakeholders
 - Partnership working and co-production. To include co-locating services, pooling funding, and joint commissioning.
 - Producing Service User and stakeholder Surveys. Exploring opportunities to work closer with service users and support staff to consider inclusivity in relation to current practice.
 - Sharing information and data with RPB & PSB

Vision and Principles

Set out the local authority's overall four-year vision for homelessness prevention and housing related support services (what the local authority would like the future to look like/the position they would like to achieve in the future)

Needs Assessment

Needs Assessment process

The Needs Assessment was undertaken by an external agency that worked closely with Rhondda Cynon Taff County Borough Council departments, leaders, stakeholders, and service users.

Key findings

Rhondda Cynon Taf (RCT) is the second largest authority in Wales with a population of 234,410 according to the 2011 census. It covers an area of 424 square kilometers and borders Merthyr Tydfil and Caerphilly to the east, Cardiff, and the Vale of Glamorgan to the south, Bridgend and Neath Port Talbot to the west and Powys to the north. The principal towns in the area are Aberdare, Llantrisant and Pontypridd.

RCT has an increasing older population and features some of the most deprived areas in Wales. However, the pattern of deprivation across RCT is uneven and is concentrated in particular areas, in large part concentrated along the Cynon Valley in communities such as Penrhiwceiber and Pen-y-waun, and along the Rhondda Valley in communities such as Tylorstown and Treherbert.

Homelessness

Outcomes for people presenting to the Council for both prevention and relief of homelessness are on average better than the national average and other Local Authorities in the surrounding region, suggesting that RCT was performing well-above average in the run up to the Covid-19 pandemic. Data shows that where assistance for homelessness is provided outcomes are largely positive for duty to prevent, help to secure and final duty. There has been significant improvement in outcomes following the provision of assistance since 2015, for both prevention and relief. Single person households have consistently accounted for the majority of cases where the Council have provided assistance to those who are homeless or threatened with homelessness. Single male applicants are the largest proportion of applications made by those who have been homeless within the last two years. The proportion of single male applicants has risen from 46% of the total in 2017 to 58% in 2021.

COVID-19

COVID-19 has had a huge impact on the numbers of vulnerable people now owed a homelessness duty, and the range of complex needs that need support.

It has led to a rapid increase in the numbers of people in temporary accommodation and reduction in availability in the Private Rented Sector.

The pandemic has also highlighted their need for system partners such as Housing, Health and Probation to work better together and improve their data sharing.

Accommodation

Single male applicants account for more placements into temporary accommodation than all other households combined, with single female applicants accounting for the second highest number of placements.

40% of the people placed in temporary accommodation had been placed multiple times, and the number of people requiring temporary accommodation has significantly increased.

One bedroom housing is the highest need across all allocation bands, 91.25% of applicants for housing are assessed as having a low or no housing need

Meeting the needs of urgent housing or adaptations for people with a physical disability is a significant challenge. Although some suitable temporary accommodation is in place, frequently the Council do not have sufficient time or information to meet needs quickly. Better data sharing and joint working with Health is needed.

Since the pandemic and the increase in house values in RCT, many private landlords now no longer want to work with Council referred clients, preferring to find private tenants.

The Council have secured funding from Welsh Government to set up the Social Lettings Agency. This is improving access to the private rented sector, but its impact is slower than was hoped because of the current challenges engaging private landlords.

Support Needs

RCT has amongst the highest reported incidences of substance misuse, mental illness, and poor well-being in Wales.

The most common reason for priority housing need in RCT is mental health and housing problems are frequently given as a reason for a person being admitted or re-admitted to inpatient mental health care. People with mental illness are far more likely to live in rented accommodation and their mental ill-health is often given as a major reason for tenancy breakdown.

Where several agencies are involved, information sharing arrangements between partners should be improved, and aligned with agreed national frameworks to better inform future service planning

The Council has previously seen a year-on-year increase in HSG mental health referrals however, it is anticipated that this will rise significantly in the aftermath of the COVID-19 pandemic.

RCT CBC Adult Social Services utilise HSG funding to provide specialist mental health accommodation projects. There is insufficient data on support outcomes achieved by HSG funded services for specialist mental health placements to be able to draw conclusions on their effectiveness.

There are high numbers of people requiring HSG services that have co-occurring mental health and substance misuse issues. These are particularly challenging for support services to get NHS mental health and substance misuse treatment services involved. A new specialist regional service is now in place, but it is too early to fully evaluate.

For ex-offenders, there are a range of Housing First projects to meet their needs. However, there are multiple challenges in meeting their housing and support needs.

The Council Single Point of Access saw an increase in referrals from vulnerable families and Vulnerable Single Parent/Expectant Mothers each year for the last three years.

Single people aged 16-25 are the highest proportion of homelessness applications to the Council, increasing year on year and through the COVID-19 pandemic.

There is insufficient data on support outcomes from supported lodgings for young people which although arrangements are in place with Children's Service to start to develop and effectively monitor the effectiveness of this housing option for young people leaving care.

RCT CBC Adult Social Services Learning Disability accommodation services utilise HSG funding. There is insufficient data on support outcomes achieved by HSG funded services for people with learning disabilities to be able to draw conclusions on their effectiveness.

HSG funds specialist placements for people with physical disabilities within Adult Services. There is insufficient data on support outcomes achieved through HSG funded services for people with physical disabilities and sensory impairments.

People with physical difficulties apply for rehousing from hospital often with very short timescale. RCT need more data and notice at an earlier stage. Going forward these needs corporate pathway signed up by all partners.

Increasing numbers of referrals are unable to be accepted to Refuges in RCT because of levels of need and/or risk.

Whilst homelessness applications for those fleeing domestic abuse are not high there is a need for service development particularly in respect of enhancing domestic abuse perpetrator Programmes in Cwm Taf Morgannwg.

Services are seeing more clients with needs that are higher than the service was set up to meet.

The waiting lists show that there is a risk that the needs of young people are not being fully met by the current service provision.

There is little data available on the outcomes of support, making it difficult to understand why support ended in a planned or unplanned way and whether the outcome was satisfactory to the client. The new outcomes framework needs to be developed and implemented to fully understand what support is achieving.

Key Issues

The needs assessment has highlighted a number of issues that need to be reflected in the Housing Support Programme Strategy:

- The need for improved data sharing between the Council and HSG providers with Health, Probation and Education.
- The need for better joint working and access to services for people with mental health, substance misuse and where they are co-occurring.
- Continue to develop services for Violence Against Women, Domestic Abuse and Sexual Violence (VAWDASV)
- Build on the successes of the Housing First model in RCT towards Rapid Rehousing.
- Develop new approaches to providing support and accommodation for single homeless people
- Understand, what is needed to utilise private rented sector accommodation
- Meeting the increasingly complex needs of people presenting as homeless in HSG services
- Improve multi-agency responses and system working with reference to those who have complex and multiple support needs.
- Implement the new outcomes framework when agreed across HSG, Adult Social Care and Children's Services

Strategic Priorities

Preventing homelessness

1. Improve internal data sharing for Health and Housing including use of data for planning services -build on work with Public Health Wales updated support outcome framework
2. Support for mental health and substance misuse from the wider system – joint working with partners including housing, health, and Adult Social Care for the development of a multi- agency response on co-occurring issues and the review of current service provision.
3. Support for Domestic Abuse – develop work with perpetrators and step- down model for people not at high end of need, look at accommodation options with perpetrators

Providing suitable accommodation

4. Build on the successes of the Housing First model in RCT towards Rapid Rehousing and the 'new normal'.
5. Improve accessibility and assessment for single homeless people. Reduce the use of bed and breakfast and look at how to make temporary accommodation more sustainable and suitable for longer stays.
6. Improve access to the private rented sector accommodation
7. Ensure new homes are built to improve move on from temporary accommodation and review local letting requirements

Providing satisfactory support to people who are or may become homeless

8. Review of Covid impact on supported accommodation -integrate higher need clients whilst managing risk and impact
9. Improve multi-agency responses and system working with reference to those who have complex and multiple support needs.

Stakeholder Engagement

Stakeholders Engaged With

Stakeholders were engaged via workshops, one to one calls and questionnaire.

Stakeholders included:

- HSG Team
- Housing and Homelessness teams
- Adult Social Care
- Children's Services
- HSG Providers
- NHS
- Probation

Stakeholder Feedback

Key themes from the stakeholder engagement

<p>Improve accessibility consistently for all from low to complex needs. A one door / assessment centre approach with a 'no wrong door' philosophy.</p>
<p>Improve multiagency working for mental health, substance misuse and where these are co-occurring.</p>
<p>Ensure there is a better multi-agency operational response to inclusion. This could take the form of a panel made up of RSLs, Social Services LA Housing, Health & Third Sector – with the expressed aim of agreeing a consensus on how to</p>

collectively work with homeless complex individuals or individuals at risk of losing their accommodation.
Extend Housing First Model for more complex needs (separately for YP and adults). Recognise that people will need permanent living options within a supported housing environment.
Housing Related Support responses for the most complex and hard to engage with need to be rapid. People need support when they need it.
Review the use of bed and breakfast and look at other approaches to Temporary Accommodation. Cardiff has temp beds attached to its Assessment Centre.
Ensure prevention and early prevention initiatives across RCT are strategically and operationally aligned. E.g., Resilient Families with effective information management and profiling.
HSG intervention should start at the earliest opportunity – should be placed based. Targeting high risk areas.
Ensure HSG and Children's Services utilise funding for Supported Lodgings effectively and understand the outcomes for young people.
Safeguarding procedures should be reviewed to ensure that they are sufficiently robust.

Impact Assessments

The full impact assessments undertaken should be recorded and saved as a separate document titled 'Housing Support Programme Strategy Impact Assessment' and be available on request. They do not need to be included within this Strategy document.

This section should list the impact assessments undertaken, and a summary of any positive and/or negative impacts identified for each assessment and any action to be taken to address any negative impacts.

Impact Assessment Process

Briefly explain that a comprehensive impact assessment exercise has been undertaken of the strategic priorities and the process employed. Provide a link to the 'HSP Impact Assessment' document.

Key Findings

List the impact assessments undertaken (see above).

Summarise the positive and/or negative impacts identified for each assessment and any action to be taken to address any negative impacts.

Implementing, Monitoring and Reviewing the Strategy

Working with Partners

The Council will continue with and enhance its current strategic working with system partners via:

Regional Housing Support Group
Regional Partnership Board
Substance Misuse APB
Public Service Board

Funding Sources

This strategy applies to the following funding sources:

Housing Support Grant

Monitoring, Reviewing and Evaluation Arrangements

The Council will review progress against the action plan at least annually
A light touch review of this strategy will be carried out after two years.
The strategy will be reviewed after four years.

Annex A

Action Plan

Priority (From Section 2)	Action required to deliver the priority	Timescales/ By When	Lead person	Outcome/Outputs
1. Improve internal data sharing for Health and Housing including use of data for planning services -build on work with Public Health Wales updated support outcome framework	<p>Work through region to develop good practice</p> <p>Agree starting point with Health</p> <p>PH Wales - Work with RSLs to assess how many tenants are accessing health services to profile prevention</p>			
2. Support for mental health and substance misuse from the wider system – joint working with partners including housing, health, and Adult Social Care for the development of a multi- agency response on co-occurring issues and the review of current service provision.	<p>Work with the Regional ABS plan</p> <p>Work more closely with housing Co-occurring group Aim, of joint commissioning</p> <p>Work closely with Adult Social Care</p> <p>Health assessment</p>			
3. Support for Domestic Abuse – develop work with perpetrators and step- down model for people not at high end of need, look at accommodation options with perpetrators	<p>Regional VWSDAVS plan</p> <p>Planning to progress</p>			
4. Build on the successes of the Housing First model in RCT towards Rapid Rehousing and	<p>Implement the Rapid Rehousing review recommendations</p> <p>Develop Rapid Rehousing Plan</p>			

Priority (From Section 2)	Action required to deliver the priority	Timescales/ By When	Lead person	Outcome/Outputs
the 'new normal'.				
5. Improve accessibility and assessment for single homeless people. Reduce the use of bed and breakfast and look at how to make temporary accommodation more sustainable and suitable for longer stays.	<p>The proposal to re-locate the hostel and develop a new 22-bedroom, 24/7 Assessment Centre for single homeless persons aged 18+ will offer a balance of short and medium self- contained accommodation options and support to meet the needs of people at their time of need.</p> <p>The service model will be delivered through a holistic, multi-disciplinary service model in partnership with Health and other support services to offer wrap around person centered support with Individuals allocated a dedicated support worker.</p> <p>Implement the recommendations of the Rapid Rehousing Review August 2021</p> <p>Explore additional units of shared housing for use as temporary accommodation in the private rented sector</p> <p>Consider developing alternative forms of TA including more generic support accommodation projects such as Martin's Close, Abertonllwyd House as well as the PRS shared housing model.</p>			

Priority (From Section 2)	Action required to deliver the priority	Timescales/ By When	Lead person	Outcome/Outputs
	<p>Social housing Grant funding</p> <p>Build strategic awareness of urgency of the housing crisis at all senior levels in the Council</p> <p>New 3-year HSG commissioning Plan</p> <p>Ensure the Council prepared for any accommodation opportunities that arise</p>			
6. Improve access to the private rented sector accommodation	<p>Link with rollout of social letting agency</p> <p>Been in place since beginning of the year</p>			
7. Ensure new homes are built to improve move on from temporary accommodation especially single person accommodation	<p>Updated LHMA LDP</p> <p>Support elected members with leadership on the urgency of the housing crisis when looking at new build proposals and focus on single person accommodation</p>			
8. Review of Covid impact on supported accommodation and floating support - integrate higher need clients whilst managing risk and impact – attitude to risk Mental health and co-occurring	<p>Review needs for those who need support with substance misuse and alcohol to ensure resource is used effectively</p> <p>Source more buildings for supported accommodation</p> <p>Work with providers on attitude to and management of risk</p>			

Priority (From Section 2)	Action required to deliver the priority	Timescales/ By When	Lead person	Outcome/Outputs
9. Improve multi-agency responses and system working with reference to those who have complex and multiple support needs.	<p>We identified that many people accommodated during the pandemic have complex support needs and will not be ready for independent living in the short term. In order to address these needs it has been identified that more specialist supported accommodation is required in order to give clients the support they need for those presenting with substance misuse linked with alcohol dependency. Linking with right partners at right time</p> <p>Inclusions panel for those serially excluded</p> <p>Consider existing partnership forums And developing and action learning approach on partnership working with excluded</p>			

Annex B

Insert Rapid Rehousing Transition Plan

Rhondda Cynon Taf County Borough Council

Draft Housing Support Grant Needs Assessment

January 2022

Contents

[Glossary](#)

[Introduction](#)

[Background and National Policy Context](#)

[About Rhondda Cynon Taf](#)

[Wellbeing assessment](#)

[Wellbeing Plan](#)

[Deprivation](#)

[Homelessness in RCT](#)

[National trends in Wales](#)

[Impact of COVID-19](#)

[Outcomes for each duty](#)

[Accommodation](#)

[Allocations](#)

[Use of temporary accommodation](#)

[Private rented sector](#)

[Planning and building](#)

[Local Housing Market Assessment \(LHMA\)](#)

[Housing Support Grant Services](#)

[Supported Accommodation](#)

[Floating Support](#)

[Referrals for Housing Support Grant Funded Services](#)

[Current HSG Services](#)

[HSG in Adult Services](#)

[HSG in Children's Services](#)

[Population Assessment data and housing support needs](#)

[Mental Health](#)

[Substance Misuse](#)

[Ex-offenders](#)

[Learning Disability](#)

[Children and Young People](#)

[Older People](#)

[Physical Disability and Sensory Impairment](#)

[Carers](#)

[Violence Against Women, Domestic Abuse and Sexual Violence \(VAWDASV\)](#)

[Rapid Review of Homeless Services](#)

[Stakeholder Engagement](#)

[Feedback from service users](#)

[Housing Support Outcomes](#)

[Outcomes for Supported Accommodation](#)

[Outcomes for Floating Support](#)

[Unmet Needs](#)

[Appendices](#)

[Appendix 1: Other Housing Support Grant Services](#)

[Housing First](#)

[Floating Support](#)

[Supported Accommodation](#)

[Other services](#)

[Glossary](#)

LA – Local Authority

LD – Learning difficulties

LDP – Local Development Plan

LSOA – Lower layer Super Output Area

RCT - Rhondda Cynon Taf

RSL – Registered Social Landlord, otherwise known as housing associations

S66 – Section 66, duty to prevent

S73 – Section 73, duty to help secure accommodation (for 56 days)

S75 – Section 75, final duty

TA – Temporary accommodation

WHO12 – A quarterly return of data surrounding homelessness sent from Local Authorities to the Welsh Government

WIMD – Welsh Index of Multiple Deprivation

WG -Welsh Government

Introduction

The Housing Support Grant (HSG) is an amalgamation of three previous grants; Supporting People Programme, Homelessness Prevention Grant, and Rent Smart Wales Enforcement.

It came into being in April 2019 following the Welsh Government funding flexibilities pathfinder project. A Ministerial decision was made in October 2018 to form two grants from the Early Intervention, Prevention and Support grant (EIPS) work, separating the housing-related grants from non-housing elements for all local authorities. Consequently, from April 2019, the Welsh Government established a Children and Communities Grant (CCG) (encompassing Flying Start, Families First, the Legacy Fund, Promoting Positive Engagement for Young People, St David's Day Fund, Communities for Work Plus and Childcare and Play), and a single Housing Support Grant (HSG) (encompassing Supporting People, Homelessness Prevention and Rent Smart Wales Enforcement).

Local authorities must undertake a comprehensive needs assessment every four years, with a light touch review every two years. This assessment is a statement of what the Authority knows about the needs and future demand for homelessness prevention and housing support services. The assessment encompasses the statutory requirement for a homelessness review as well as the full assessment for the HSG. The assessment needs to be informed by the following data:

- Population needs assessment
- Local authority well-being assessment
- Homelessness statistics and other housing data such as waiting lists.
- Welsh index of multiple deprivation
- Feedback from service users
- Regional VAWDASV needs assessments
- Any relevant research/national publication
- Outcome's data
- Needs data from providers, gateway panels
- Unmet needs data over the last 12 months from providers, homelessness reviews

Local authorities should produce a 'Statement of Need' based on findings from the needs assessment. The statement should set out the current and future demands and should include regional needs where the needs are met by the local authority. The statement should also set out how statutory needs identified will be met through the discharge of statutory duties.

Background and National Policy Context

Welsh Government has maintained a focus on tackling homelessness in the context of the long-term impact of UK Government policy, in relation to austerity and welfare support, and other non-devolved policy areas that have an impact on homelessness such as the work of the Police and Prisons. Local authorities have a duty to prevent and relieve homelessness that has led to a strengthening of local partnership arrangements. The guiding principle remains one of preventing homelessness, but where not possible, ensuring it is brief and non-repeated. There is a renewed commitment to fundamentally reform homelessness services to focus on prevention and rapid rehousing. Understanding what works, what is promising, and what isn't effective will be crucial to Welsh Government in delivering its policy goals.

Housing First was a change of direction for Government, in response to emerging evidence of its efficacy. The Phase 2 response during the initial phases of the pandemic sought to protect homeless people through providing temporary accommodation solutions and significantly reducing street homelessness. The gradual return to 'normality' provides the opportunity to evaluate the impact and benefits of the variously funded programmes to inform the next phase of policy development with a particular focus on prevention and rapid re-housing.

There are a number of principles that underpin the Welsh Government approach to homelessness prevention, that should be enshrined across public and commissioned services:

- The earliest preventions are most effective and most cost effective and should always be the interventions of first choice.
- Tackling and preventing homelessness is a public services matter – rather than a 'housing matter'.
- All services should place the individual at the centre and work together in a trauma informed way.
- The duties in Part 2 of the Housing (Wales) Act 2014 should be the last line of defence – not the first - and all services should work to the spirit not simply the letter of the law.
- Policy, service delivery and practice should be informed and shaped in a co-productive manner and by those with lived experience.

Below is a summary of relevant legislation and policy and their intended impact:

Policy /legislation	Intended action/impact/purpose
<ul style="list-style-type: none"> • Housing (Wales) Act 2014 (Part 2) 	<ul style="list-style-type: none"> • A new strengthened duty on local authorities to take reasonable steps to prevent and relieve homelessness, with an emphasis on prevention
<ul style="list-style-type: none"> • Social Services and Wellbeing (Wales) Act 2014 (Part 6) 	<ul style="list-style-type: none"> • Strengthening arrangements for leaving care including suitable accommodation and support
<ul style="list-style-type: none"> • Well-being of Future Generations (Wales) 2015 Act 	<ul style="list-style-type: none"> • Provides a lens through which all public services policy and service planning is to be considered with an emphasis on well-being, prevention, and early intervention

<ul style="list-style-type: none"> Equality Act 2010 	<ul style="list-style-type: none"> Duty to promote equality, takes account of protected characteristics, and a new duty to consider socio-economic inequality
<ul style="list-style-type: none"> Publication of Preventing Homelessness and Promoting Independence: (Welsh Government 2016) 	<ul style="list-style-type: none"> Supporting young people with economic independence through housing advice, options, and homelessness prevention
<ul style="list-style-type: none"> Care Leaver Accommodation and Support Framework, (Barnardo's 2016) 	<ul style="list-style-type: none"> Support effective planning and provision of housing and support for young people and care leavers.
<ul style="list-style-type: none"> Development of the "When I'm Ready" (Welsh Government 2016b) programme 	<ul style="list-style-type: none"> Enabling young people in foster care to stay with their foster carers for longer;
<ul style="list-style-type: none"> Introduction of the Youth Engagement and Progression Framework (Welsh Government 2014) 	<ul style="list-style-type: none"> Reduce the number of young people who are not in education, employment, or training;
<ul style="list-style-type: none"> Establishment of the End Youth Homelessness Cymru campaign 2018 	<ul style="list-style-type: none"> Focusing on: <ul style="list-style-type: none"> ending youth homelessness within the LGBT+ community. reducing the links between educational disengagement and youth homelessness. reducing links between the care system and youth homelessness; and support for those with mental health issues.
<ul style="list-style-type: none"> An additional £10m allocated by Welsh Government for the financial year 2019-20 	<ul style="list-style-type: none"> To tackle youth homelessness.
<ul style="list-style-type: none"> Wales Centre for Public Policy (WCPP) 2018 	<ul style="list-style-type: none"> Research into the causes and prevention of youth homelessness.
<ul style="list-style-type: none"> The Welsh Government invested an additional £10m into youth homelessness prevention in 2019-20 	<ul style="list-style-type: none"> To develop new and enhance existing services
<ul style="list-style-type: none"> A WG £4.8m innovation fund, which is supporting 26 projects to deliver new and innovative housing and support approaches 2019-20 	<ul style="list-style-type: none"> Deliver new and innovative housing and support approaches for vulnerable young people at risk of becoming homeless or currently homeless
<ul style="list-style-type: none"> Evaluation of homelessness services to young people in the secure estate (Welsh Government) 2019 	<ul style="list-style-type: none"> To understand the early impacts of the legislation on those young people who are homeless or at risk of homelessness as they approach their release.
<ul style="list-style-type: none"> Various Reports from the Homelessness Action Group for the Welsh Government 2020 	<p>Summary of reports:</p> <ul style="list-style-type: none"> Maximum homelessness prevention at all stages, e.g., crisis response, more

	<p>targeted/earlier prevention for people at risk of homelessness, and a universal approach across society to tackle the root causes.</p> <ul style="list-style-type: none"> • Rapid rehousing as the default approach to quickly help people experiencing homelessness to be rehoused with all the support they need. • Investing in people to help end homelessness by funding and supporting workforces, involving people with lived experience of homelessness, and mobilising charities and volunteers more.
<ul style="list-style-type: none"> • Housing First (HF) – National Principles and Guidance for Wales 2018 	<ul style="list-style-type: none"> • Policy of quickly moving people experiencing homelessness into independent and permanent housing and then providing additional support and services as needed.
<ul style="list-style-type: none"> • Strategy for Preventing and Ending Homelessness 2019 	<ul style="list-style-type: none"> • Sets out the strategic approach the Welsh Government is taking to prevent and address homelessness in Wales
<ul style="list-style-type: none"> • Phase 2 – Planning Guidance for Homelessness and Housing Related Support Services 2020 	<ul style="list-style-type: none"> • Focus on transforming approaches to preventing homelessness whilst ensuring that everyone brought into temporary accommodation secures long term accommodation
<ul style="list-style-type: none"> • Phase 3 – Planning Guidance for Homelessness and Housing Related Support Services 2020 Move to ‘New Normal’ 	<ul style="list-style-type: none"> • Design and build resilient, sustainable services for the future.
<ul style="list-style-type: none"> • The framework of policies, approaches and plans needed to end homelessness in Wales - Report from the Homelessness Action Group for the Welsh Government 2020 	<ul style="list-style-type: none"> • What ending homelessness in Wales needs to look like from a holistic policy perspective.

Table 1: Summary of relevant legislation and policy in Wales and their intended impact:

About Rhondda Cynon Taf

Rhondda Cynon Taf (RCT) is the second largest authority in Wales with a population of 234,410 according to the 2011 census.

The County Borough covers an area of 424 square kilometres and borders Merthyr Tydfil and Caerphilly to the east, Cardiff, and the Vale of Glamorgan to the south, Bridgend and Neath Port Talbot to the west and Powys to the north. The principal towns in the area are - Aberdare, Llantrisant and Pontypridd.

Wellbeing assessment

Headlines

Rhondda Cynon Taf has an increasing older population which needs to be considered in planning the housing and support needs of the community over the next two decades. The Well-being Assessment is a duty on the Council to that informs the Well-being Plan to meet a range of wellbeing goals. There are a number of support outcomes of HSG services that align with Well-being Plan objectives ensuing that services contribute to the wellbeing objectives.

The Council has a legal duty to work together with the people of RCT, for their future well-being. This duty is set out in the Well-being of Future Generations (Wales) Act. The Act includes seven national well-being goals, which the Council have to contribute to achieving:



Figure 1 Seven National Well-being Goals of the Well-being of Future Generations (Wales) Act

The relevant findings of the Cwm Taf Well-being Assessment are summarised below:

Population:

At the recording of the 2011 census the total population of RCT was 234,410, and was comprised of:

- 50,131 people under the age of 18,
- 22,403 people between 18 and 24,
- 121,803 people aged 25 to 64 and
- 40,073 people 65 and over.

In 2011, the mean age of the population was 39.8. There were 105,269 dwellings with the population living in a total of 99,663 of these. These were made up of:

- 36,388 owner occupier's households where the property is owned outright.
- 34,422 where the household has an outstanding mortgage on the property.
- 150 households in shared ownership.
- 13,673 households live in social housing lets.
- 13,604 households live in the private rented sector.
- 1,476 households live rent free in some form of tenure.

This picture will be updated in 2022 with the new census data and Wellbeing Assessment. The RCT Housing Support Programme strategy will be refreshed after two years, allowing this new data to be incorporated into the need's assessment.

The Welsh Government estimated that 241,873 people live in RCT in June 2020¹, a decline of 459 people from the 2019 estimate. RCT's total population is predicted to grow modestly, largely as a result of migration, whilst the demographics of the population will change significantly as people aged 65+ become a larger proportion of the population. The population of the area is projected to grow to 252,418 by 2040, a growth of 4% from the 2020 estimate.

Between 2018 and 2040, population projections suggest that the number of people aged 65+ will grow from 45,994 to 57,715, a growth of 25%. Older age groups have significantly higher levels of population growth, with people aged 80+ predicted to grow by 45% at the same time, reflecting an ageing population with more complicated and intensive health and social care needs.

Area	Estimated population 2018	Projected population in 2040 based on 2018 estimate	Estimated variance in projected population	Estimated percentage variance in projected population
Rhondda Cynon Taf	240,131	252,418	+12,287	5.1%
Merthyr Tydfil	60,183	63,154	+2,971	4.9%
Bridgend	144,876	157,328	+12,452	8.6%
Cwm Taf Morgannwg	445,190	472,900	+27,710	6.2%

¹ <https://statswales.gov.wales/Catalogue/Population-and-Migration/Population/Estimates/Local-Authority/populationestimates-by-localauthority-year>

Table 1 Estimated projected population for Rhondda Cynon Taf in 2040 compared to neighboring local authorities²

Housing:

Where people live has a big influence on their well-being, with particular associations between housing and physical and mental health. In RCT a number of areas have been identified as having significant levels of housing deprivation such as Mountain Ash West and Rhydyfelin Central.

Economic assets:

- Urban regeneration in RCT gives us the opportunity to create places that attract investment and business and improve well-being. Tylorstown is a current example of a regeneration area.

Economic challenges:

- Homes are more affordable RCT than in other areas of Wales but may still be beyond the reach of young people and those on low incomes.
- Welfare reforms have badly affected communities particularly Maerdy and Penywaun
- Less prosperous areas of Wales including RCT have benefitted from investment of European funding. The withdrawal of this funding once Britain leaves the European Union will be a considerable loss.

Wellbeing Plan

From the Well-being Assessment the Cwm Taf Public Service Board created the Well-being Plan. Housing Support Grant funded services have a significant role to play in delivering a number of key objectives.

Cross-cutting Objective: Tackling loneliness & isolation

Objective: We will work in new ways to channel the undoubted strengths of our communities, including volunteering to tackle more effectively the loneliness and isolation which often exists within many of them.

To contribute to this objective HSG services work to meet outcomes such as:

Promoting Personal and Community Safety

- Feeling Safe
- Contributing to the safety and wellbeing of themselves and others

Promoting Independence and Control

- Managing accommodation
- Managing relationships
- Feeling part of the community

Promoting Progress and Control

- Managing money

² <https://statswales.gov.wales/Catalogue/Population-and-Migration/Population/Projections/Local-Authority/2018-based>

- Engaging in education/learning
- Engaged in employment/voluntary work

Thriving Communities

Objective: To promote safe, confident, strong, and thriving communities improving the wellbeing of residents and visitors and building on our community assets.

To contribute to this objective HSG services work to meet outcomes such as:

Promoting Personal and Community Safety

- Feeling Safe
- Contributing to the safety and wellbeing of themselves and others

Promoting Independence and Control

- Managing accommodation
- Managing relationships
- Feeling part of the community

Healthy People

Objective: To help people live long and healthy lives and overcome any challenges.

Steps:

To contribute to this objective HSG services work to meet outcomes such as:

Promoting Health and Wellbeing

- Physically healthy
- Mentally healthy
- Leading a healthy and active lifestyle

Deprivation

The Welsh Index of Multiple Deprivation (WIMD) is the official measure of relative deprivation

Headlines

RCT features some of the most deprived areas in Wales. However, the pattern of deprivation across RCT is uneven and is concentrated in particular areas, in large part concentrated along the Cynon Valley in communities such as Penrhiwceiber and Pen-y-waun, and along the Rhondda Valley in communities such as Tylorstown and Treherbert.

Indicators for health, income, employment and housing highlight the different pressures that people can face which can put them at higher risk of homelessness. In the health domain this includes mental health conditions, limiting long-term illness and chronic health conditions, all of which can make finding and retaining suitable affordable accommodation challenging.

for small areas in Wales. It identifies areas with the highest concentrations of several different types of deprivation including, income, health, and education. Data in the WIMD is broken down into Lower layer Super Output Areas (LSOAs) comprised of an average of 1,500 people – in Wales there are 1,909 LSOAs. This enables community level insights into overall deprivation and specific domains, such as health, which are closely linked with people's vulnerability to homelessness.

RCT features some of the most deprived areas in Wales with 26 LSOAs classed as among the 10% most deprived in Wales, and the majority of LSOAs in the local authority classed as among the 30% most deprived in Wales. This is also reflected in the overrepresentation of RCT LSOAs in the Cwm Taf Morgannwg University Health Board area.

However, the pattern of deprivation across RCT is uneven and is concentrated in particular areas. Deprivation in RCT is in large part concentrated along the Cynon Valley in communities such as Penrhiwceiber and Pen-y-waun, and along the Rhondda Valley in communities such as Tylorstown, and Treherbert. This is reflected in the table below which highlights the most deprived LSOAs in the area, including Tylorstown where WIMD indicator data states that 47% of people in the area were in income deprivation in 2016/17. In contrast, the majority of LSOAs in the south of the Local Authority are among the 50% least deprived, with deprivation at its lowest around Llantrisant and Llantwit Fardre.

Lower layer Super Output Area	WIMD 2014 rank	WIMD 2019 rank	Change in national rank between 2014 and 2019
Tylorstown 1	5	4	-2
Penrhiwceiber 1	15	6	-9
Pen-y-waun 2	9	15	+6
Rhydfelen Central / Llan 2	17	26	+9
Abercynon 2	37	33	-4

Table 3: Lower Layer Super Output Area Deprivation Rankings

Indicators for health, income, employment, and housing highlight the different pressures that people can face which can put them at higher risk of homelessness. In the health domain this includes mental health conditions, limiting long-term illness and chronic health conditions, all of which can make finding and retaining suitable affordable accommodation challenging.

Domain Construction

There are seven indicators in the health domain, weighted as follows:

- 31% GP-recorded chronic conditions (rate per 100), age-sex standardised
- 30% Limiting long-term conditions (rate per 100), age-sex standardised
- 18% Premature deaths (rate per 100,000) age-sex standardised
- 10% GP-recorded mental health conditions (rate per 100) age-sex standardised
- 4% Cancer incidence (rate per 100,000), age-sex standardised
- 4% Low birth weight (live single births less than 2.5kg, percentage)
- 3% Children aged 4-5 who are obese (percentage)

In the vast majority of cases, more deprived communities in the Rhondda and Cynon Valleys perform worse in the indicators mentioned above than communities in the south of the county. The levels of homelessness and accommodation insecurity in RCT likely parallel levels of deprivation, particularly for areas performing worse in the domains identified above.

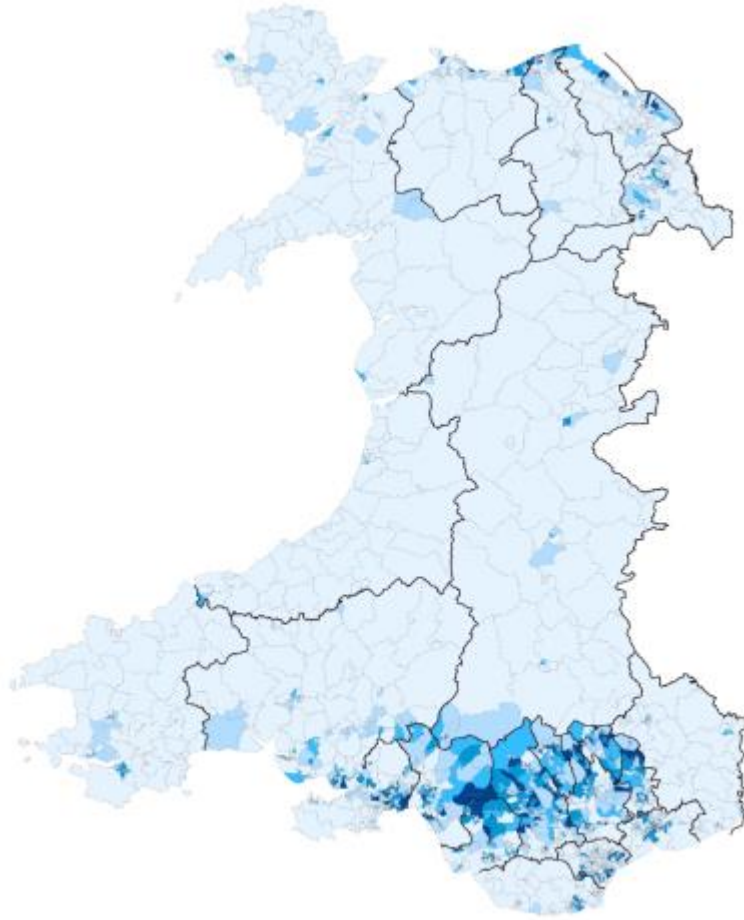


Figure 3: Map of Wales by Lower Super Output Area – health deprivation (Welsh Index of Multiple Deprivation 2019)

Homelessness in RCT

This section analyses the data for:

- National homeless trends
- The impact of COVID-19 on homelessness presentations
- Performance against each of the duties of the Housing (Wales) Act 2014

Headlines

The data shows that outcomes following presentations to the Council for both prevention and relief of homelessness are on average better than the national average and other Local Authorities in the surrounding region. These results reflect the significant improvement in outcomes following the provision of assistance identified above, suggesting that RCT was performing well-above average in the run up to the Covid-19 pandemic.

Outcomes following the triggering of the duty to help secure accommodation (section 73) were significantly better in RCT than the Welsh average. This may be linked with the proportion of households assessed as homeless and owed a duty to help secure in RCT being among some of the lowest in Wales.

Homelessness statistics and housing data have been primarily sourced from the LA's own assistance data and its quarterly WHO12 returns. Data from 2021 covers the period from January to August, unless otherwise stated, and therefore any trends and interpretations from the data will not necessarily account for changes that occur after August.

The data shows that the majority of households that are either homeless or threatened with homelessness in RCT are single person households, of which the majority are male.



Welsh Government Homelessness Duty Flowchart

National trends in Wales

This section summarises the national deprivation data for RCT.

The following trends are identified based on quarterly data returns from Local Authorities to the Welsh Government (WHO12) covering 2019/20, published online by the Welsh Government. The data shows that outcomes following presentations to RCT for both prevention and relief are on average better than the national average and other Local Authorities in the surrounding region. These results reflect the significant improvement in outcomes following the provision of assistance identified above, suggesting that RCT was performing well-above average in the run up to the Covid-19 pandemic.³

In the 2019/20 period, RCT performed marginally better than the national average for homeless prevention, with around 73% of cases being successfully prevented in RCT compared to 67% across Wales as a whole. A similar proportion of cases, in RCT and across Wales, which were not prevented involved the following outcome categories: assistance refused, non-co-operation (reporting required wording), application withdrawn, loss of contact or other reasons.

**Households threatened with homelessness within 56 days,
rate per 10,000 households, April 2019 to March 2020**

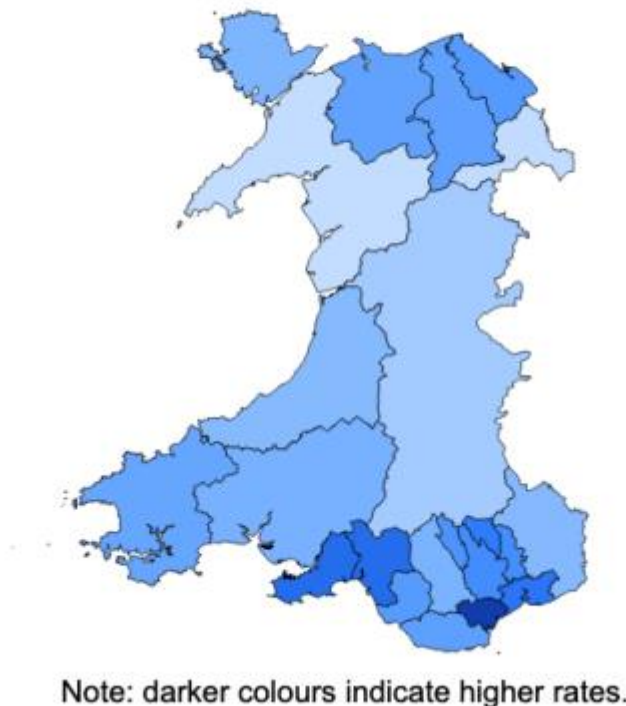


Figure 4: Households threatened with homelessness within 56 days, rate per 10,000 households, April 2019 to March 2020.

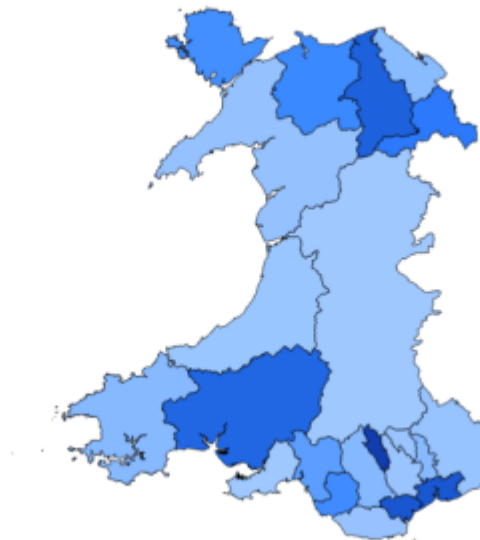
Outcomes following the triggering of the duty to help secure accommodation (section 73) were significantly better in RCT than the Welsh average. In the 2019/20 period, of the 12,399 outcomes

³<https://statswales.gov.wales/Catalogue/Housing/Homelessness/householdsforwhichassistancehasbeenprovided-by-outcome-householdtype>

of the duty to help secure across Wales, 41% resulted in successful relief – in RCT this is reported as 69%.

This may be linked with the proportion of households assessed as homeless and owed a duty to help secure in RCT being among some of the lowest in Wales at 68.28 per 10,000 households. In comparison, the lowest rate in Wales is in Ceredigion at 58.03 per 10,000 households and the highest rate in Wales is in the neighbouring LA, Merthyr Tydfil, at 166.47 per 10,000 households.

**Households assessed as homeless and owed a duty to help secure accommodation,
rate per 10,000 households, April 2019 to March 2020**

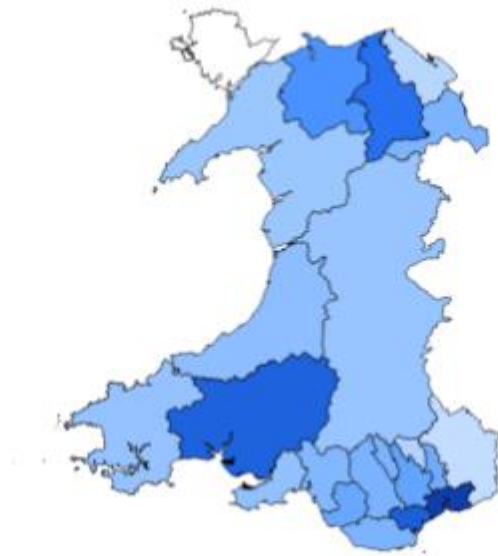


Note: darker colours indicate higher rates.

Figure 5: Households assessed as homeless and owed a duty to help secure accommodation, rate per 10,000 households, April 2019 to March 2020.

Outcomes from the final duty are marginally better in RCT with 81% positively discharged, compared to the Welsh average of 78%. A similar proportion, of around 20%, in RCT and Wales as a whole are not discharged positively due to the following WHO12 outcome categories: assistance refused, non-co-operation (reporting required wording), application withdrawn, loss of contact or other reasons.

**Households assessed as unintentionally homeless and in priority need,
rate per 10,000 households, April 2019 to March 2020**



Note: darker colours indicate higher rates.

Figure 6: Households assessed as unintentionally homeless and in priority need, rate per 10,000 households, April 2019 to March 2020.

Impact of COVID-19

Headlines

COVID-19 has had a huge impact on the numbers of vulnerable people now owed a homelessness duty, and the range of complex needs that need support. It has led to a rapid increase in the numbers of people in temporary accommodation and reduction in availability in the Private Rented Sector. The pandemic has also highlighted their need for system partners such as Housing, Health and Probation to work better together and improve their data sharing.

The COVID-19 pandemic resulted in a considerable amount of people being placed into temporary accommodation since March 2020. The situation is unchanged with regards to the change in the Homeless Legislation meaning that all who present are in 'priority need' (also known as the 'All In' policy).

Most of the individuals that typically end up in emergency accommodation have multiple needs and need a wide range of services to assist them.

Information provided to Communities4Change Wales⁴ identified the impact of COVID-19 had reflected and exacerbated pre-existing inequalities⁵; its impacts on the population of RCT have been stark, given above average rates of unemployment, long-term conditions, disability, and financial insecurity. Housing, particularly overcrowding, has been identified as a key determinant in the transmission of the virus, as well as outcomes for those infected.⁶

A number of challenges:

- Supporting individuals with homelessness assistance remains an ongoing challenge; Rhondda Cynon Taf saw significant increases in homelessness applications
- A large proportion of Individuals presenting as homeless have a range of complex physical and mental health needs, (including substance misuse) which can be barrier to sustaining a tenancy in the long term.
- Poor housing has been cited by repeatedly in needs assessments as a factor driving re-admissions and presentations to mental health services with tenancy breakdown and inappropriate housing allocation reported as key factors.⁷
- There is an issue of visibility: partners on both sides of the housing and health arena work in relative isolation from one another and it is difficult to gain a sense of the range and breadth of activity taking place aimed at reducing inequalities
- Furthermore, despite several detailed needs assessments and close collaborations between local partners there remains a consensus that existing systems for information sharing

⁴ Communities4Change Wales Application September 2021

⁵ Bambra C, Riordan R, Ford J, Matthews F. The COVID-19 pandemic and health inequalities. Journal of Epidemiology & Community Health 2020; 74:964-968. Available from: <https://jech.bmj.com/content/74/11/964> [Accessed 7 Sept 2021].

⁶ Abbs I. Marshall L. 2020. Emerging evidence on COVID-19's impact on health and health inequalities linked to housing. Available from: <https://www.health.org.uk/news-and-comment/blogs/emerging-evidence-on-covid-19s-impact-on-health-and-health-inequalities> [Accessed 7 Sept 2021].

⁷ Cwm Taf Public Services Board. 2018. Cwm Taf Population Assessment. Available from: <http://www.ourcwmtaf.wales/cwm-taf-population-assessment> [Accessed 7 Sept 2021].

between agencies are poor and fragmented, hindering service delivery and planning.⁷ While each agency holds significant data, access to and sharing of such intelligence is inconsistent, making it challenging to translate such data into collective action.

Engagement with staff in the Council and stakeholders highlighted how the pandemic has completely changed the landscape:

- The rapid increase in numbers of people in temporary accommodation.
- Higher levels of needs for people being referred to supported accommodation and floating support.
- Increased incidence of co-occurring needs such as mental health and substance misuse.
- Challenges in moving people on from temporary and supported accommodation particularly impacted by the reduced access to the private rented sector.
- Whilst there were examples of good joint working with system partners such as Health and Probation in initial lockdowns, this has reduced, and stakeholders described significant challenges with clients meeting eligibility for Health input in mental health and substance misuse. This has meant HSG and homelessness services having to manage those needs.
- Stakeholders commented on the challenge of receiving data from system partners such as Health, which restricts the effectiveness of support and future planning.

Outcomes for each Homelessness Duty

This section summarises the performance of the Council against the various duties of the Housing (Wales) Act 2014:

S66 – Section 66, duty to prevent

S73 – Section 73, duty to help secure accommodation (for 56 days)

S75 – Section 75, final duty

Headlines:

Single person households have consistently accounted for the majority of cases where the Council have provided assistance to those who are homeless or threatened with homelessness.

This is also reflected in placements made into temporary accommodation between April 2020 and 2021. Single male applicants account for more placements into TA than all other households combined, with single female applicants accounting for the second highest number of placements into TA.

Single male applicants also account for the largest proportion of applications made by those who have been homeless within the last two years. The proportion of single male applicants has risen from 46% of the total in 2017 to 58% in 2021.

Data shows that where assistance is provided outcomes are largely positive for duty to prevent, help to secure and final duty. There has been significant improvement in outcomes following the provision of assistance since 2015, for both prevention and relief. However, the impact of the Covid-19 pandemic, particularly on the number of people presenting with more complex needs, has not been fully realised and is likely not reflected strongly in the data.

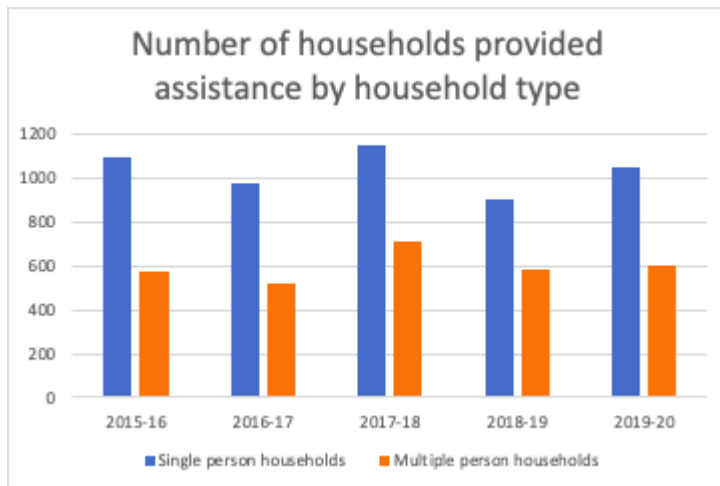
Social housing accounts for the majority of housing allocations where there was a duty.

40% of the people placed in temporary accommodation had been placed multiple times, leading to a total of 852 placements in 2020/2021 (as of the end of March), representing an increase of nearly 257 placements year-on-year, from 595 in 2019/20.

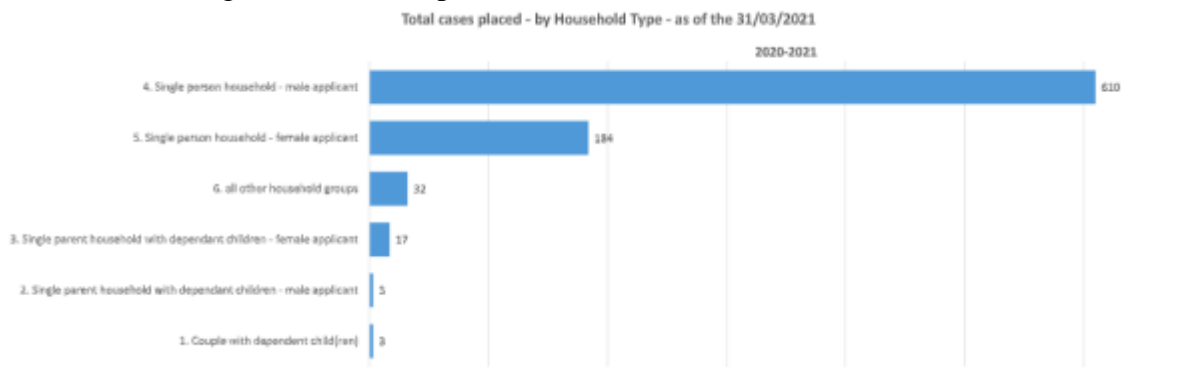
In 2019/20 the total number of people receiving prevention assistance reduced. This likely reflects the initial effects of the Covid-19 pandemic, specifically the reduction in the cases of households threatened with homelessness (in the next 56 days).

Household type

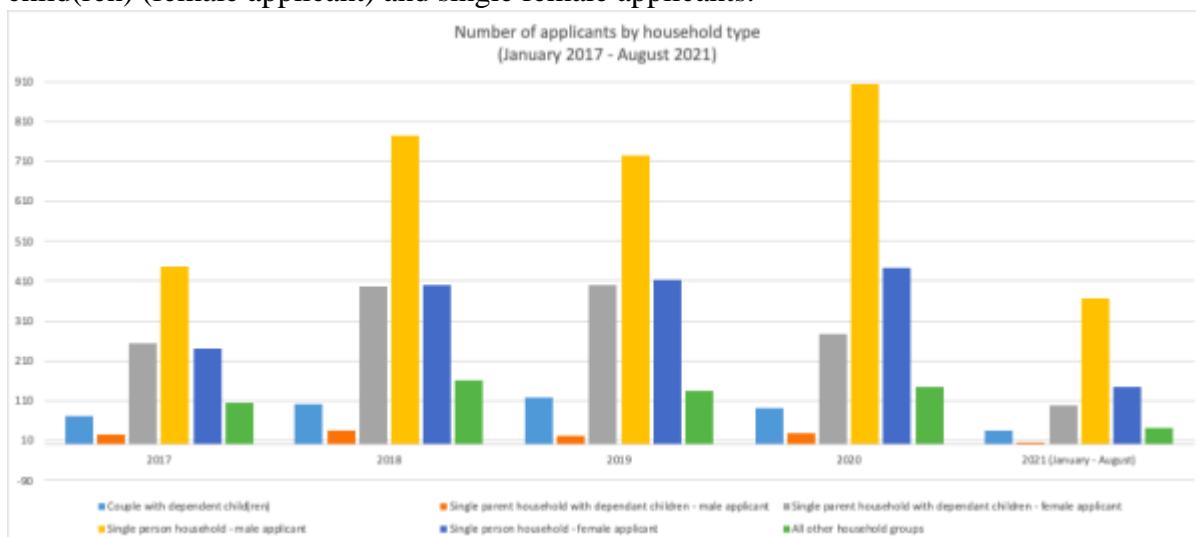
Single person households have consistently accounted for the majority of cases where RCT have provided assistance to those who are homeless or threatened with homelessness between 2015 and 2020. The total number and proportion of multiple person households receiving assistance from the Council has remained consistent, accounting for an average of 37% of total households provided assistance between 2015 and 2020.



The high proportion of single person households is also reflected in placements made into temporary accommodation between April 2020 and 2021. Single male applicants account for more placements into TA than all other households combined, with single female applicants accounting for the second highest number of placements into TA.



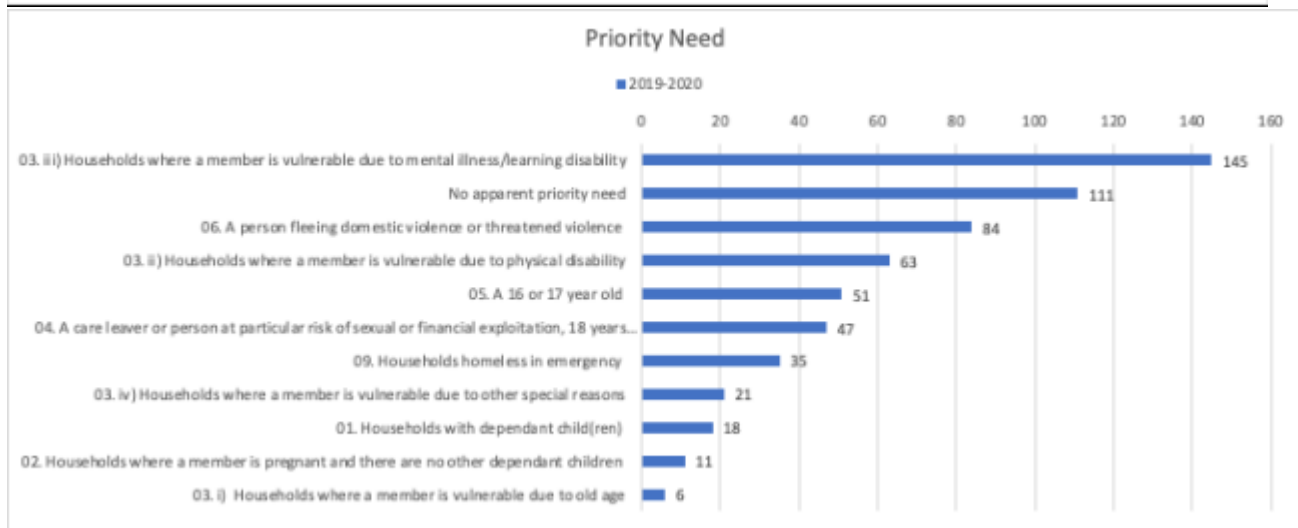
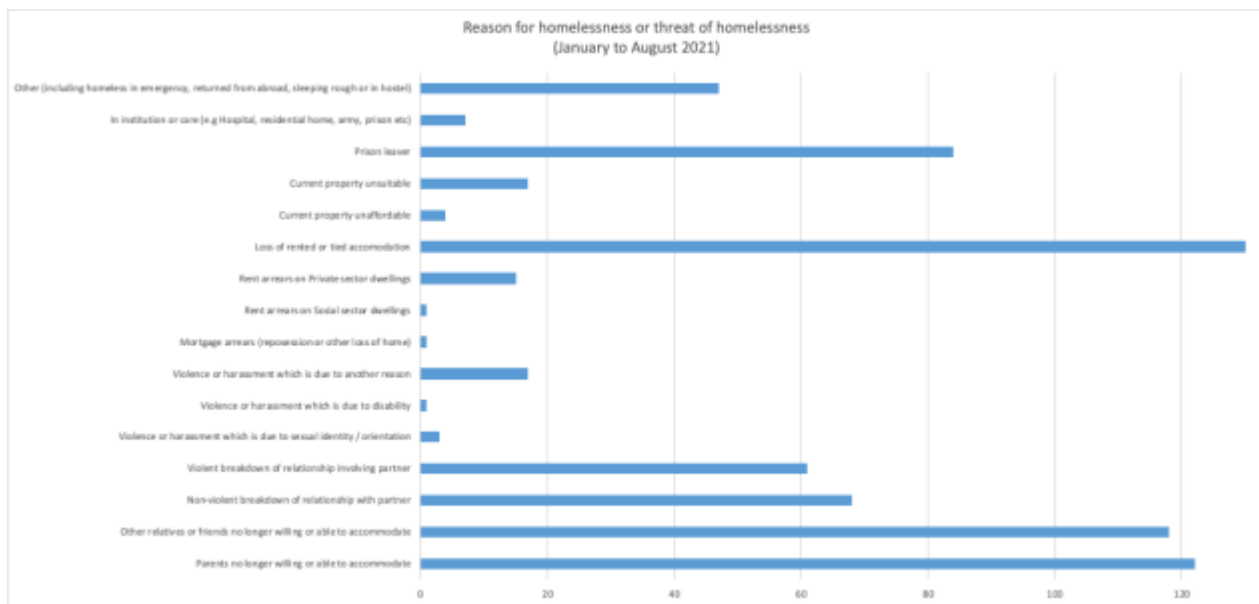
Single male applicants have consistently formed the largest group of applicants, accounting for around half of the total number of applications in 2020 and 2021, with the pandemic appearing to exacerbate the trend. The next largest groups are single parent household with dependant child(ren) (female applicant) and single female applicants.



Single male applicants also account for the largest proportion of applications made by those who have been homeless within the last two years. The proportion of single male applicants has risen from 46% of the total in 2017 to 58% in 2021 (up to August). In the same time frame single female have reduced from 36% of the total in 2017 to 25% in 2021 (up to August).

Table: Applicants who have been homeless in the last two years, by household type

Household type	2017	2018	2019	2020	2021 (January to August)
Couple with dependent child(ren)	0	1	0	0	1
Single parent household with dependent children - male applicant	0	1	1	1	0
Single parent household with dependent children - female applicant	2	5	6	2	0
Single person household - male applicant	5	11	10	12	14
Single person household - female applicant	4	5	7	8	6
All other household groups	0	2	1	7	3
Annual total	11	25	25	30	24



Outcomes from Presentations

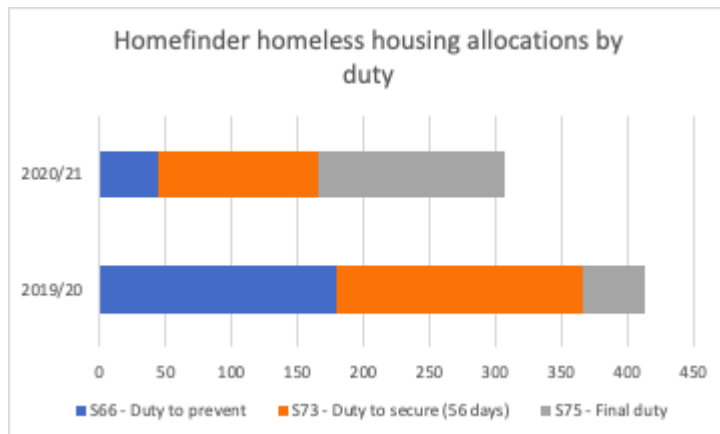
Data shows that where assistance is provided outcomes are largely positive, for duty to prevent, help to secure and final duty. There has been significant improvement in outcomes following the provision of assistance since 2015, for both prevention and relief. However, the impact of the Covid-19 pandemic, particularly on the number of people presenting with more complex needs, has not been fully realised and is likely not reflected strongly in the data below.

Housing Allocations

The total number of housing allocations dropped between 2019/20 and 2020/21 from 413 to 317 allocations. However, the number and proportion of applicants subject to final duty being allocated housing rose significantly. The number of applicants allocated housing subject to final duty account for nearly half of the total allocations in 2020/21, having previously accounted for a tenth of total allocations in 2019/21.

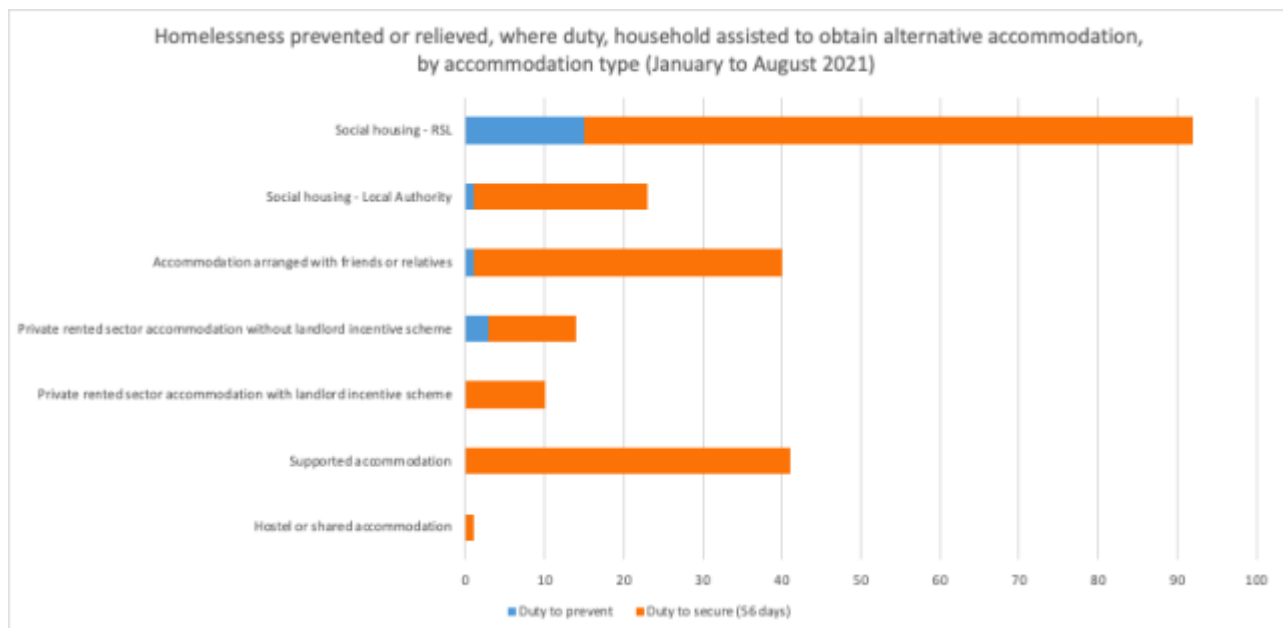
The decline in the number of homelessness housing allocations is largely due to a sharp drop in the number of applicants subject to a duty to prevent, which reduced by 75% between 2019/20 and

2020/21. Both the number and proportion of applicants subject to a duty to secure (56 days) also declined year on year, although to a lesser extent, remaining the second largest group by duty.



Social housing accounts for the majority of housing allocations (where duty), with Registered Social Landlords providing 92 units of accommodation between January and August 2021, and the Local Authority directly providing 23 units. Beyond social housing, accommodation with friends and relatives and supported accommodation are two other likely outcomes, with around 10% housed in private rental sector accommodation.

In the first half of 2021 only three cases of homelessness were prevented with the household able to remain in existing home, accounting for fewer than 1% of cases. This is likely due to a combination of factors, including the eviction ban which had been in place until the start of July 2021, the uplift to welfare and potentially fewer cases of mediation with people less likely to kick out family members or close relations during the ongoing COVID-19 pandemic.

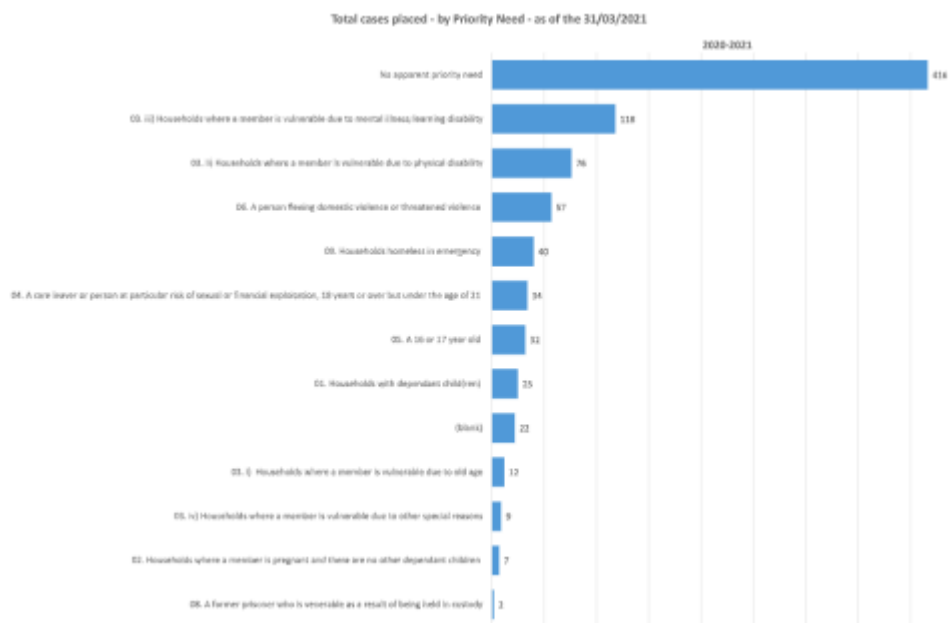


Temporary Accommodation

524 individuals, families and groups have been placed in temporary accommodation in 2020/2021 (as of the end of March). 40% of the 524 were placed in temporary accommodation multiple

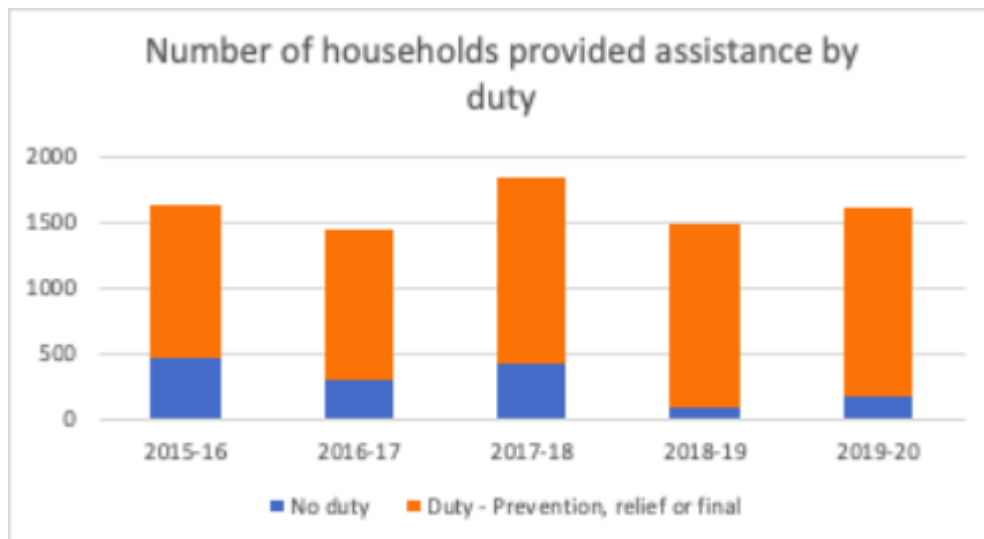
times, leading to a total of 852 placements in 2020/2021 (as of the end of March). 852 placements represent an increase of nearly 257 placements year-on-year, from 595 in 2019/20.

Nearly half of all cases were identified as no apparent priority need. Households containing a vulnerable member due to mental illness/learning disability represent the second largest group and physical disability represent the third largest group.



No duty

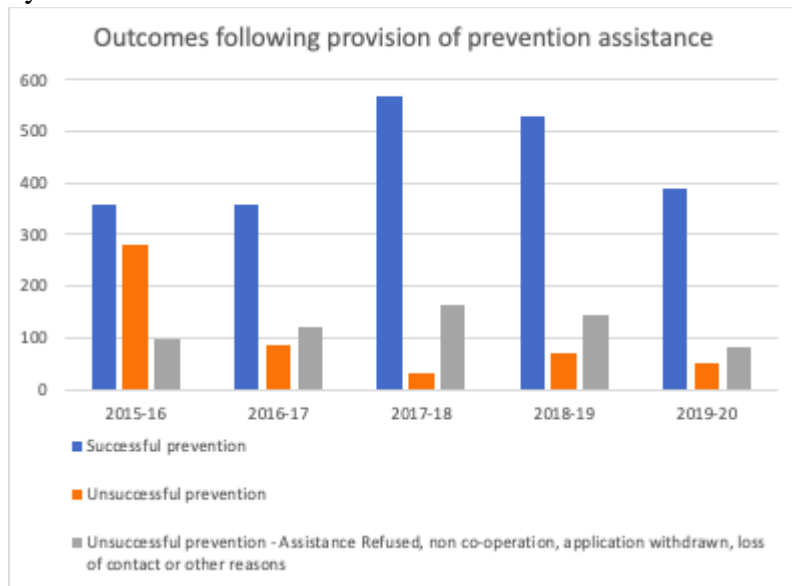
The number of households provided assistance by RCT with an eventual outcome of no duty has declined over the past five years, both in number and as a proportion of the total, falling from 456 households in 2015/16 to 174 in 2019/20.



Outcomes following provision of prevention assistance

The total number of successful preventions of homelessness following the triggering of the duty to prevent (S.66) has, despite undulating, risen between 2015 and 2020. Unsuccessful preventions

where the following has not occurred: assistance refused, non-co-operation, application withdrawn, loss of contact or other reasons, have significantly dropped. The number and proportion of households receiving prevention assistance and resulting in homelessness dropped by more than half between 2015/16 and 2016/17 and have remained consistently low since then.

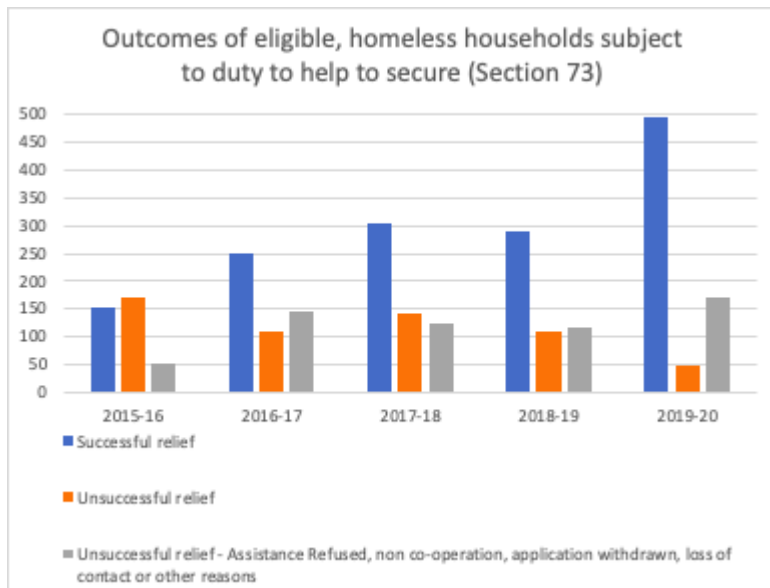


In 2019/20 the total number of people receiving prevention assistance reduced. This likely reflects the initial effects of the Covid-19 pandemic, specifically the reduction in the cases of households threatened with homelessness (in the next 56 days).

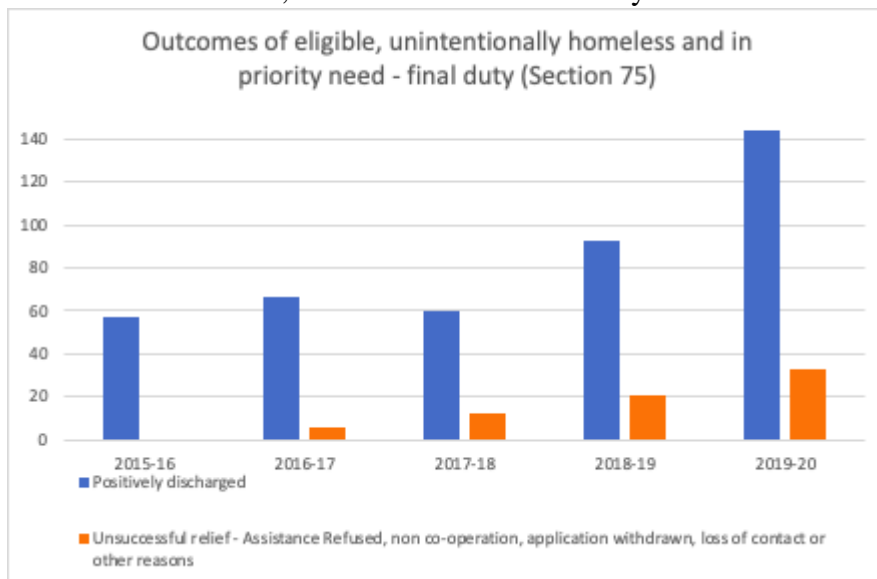
Outcomes following triggering of duty to help to secure

Successful relief has become by far the most likely outcome following the triggering of the duty to help to secure accommodation.

Outcomes following RCT's provision of assistance at this stage have improved dramatically since 2015/16 when unsuccessful relief accounted for more outcomes than successful relief. Indeed, in 2019/20 there were ten times more households receiving assistance and resulting in successful relief than unsuccessful relief, following relief duty.



Outcomes from final duty follow a similar pattern with a growing number of households being positively discharged from final duty. However, the proportion of eligible households, unintentionally homeless and in priority need resulting in unsuccessful relief, have also grown, albeit at a slower rate, and now account for nearly a fifth of all outcomes of final duty.



Accommodation

This section reviews the data on availability of accommodation, specifically:

- Current allocation demand
- Temporary Accommodation
- Private Rented Sector
- Planning and new building

Allocations

Headlines

One bedroom housing is the highest need across all bands in RCT.

91.25% of applicants are assessed as having a low or no housing need

Meeting the needs of urgent housing or adaptations for people with a physical disability is a significant challenge. Although some suitable temporary accommodation is in place, frequently the Council do not have sufficient time or information to meet needs quickly. Better data sharing and joint working with Health is needed.

Placements in Temporary Accommodation have risen in line with the increase in homelessness applications, with people aged 16-25 being the largest client group accommodated.

Since the pandemic and the increase in house values in RCT, many private landlords now no longer want to work with LA referred clients, preferring to find private tenants.

The Council have secured funding from Welsh Government to set up the Social Lettings Agency. This is improving access to the private rented sector but it's impact is slower than was hoped because of the current challenges engaging private landlords.

The most recent Local Housing Market Assessment (2017) identified that there is a wide disparity in affordability of housing between the most and least deprived areas of the borough.

A significant percentage of the population rely on the private rented sector for accommodation, and some areas have seen a significant increase in the numbers of people in private rented accommodation.

The availability of social housing varies widely across the borough.

Across all sectors there is a significant lack of single person and one bedroom accommodation.

As it is in the process of being reviewed, the most recent Local Development Plan (LDP) (2011-2021) was analysed. The plan identified sites to provide 5000-5450 new homes.

The Council uses an online system called Homefinder which allows residents to register for housing and view all the properties that are available to rent from housing associations with homes in RCT.

As of 12th October 2021, there were 4669 applicants registered for rehousing in RCT, below are the current applications broken down by band and by size of property need.

Also below are the number of applicants registered with Homefinder who have advised that they need adaptations to their new property.

Bands:

Table 2 description of band categories for Homefinder RCT

BAND A	<ul style="list-style-type: none"> • Urgent Housing Need • These are time limited cases to be reviewed every 3 months • Local connection criteria will apply except for MAPPA and Homelessness Cases
BAND B	<ul style="list-style-type: none"> ○ High Housing Need ○ Applicants awarded Band A but with no local connection ○ All Homeless Priority Need Regardless of Local Connection
BAND C	<ul style="list-style-type: none"> • Low Housing Need • Applicants awarded Band B but with no local connection
BAND D	<ul style="list-style-type: none"> ○ No Housing Need ○ Applicants awarded Band C but with no local connection ○ (Except Homelessness)

Current number of applicants registered with Homefinder

As can be seen in the table below, only 8.75% of applicants have been assessed as Band A or Band B leaving 91.25% of applicants assessed as having a low or no housing need.

Table 3 Number of applicants registered with Homefinder as of 12 October 2021

Band A	161
Band B	248
Band C	1641
Band D	2619
	4669

Applications registered by bedroom size and Band

	Total	Band A	Band B	Band C	Band D
1 bedroom	2232	114	105	840	1321
2 bedroom	911	29	71	420	911
3 bedroom	677	16	38	259	364
4 bedroom	155	2	17	115	21
5 bedroom	21	0	12	7	2
6 bedroom	5	0	5	0	0

As can be seen in the table above, the need for 1 bedroom accommodation is the largest area of need across all bands.

Number of applicants registered with Homefinder who require adaptations

	Total	1 bedroom	2 bedroom	3 bedroom	4 bedroom	5 bedroom	6 bedroom	Band A	Band B	Band C	Band D
Level 1	12	5	3	4	0	0	0	3	0	3	6
Level 1 & 2	89	40	18	23	7	1	0	27	3	36	23
Level 2	659	472	120	44	20	2	1	19	12	294	334
Total	760	517	141	71	27	3	1	49	15	333	363

Although the number of applicants requiring adaptations is relatively low compared to the overall figures, stakeholder feedback raised the issue of referrals to the Council's homelessness team for urgent rehousing of those with significant changes in the physical needs.

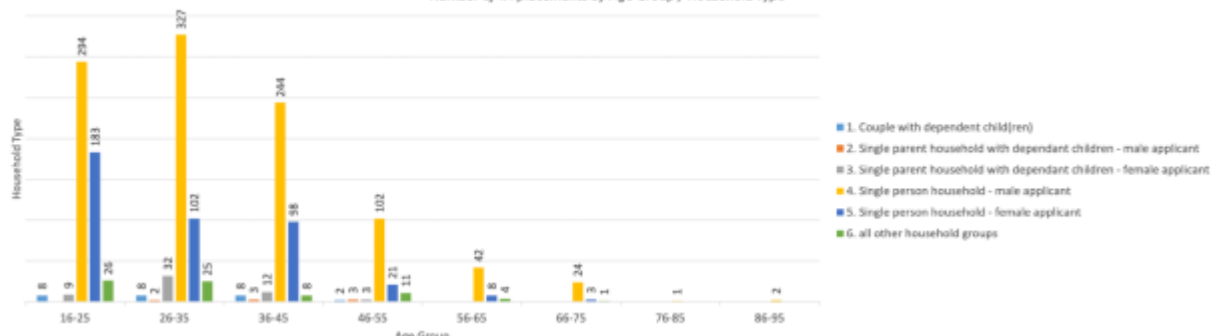
People with physical difficulties apply for rehousing from hospital often with very short timescales. The Council need more data and notice at an earlier stage. There is a need to find short term solutions whilst move on is adapted or built. Two Integrated Care Fund (ICF) funded properties are in place for this purpose

The Council are also looking at the use of Extra Care Respite. Going forward these needs corporate pathway signed up by all partners.

Use of temporary accommodation

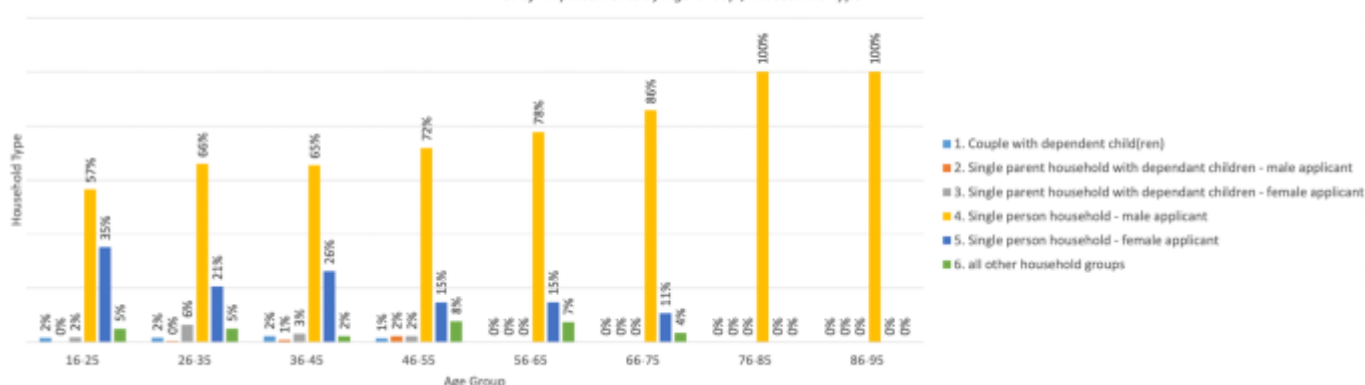
TA placements broadly reflect similar patterns to homelessness presentations in RCT with single person households, and in particular single male, composing the majority of TA placements. 16-25 is the age group with the largest number of placements, with 520 placements between 2018–2021. This decreases to 496 placements in the 26-35 age group with all household types decreasing, apart from single male and single female with dependent children which both increase. From age group 36-45 placements of all household types decrease consistently with age and by age group 56-65 there are fewer than 55 total placements.

2018 - 2021
Number of TA placements by Age Group / Household Type



Single male households are the largest household type across all age groups, increasing over time from 57% of placements aged 16-25 to 100% of placements aged 76+. Single female households are the second largest group and decrease in both number and proportion of total placements by age group: composing 35% of all placements aged 16-25 to 15% by the 46-55 age group.

2018 - 2021
% of TA placements by Age Group / Household Type



Private rented sector

Since the pandemic and the increase in house values in RCT, many private landlords now no longer want to work with LA referred clients, preferring to find private tenants.

Landlords and Letting Agents have raised several concerns:

- Local Housing Allowance (LHA) rates being lower than the market rents that are being advertised:
 - 1 beds are on average £15 per week over LHA rates,
 - 2 beds are average £30-£50 per week over LHA,
 - 3 beds are average £70-£120 over LHA rates,
 - 4 beds are average over £100-£450 over LHA rates depending on area (TAFF for the higher rental).
- “The Public Health Teams inspections are creating more work, and some of the recommendations for works to be completed are unrealistic”. When explored into this further, some have referenced to security windows being requested, whereby the property is a single person unit, and no children are being accommodated.

- Some landlords and letting agents have waiting lists of around 30-40 clients waiting for properties. It has also been advised that some prospective tenants are in bidding wars on who can pay the most up front to secure a property. One recent case was the tenant who secured the property paid 6 months up front rent.
- Reluctance to work with ex-offenders when private renters are seen as having fewer issues.
- “Why would we work with the Local Authority when all we have been promised previously has been brushed under the carpet, we are consistently being told we will get arrears paid but nothing is ever paid”?
- Some landlords have referenced that they are struggling to get 1 bed properties available at the moment for rent. Distinct ack of 1 bed accommodations being made available also for sale.
- Landlords are advised people will be given support, however if this doesn’t happen for any reason, it is seen as the fault of the LA and then suffer the consequence of reluctance to accept more tenants with support needs.
- When asking if could negotiate lower rent, the response is that they don’t need to as enough applicants who will pay the rental price as advertised
- The incentive of paying bond and rent in advance for a month is no longer an incentive – Landlords/Agents have applicants offering to pay 6 months’ rent in advance on properties
- The advantage we had of being able to organise housing benefit to pay straight away has gone due to universal credit. RCT are no longer able to guarantee the direct payment and Landlords are concerned about the delays in receiving first payments from universal credit housing costs
- Working guarantors are being asked for consistently now, RCT caseloads do not necessarily have these available
- The difference between the LHA rate and rental prices have increased significantly which is reducing RCT options in terms of finding properties

Social Letting Agency

Welsh Government funding was secured by the Council to establish the Social Letting Agency in RCT in the early part of 2020/21. This provides affordable housing in the private rented sector. This has included the setup of a new team comprising of a Team Leader and two Housing Officers.

The Team are co-located with the Housing Solution’s Team who work closely together to help identify housing need and where possible to use the private rented sector to prevent homelessness or discharge legal duty.

Despite the team developing positive relationships with several private landlords in RCT. Their participation in the Social Letting Agency has been slower than anticipated. As above, this is attributable to the current housing market, which is extremely buoyant and has meant private landlords do not need to work with the Council to identify their tenants. This is compounded by the scheme needing to work with rents set by the Local Housing Allowance (LHA) which has also impacted on the development of this new service led by the high demand for private rented accommodation and landlords being able to charge market rents. Some landlord feedback has also raised the minimum property standards as an issue, which despite the grant and loan offer to help with the works, can put some landlords off working with the Council particularly if they are not residing locally.

The national rollout of the SLA planned by Welsh Government later this year to improve the offer to private sector landlords will provide additional and enhanced funding opportunities to hopefully improve take up of the scheme.

Planning and building

As it is currently being reviewed, the most recent Local Housing Market Assessment (LHMA) is for the period 2017 to 2022/23, hence the data therein is from 2016. Nevertheless, it gives useful insights.

Home ownership

LHMA 2017-2022/23 revealed stark differences in housing market buoyancy across the County Borough; with demand in Taf being relatively higher than across the remainder of the locality. Throughout 2016/17, the average price paid for residential properties in RCT was £114,000, ranging from £50,000 in Tylorstown to £210,000 in Pontyclun. with average prices paid for properties in Rhondda and Cynon typically achieving 60% and 40% of those in Taf, respectively. Whilst average prices paid in Rhondda and Cynon had not yet reached the 2007/08 peak hitherto, Taf prices once again peaked in 2014/15 and had surpassed 2007/08 values. The 2016/17 average for Taf as a whole (£154,000) was the highest ever recorded at that point. There are nonetheless several ‘hot spots’ in both the Rhondda Valley (such as Porth and Treorchy) and the Cynon Valley (such as Aberdare and Cwmbach), where properties fetch slightly higher prices than in the surrounding areas. However, Taf prices were rapidly ascending, fueled significantly by the Help to Buy Wales Scheme, which has led to many first-time buyers purchasing larger property types right up to their margins of affordability.

A related issue was the variance in household income across RCT and the affordability of housing in different areas. According to the Office for National Statistics, typical gross annual household income in RCT is £30,160, varying from £47,320 in Llantwit Fardre to £23,920 in Treherbert. There are undoubtedly spatial linkages between higher income levels and higher house prices, with a distinct cluster of higher household incomes found in the south of Taf. However, house price to income ratios are also far greater across Taf, rendering affordability more of a significant issue in many parts of this vicinity

Private Rented Sector

Correspondingly, the number of households renting in the private sector doubled from 2001 to 2011, meaning 15% of households resided within the sector in 2011. The majority of this growth occurred in the south of County Borough, with localities such as Talbot Green and Church Village witnessing nearly 300% growth since 2001. However, the historically large private rental markets in the centre of the Rhondda and Cynon Valleys still accommodate the greatest number of households renting privately overall. Fundamentally, the local private rental market is dominated by three-bedroom houses in almost every area and there is a distinct lack of smaller properties

Social Rented Sector

Unlike the private rented sector, the social rented sector hasn’t changed considerably in net size over the last decade. There are nearly 15,000 social rented homes within the locality; just over a thousand of these properties being sheltered accommodation units.

As in the private rented sector, there are more three-bedroom houses than any other unit, accounting for 40% of the stock, although stock levels are certainly not uniform across the locality. Areas such as Rhydyfelin (7%) and Aberdare West/Llwydcoed (7%) have a high proportion of stock, whereas other areas such as Rhigos (0.20%), Llantwit Fardre (0.23%) and Pontypridd Town (0.28%) have very minor levels of existing social rented provision. There are also lower proportions of smaller one- bedroom units for social rent across RCT.

Conclusions

There is a wide disparity in affordability of housing between the most and least deprived areas of the borough.

A significant percentage of the population rely on the private rented sector for accommodation, and some areas have seen a significant increase in the numbers of people in private rented accommodation.

The availability of social housing varies widely across the borough.

Across all sectors there is a significant lack of single person and one bedroom accommodation.

The Planning and Compulsory Purchase Act 2004 requires that Local Authorities prepare a Local Development Plan (LDP) for the Local Authority area. The document provides the development strategy and policy framework for the specified plan period. The LDP was being updated at the time of this assessment so the current version for 2011-2021 was reviewed.⁸

The plan identified sites to provide 5000-5450 new homes:

1. Former Fernhill Colliery Site, Blaenrhondda 350 – 400
2. Former Phurnacite Plant Site, Abercwmboi 500
3. Land at Robertstown Strategic Site, Aberdare 500 – 600
4. Land South of Hirwaun 400
5. Former Cwm Colliery and Coking Works, Tyn-y-Nant Pontypridd 800 – 950
6. Mwyndy / Talbot Green Area 500
7. Former OCC Site Llanilid, Llanharan 1950 – 210

⁸ RCT Local Development Plan up to 2021 March 2011

Housing Support Grant Services

This section summarises how HSG funded services are provided by the Council.
The Housing Support Grant typically funds support activities via three types of services:

Supported Accommodation

There are 3 levels of supported accommodation:

High – 24/7 supported accommodation

Med – 9/5 flexible support including evenings/weekends

Low – Dispersed units, so these would resemble clients living in own accommodation with floating support. This is in the category of low- level supported accommodation.

Floating Support

The Locality Based Floating Support service was implemented from April 2019. Support is available to anyone in Rhondda Cynon Taf and is provided by three support providers, each one responsible for one locality.

The new locality-based model operates a multiple needs service. This change has allowed service users to be supported regardless of their lead need and has taken away the need for waiting lists.

Each provider operates a triage service based on presenting level of support need i.e., intervention and prevention, housing related support and low-level ongoing support in which one support worker can assist the service user at all levels. Each provider assists with all aspects of housing related support.

The referral comes into the Single Point of Access (SPA), the application is processed based on area, the HSG team are notified of a vacancy by the support provider, the referral is assessed with the provider determining support needs and service is provided based on presenting need. Throughout support, providers will refer service users to appropriate agencies if required. The SPA does not process referrals for Learning Disability, Physical Disability or Mental health specialist placements with the Council's Adult Social Care Department. It also does not process referrals for Supported Lodgings for Young People. Each of these is dealt with by a bespoke referrals panel.

The locality based floating support service model is delivered in 3 stages:

Stage 1 – Early intervention and prevention (Financial assessment / Agency referral)

At stage 1, support can be up to 3 months. There should be immediate action taken to support individuals with their support needs, including specialist benefit advice, financial inclusion support, and debt management prevented a spiral into a worsening situation.

Stage 2 - Ongoing support up to 6 months

Individuals can move from stage 1 to stage 2 for up to an additional 3 months where the support worker will continue to support them and then end support if all needs are met.

Stage 3 – Ongoing low-level support

Individuals can move to stage 3 if there is ongoing low-level support required, such as completion of forms. Support can continue for as long as needed subject to annual review.

Short Term Prison Project – This is a recently funded project which in partnership with Probation will provide support to our repeat offenders.

More detail on these three types of service can be found in Appendix 1.

Referrals for Housing Support Grant Funded Services

This section summarises the referrals for supported accommodation and floating support

The RCT Supporting People Team operates a Single point of Access for referrals for supported accommodation and floating support services. This data is used to inform and assist the RCT Supporting People Planning Group and Cwm Taf Regional Collaborative Committee to highlight the most prevalent lead need categories to support the identification of priority areas for the Housing Support Grant Strategic Plan 2020 locally.

It is to be noted that a high proportion of people present with multiple needs and this data is also recorded, however the following data is based on lead need only.

Lead Need.	2018/2019	2019/2020	2020/21
Mental Health Problems	838	1055	738
Homeless or Needs to Prevent Homelessness	215	334	431
Older Person (55+)	526	330	314
Physical Disability	125	159	86
Domestic Abuse	133	142	124
Vulnerable Family	42	102	148
Substance Misuse (Alcohol 52 – Drugs 32)	114	90	28
Young Vulnerable Individual (16-24)	98	81	84
Vulnerable Single Parent/Expectant Mother	48	75	88
Learning Disability/Difficulties	71	74	72
Single People 25-54 With Support Needs Not Included Elsewhere in This List	32	42	80
Chronic Illness	50	34	37
Former Offender	33	34	42
Brain Injury	11	20	1
People With Developmental Disorders. i.e., Autism	9	19	12
Young & Vulnerable Care Leaver	31	17	12
Other	10	17	23
Sensory Impairment	12	14	14
Dual Diagnoses	2	4	0
Refugee	0	4	0
Former Armed Service Personnel with Support Needs	1	0	0
TOTAL	2419	2669	2378

Table 8: referrals for supported accommodation and floating support 2018-2021

* The above figures do not include those being supported within existing Learning Disability schemes or those that have direct referrals to emergency temporary accommodation or a Refuge.

After being mostly unchanged for a number of years, referrals increased significantly in 2019/20 for a number of needs:

- Mental Health
- Homeless or needs to prevent Homelessness
- Older Vulnerable People
- Physical Disability
- Domestic Abuse
- Vulnerable Family

This trend continued in 2020/21 for those who were homeless or needs to prevent homelessness and vulnerable families, but for all other needs there were significantly lower referrals.

This can reasonably be attributed to the disruption of the pandemic with additional funding to respond to homelessness and the closure of schools leading to additional need for support for families.

Stakeholders raised concerns about how the pandemic has caused the need for support to be ‘saved up’ during lockdown and expect a significant increase in demand for 2021/22 and beyond.

Current HSG Services

The Table below provides a summary of the services currently in place and how these have changed over the last year.

Table 4 services currently in place and how these have changed over the last year

Project Type	Breakdown by type of need	Total number of units 21-22	Change in number of units from 20-21
Private Rented Sector Access Schemes	Social Lettings	10	+10
Rapid rehousing/Housing Led Services	Housing First (verified)	30	+30
Rough Sleeper Outreach Service	Street Smart Project	15	0
Mediation Services	Family	15	0
Enforcement, Investigation or Compliance with Housing Legislation	Housing Advice	0	0
Floating Support	VAWDASV	105	+10
	Learning Disability	27	0
	Mental Health	65	+20
	Substance Misuse	20	+20
	Ex-Offenders	40	+30
	Young People	10	+10
	Older People	20	0
	Generic	990	+85
Temporary Supported Accommodation	Mental Health	47	+5
	Substance misuse and alcohol issues (Wet)	7	0
	Young People	51	+17
	Generic	50	+12
Permanent Supported Accommodation	Learning Disability	278	+12
	Other	45	0
Refuges	Female	26	+4
Non-Statutory HSG Funded Posts	Project Officers (temp)	2 Posts	+2
Other Homeless Prevention Projects	Enhance Homeless support service	60	+60
	HIP	60	0
Other	SP - Admin	2	0

Project Type	Breakdown by type of need	Total number of units 21-22	Change in number of units from 20-21
	HSG - PATH Training	20	0
	Uplift		0
	Temp funding	0	0
	HSG - New Developments		0
	HSG - Regional projects		0
CUMULATIVE TOTAL		1995	+347

In addition to support and supported accommodation the Council has additional resources to support individuals as below:

The Get Ready and Move On (GRAMO) Project is a pre tenancy project delivered in partnership with Trivallis which offers information on all aspects of having a tenancy and being a good tenant. The project works with residents placed in hostels, supported accommodation, young people leaving care and those stepping down from specialist Adult Social Care placements.

Cwm Taf Morgannwg Mind offers a residential resilience service with service users in supported accommodation and temporary accommodation. This service provides group and face to face work with service users to help improve their resilience and well-being. The project also enables access to more specialist counselling to help with more specific mental health needs. Whilst the project is there to meet the needs of the service users it also provides support to support workers in their role helping to minimise incidents in projects and hopefully leading to less evictions.

For all service users placed in temporary accommodation, there is a newly developed homelessness support service to ensure everyone placed has a dedicated support worker. A newly established specialist health team also supports service users in temporary accommodation with mental health and substance issues and has enhanced provider's access to trauma therapy.

HSG in Adult Services

The Council's Housing Strategy Department works closely with Adult Services to provide joined up provision for those with learning disabilities, physical disabilities, and enduring mental health needs, including the deployment of Housing Support Grant. When considering schemes for the Social Housing Grant Programme Development Plan (PDP) the Housing Strategy Department meet regularly with other departments to discuss how/if HSG can accommodate any specialist housing within any scheme.

There are currently 164 specialist placements being sourced by Adult Social Services with HSG input. All individuals currently in specialist placements are prioritised to step down through different accommodation options that could reduce costs while bringing them closer to home.

the Council has seen an average yearly increase of 30% for specialist placements and anticipate this trend to continue for the foreseeable future which will result in an estimated 360 specialist placements by 2025.

HSG in Children's Services

The Housing Strategy Department also works closely with Children's Services

This work is being undertaken by the Community Wellbeing and Resilience Service and the use of the Children and Communities Grant is overseen by the Council's Funding Flexibilities Lead Officer Group. The membership of which comprises the lead Officers of the seven grants that make up the Children and Communities Grant in addition to the lead officers from the Housing Support Grant.

In order to deliver the Council's vision of the right support, to the right people, at the right time in the right place, where there is benefit in integrated service delivery this will always be sought irrespective of which grant services are funded or commissioned. The development of a single outcomes framework that is relevant to both grants will also enable the Council to measure outcomes for individuals who may receive services from both funding streams.

Both strategic and operational responsibility for the HSG and CCG sits within the Community and Children's Services Group. This facilitates synergy across both grants and co-ordination of operational developments and delivery. The Director of Public Health Protection and Community Services reports directly to the PSB on both grants on behalf of the Council.

The Council's Funding Flexibilities Lead Officer Group includes all CCG and HSG lead officers which ensures a consistent approach to service delivery from an operational perspective as well as synergy in planning, monitoring and review from a strategic perspective. Operational delivery arrangements that were set up as a result of Pathfinder activities will continue, such as the utilisation of early intervention and prevention housing support commissioned by HSG to provide housing appraisals for families open to the Resilient Families Service.

Opportunities for joint commissioning between the two programmes were taken in 2020-21 to allow for greater funding flexibility between CCG and HSG, namely:

- An existing Women's Aid project commissioned by Families First became part of a larger HSG commissioned project.
- A Citizen's Advice Bureau project funded by HSG became part of a larger CCG commissioned project.

The main HSG funded service is the Supported Lodgings Scheme which provides supported accommodation to young people aged 16 to 21 years of age, by enabling them to access lodgings in approved private households within RCT. It is part of a range of accommodation options for young people supported by the 16+ Teams.

Population Assessment data and Housing Support needs

The Social Services and Well-being (SSWB) (Wales) Act 2014 brings together, for the first time, all parts of care and support services and the ways in which they are delivered. The Act puts a 'duty' on Rhondda Cynon Taf Council, Merthyr Tydfil Council, Cwm Taf University Health Board, and their partners (including the voluntary sector) to think about the overall 'well-being' of people who use care and support services and the carers who help them. The Act sets out the particular ways in which these organisations must go about delivering change. They must jointly carry out an assessment of the care and support needs of our population and the needs of carers, the range and level of services required to meet those needs as well as the range and level of preventative services must also be assessed, including any actions necessary to provide services through the medium of Welsh.

This section summarises the data on needs from the Population Assessment, referral data and stakeholder feedback for each need

Headlines

RCT has amongst the highest reported incidences of substance misuse, mental illness and poor well-being in Wales

The most common reason for priority housing need in RCT is mental health

There are significant unmet housing needs for adults with mental health issues. Housing problems are frequently given as a reason for a person being admitted or re-admitted to inpatient mental health care. People with mental illness are far more likely to live in rented accommodation and their mental ill-health is often given as a major reason for tenancy breakdown.

Where several agencies are involved, information sharing arrangements between partners are essential to optimise the care for individuals. It is clear therefore, that data collection across agencies should be improved, and aligned with agreed national frameworks to better inform future service planning

There are high numbers of people requiring HSG services that have co-occurring mental health and substance misuse issues. These are particularly challenging for support services to get NHS mental health and substance misuse treatment services involved. A new specialist regional service is now in place, but it is too early to fully evaluate.

The Council has previously seen a year on year increase in HSG mental health referrals however, it is anticipated that this will rise significantly in the aftermath of the COVID-19 pandemic.

RCT CBC Adult Social Services utilise HSG funding to provide specialist mental health accommodation projects. There is insufficient data on support outcomes achieved by HSG funded services for specialist mental health placements to be able to draw conclusions on their effectiveness.

Mental Health

Cwm Taf has the highest rates of mental illness and poor well-being in Wales. The challenging picture of adult mental health and well-being in Cwm Taf was shown in the latest available data at the time of the assessment across a range of measures summarised in the table below.⁹

Table 5 Adult mental health indicators: Sources: Welsh Health Survey/ Welsh Government Data Unit/ NCISHP report

Indicator	Merthyr Tydfil	Rhondda Cynon Taf	Cwm Taf	Wales	What this means
Adults who reported consuming alcohol above guidelines	37%	41%	40%	40%	More than half of people with substance misuse problems are simultaneously diagnosed with a mental health disorder at some point in their lives, with alcohol being the most commonly reported substance misused
Adults who reported binge drinking	24%	26%	26%	24%	
Mental Component Summary Score (measure of well-being)	47.0	48.4	48.2	49.4	Cwm Taf has the lowest score for well-being in Wales
Adults who reported being treated for a mental illness	18%	15%	16%	14%	Cwm Taf is the highest in Wales
Admissions to mental health facilities (2015/16)			1225		
Suicide rate/100,000 population (2014)			14.1		Cwm Taf is the highest in Wales (Other health board areas range from 10.7 -13.6)

There are significant unmet housing needs for adults with mental health issues. Housing problems are frequently given as a reason for a person being admitted or re-admitted to inpatient mental health care. People with mental illness are far more likely to live in rented accommodation and their mental ill-health is often given as a major reason for tenancy breakdown. Due to the limited availability of housing, they may be offered accommodation in areas that are unsupportive –in areas with known drug problems/ antisocial behavior, which affects their ability to maintain good mental health. Those with tenancies often face eviction unless appropriate tenancy support is incorporated with care plans.

Providing wider community support such as housing, debt/employment advice, and social opportunities supports well-being. It also links with prudent healthcare and doing only what is needed.

For children and young people, adults, and older people there were examples throughout the mental health population assessment document where data was limited, or poorly and inconsistently collected. This makes assessment of need and service planning very difficult. The various agencies involved in providing care and support to someone with mental health problems will all have their own systems of data collection, depending on their funding, accountability, and

⁹ Cwm Taf Population Assessment March 2017

governance requirements. However, it is often unclear how data is used to inform the provision of the services that people with mental health problems have identified – hence the gaps in preventative services.

Where several agencies are involved, information sharing arrangements between partners are essential to optimise the care for individuals. It is clear therefore, that data collection across agencies should be improved, and aligned with agreed national frameworks to better inform future service planning

Research undertaken in 2020 to assess the health needs of homeless people for the Cwm Taf Morgannwg University Health Board identified that accessing help was perceived by homeless people to be difficult for those who do not meet the criteria for specialist/secondary mental health care, and whose symptoms are considered outside the scope of services aimed at managing common mental health problems.

Primary care, where the majority of people with common mental health conditions are treated, often had little capacity to support those who present with co-occurring conditions.

Understanding the various and complex pathways into mental health services were confusing for both housing support staff and homeless people in CTMUHB - particularly with how GPs, Community Mental Health Teams (CMHT), Crisis Teams and specialist homelessness teams and medical professionals within hospital settings interfaced with each other.

The report recommended that an existing forum, or new group should be convened, to oversee the implementation of the strategic actions arising from the report. The report recommended the group should be comprised of key stakeholders, health, social care, housing, criminal justice and welfare services and have a line of accountability to the Regional Partnership Board.

The report also recommended that an operational forum should be established in each of the local authority areas to provide a focus for building relationships between the variety of health service providers and the hostel providers, with a specific emphasis on Primary Care to improve day to day management of healthcare for homeless people.¹⁰

The most common reason for priority housing need in RCT is mental health. A consequence of this increase in complexity is that placements of people in supported accommodation are ending with eviction due to the challenges in complying with tenancy requirements.¹¹

There are currently 105 individuals with Mental health who require different forms of accommodation in the form of specialist mental health placements through Adult Social Care. This includes both those who are placed and present opportunity for step down along with those who are waiting for accommodation.

The Council has previously seen a year-on-year increase of 11% in referrals to HSG mental health support services however, it is anticipated that this will rise significantly in the aftermath of the COVID-19 pandemic. National figures sourced from Mental Health Wales have shown:

- 183% increase in requests for information on anxiety
- 188% increase in requests for information on suicide
- 229% increase in request for information on self-harm

¹⁰ A rapid Health Needs Assessment of people that are homeless within the Cwm Taf Morgannwg University Health Board footprint June 2020

¹¹ Rapid rehousing Review August 2021

Outcome data shows that the complexity of mental health needs has increased in supported accommodation services.

Although referrals via the Single Point of Access were lower in 2020/21 intelligence from stakeholders indicated that the lockdowns in response to Covid-19 enabled people to better manage anxieties about being in the community but has postponed the need to address their underlying issues. It is anticipated there will be a significant ‘stored up’ demand being seen in referrals from 2021/22 and beyond.

Substance Misuse

Co-occurring mental health and substance misuse problems

The term, ‘dual diagnoses usually refer to the co-occurrence of a mental illness alongside substance misuse. The relationship between mental illness and substance misuse is complex and can change over time. It can vary between people; someone may have:

- A mental illness that has led to substance misuse
- A substance misuse problem that has led to a mental illness
- Two initially unrelated disorders (mental illness and substance misuse) that interact with and exacerbate each other

Other factors that are causing mental illness and substance misuse including physical health problems

Evidence suggests that the number of people diagnosed in primary care with a dual diagnosis has increased in recent years, although there is a lack of national data on this.

Compared to people with a mental health problem alone, those with substance misuse and mental health problems are:

- likely to experience more severe mental health problems
- be at increased risk of suicide
- experience unstable housing
- have financial difficulties
- be less likely to engage with treatment interventions
- are more likely to fall through the gap between services.

Substance misuse can affect people regardless of their age background or ethnic origin and can also lead to significant problems in people’s lives. Regional, multi-agency, Area Planning Boards are responsible for delivering the Welsh Government Substance Misuse Strategy across Wales. Cwm Taf has the highest rates of both drug misuse deaths and alcohol related deaths in Wales. Data from the Welsh National Database for Substance Misuse evidences the continued need for services across Cwm Taf, with approximately 3,000 referrals to substance misuse services received annually for the period April 2013 to March 2016.¹²

Access to Substance Misuse Services

¹² Cwm Taf Population Assessment March 2017

The Rapid Health Needs Assessment report of people that were homeless within the Cwm Taf Morgannwg area¹³ described that the Community Drug and Alcohol Team provides a service for people experiencing problems with substance misuse based on a harm reduction approach which includes working towards abstinence where appropriate, providing care programmes that are developed individually with each client. Individuals with significant drug and/or alcohol misuse can access the service where there is a related risk to themselves or others and there is evidence of a commitment to actively engage in the treatment programme and comply with required standard of conduct.

Hostel workers working with the homeless interviewed in the report described the following challenges in accessing substance misuse services for their tenants:

4. Accessibility is not set up for the chaotic nature of these clients – when people reach the point of ‘contemplation’ (one of the earlier stages of the behavior change cycle) there is a six-week waiting list to get into services
5. Emotional support is needed to run alongside drug treatment services as part of the overall model of preparing people to be able to manage their own tenancies
6. Appointments for homeless people need to be in the morning, as they can be more easily managed by the hostels at this point in the day - if they go off for the day, then they have found drugs, and far more challenging to support in engaging with services, or may not be accepted
7. Offenders in the criminal justice system are able to get more direct access to treatment, for twelve months and then transfer to community substance misuse services.
8. Access to Community Pharmacy for prescriptions is not a problem though in some areas it is a long walk from the hostels.
9. Prescriptions have been adapted since Covid, with more rapid access to initial assessment, to give some people a greater number of days of drugs in one go, or to deliver the prescription to the hostel. In general, these changes were felt to have improved the system.

Specialist Mental Health & Substance Misuse Housing Outreach Service

The Specialist Mental Health & Substance Misuse Housing Outreach Service is a specialist, multi-agency outreach service which spans across Bridgend, Merthyr Tydfil and RCT Local Authorities. In July 2020, in collaboration with Strategic Housing Leads from the three Local Authorities, a proposal was submitted to the Welsh Government COVID-19 Homelessness and Housing Related Support Services Phase 2 funding. The proposal to provide a regional specialist outreach service to individuals with complex needs who reside in homelessness hostels and Housing First Projects was successful. This funding was initially for the period 1st October 2020 to 31st March 2021, however in February 2021 further funding was confirmed through the Local authority Housing Support Grants providing sustainability for the service.

From 1/04/21 to the 31/12/21 127 referrals across Cwm Taf Morgannwg. 61 referrals have been received from RCT during this time for individuals residing in Temporary Accommodation provision and who are part of the Housing First project. It must be noted that 66.9% of individuals referred to the project have been assessed as having overlapping Mental Health & Substance

¹³ A rapid Health Needs Assessment of people that are homeless within the Cwm Taf Morgannwg University Health Board footprint June 2020

Misuse issues; overlapping, 47.2% deemed high risk individuals with severe mental health / substance misuse and 33.1% having a mental health need.

55 individuals referred to the Team had quoted difficulties in engaging with substance misuse services, mental health services and health services.

Total no. of referrals	127
No. of referrals from RCT	61
No. of referrals from Merthyr Tydfil	21
No. of referrals from Bridgend	45

Table 6 Specialist Mental Health & Substance Misuse Housing Outreach Service –referrals as of Dec 2021

Reason for Referral	Number of Referrals (%)
Mental Health & Substance Misuse issues overlapping	66.9%
Difficulty engaging in generic services / fallen out of generic services for Mental Health and/or Substance Misuse	36.2%
High Risk individual with severe mental health / heavy substance misuse / high risk due to substance misuse & medication	47.2%
Physical Health Need	27.6%
Only mental health support requested	33.1%

Table 7 Specialist Mental Health & Substance Misuse Housing Outreach Service –referral reason as of Dec 2021

Ex-offenders

Headlines

There are a range of Housing First projects to meet the needs of ex-offenders. However, there are multiple challenges in meeting their housing and support needs.

There are lots of opportunities to review the pathway for offenders from prison to accommodation in the community:

- The pathway is being reviewed nationally to reflect the resettlement model
- Probation will be looking to recommission their current supported housing services and could align more with HSG services.
- Review of system responses in the MAPPA process
- Better information sharing
- A need for more single person accommodation.
- Prevent women having to share with men with DV histories which is currently happening
- Improve TA quality and range
- How is the impact of Regional Homelessness Task Force Meetings being measured in relation to multi-agency responses?

Ex-offenders were a significant group for the Council's homelessness team in finding suitable accommodation or placement in temporary accommodation on leaving prison.

This group were also had a significant number of referrals for housing related support.

Stakeholder engagement with the Lead for Probation Cwm Taf Morgannwg and the Head of Reducing Re offending (Wales) voiced concerns around the potential loss of priority status of ex-offenders (similar concerns were voiced during the service provider stakeholder roundtable) Concerns were also raised about the end of the 'All in' policy

They felt COVID-19 led to probation working more collaboratively with local authorities (specifically around accommodation)

Feedback on RCT Accommodation:

8. Flooding in early 2020 led to TA being occupied by flood victims and left less available when the pandemic began
9. Flood repairs were slowed by COVID-19 which in turn slowed the move on rate of flood victims in TA
10. WG 'All in' policy put further pressure on TA provision in RCT at the start of the pandemic
11. Outcome: Local Authority and probation had to work closely to find new suitable accommodation (LA led)

The 'prisoner' journey (prison to probation to Local Authority) is unclear, current guidance is out of date and refers to a previous Probation structure that doesn't exist anymore.

Probation is working with Welsh Government to review the pathway and reflect probation's move to a 'resettlement model'

Probation commission their own housing support services

10. Initial assessment of people in custody, categorises them by complexity (low/medium/high)
11. The aim is to reduce the number of cases that the Local Authority needs to deal with
12. Once 'Day One' services contracts finish probation are going to commission services that align with LA services and current WG policy
 - Once all options are exhausted, no one necessarily takes responsibility
 - There is a need to find housing solutions for people who are in this situation – although the solution is unclear
 - Probation raised the need for a collaborative approach between probation, the LA accommodation team, and other relevant teams – particularly around MAPPA process – opportunity for action learning again. Also – there is bound to be good practice we can share

MAPPA

Any individual who raises particularly concern within their risk assessment will be referred to local MAPPA (Multi-Agency Public Protection Arrangements). This is a multi-agency approach to the identification and management of high risk violent or sexual offenders. Housing and move-

on options will be discussed at these meetings to prevent the person from becoming vulnerably housed or rough sleeping.

Multi Agency Public Protection Arrangements (MAPPA)

- After leaving prison some people with serious or violent offences have intensive multi-agency arrangements put in place to enable collective management of their reintegration into the community.
- These are called Multiagency Public Protection Arrangements (MAPPA)¹⁵, and involve local police, probation and other local agencies working together to minimise the risk of re-offending and protection of the public.
- Criminal justice agencies such as police and probation are primary agencies and work closely with other bodies in the field of employment, health, housing, and social care who have a “duty to cooperate”.
- People with violent or sexual offences are broken into MAPPA categories, dependent of level of risk. This categorisation can have a major impact on the ability of MAPPA clients to access housing, as suitable premises are needed in the right areas.

Concern was also raised around female ex-offenders who often have traumatic experiences that make TA with men unsuitable

Rejected referrals to Domestic Abuse Refuge services due to people’s needs being too high and/or complex, reflects how challenging it currently is to find suitable accommodation and services for women in this situation

Despite working more collaboratively, probation feel that they need more information earlier (i.e., before the point of eviction) so they can play a more preventative role

Update to include RCTCBC Offender Pathway.

Their top priorities were:

- A need for more single person accommodation.
- Prevent women having to share with men with DV histories which is currently happening
- TA quality and range has to be better
- Better joint response around MAPPA – review lessons learnt and commit to more joint approaches and action learning
- How is the impact of Regional Homelessness Task Force Meetings being measured in relation to multi-agency responses?

HSG funded services

A number of services have been set up under the umbrella of Housing First funded through Welsh Government Trail Blazer funding arrangements. However as from the 1st of April 2022 this funding stream will be transferred to the Housing Support Grant.

Housing First for Adults

- As of December 2021, there were **42** people currently on scheme, with **2** new referrals received during December 2021, bringing the total for accessing the scheme since the beginning to **68**.
- The number of new Housing first tenancies started during December was **1**, bringing the total to **28**.
- **24** people (**57.1%**) on scheme were maintaining tenancies at the end of December 2021.
- **4** people (**10%**) on scheme were not residing at their tenancy at end of December 2021, due to prison/custodial sentence (**3**) and hospital admission (**1**). These individuals were still being supported where they are residing.
- **14** people (**33.3%**) on scheme had not secured tenancies and were being supported via outreach. **8** were residing in emergency/B&B accommodation, **1** was currently in hospital and to be placed in emergency/B&B accommodation once discharged, **1** was in custody and to be placed in emergency/B&B accommodation once released, **2** were currently in custody and would be no fixed abode on release, **1** was no fixed abode and **1** was residing in a probation service.

Wisdom Housing Project

The Wisdom Project works with offenders who present with a high level of risk and have difficulty in securing housing, including those with complex needs who sit outside current arrangements in place for the rehousing of Multi-agency Public Protection Arrangements (MAPPA) designated offenders.

Performance data

Table 8 Wisdom Housing Project performance data 2017-2021

	2017/2018	2018/2019	2019/2020	2020/2021
Number of referrals	1	4	5	1
Number of individuals that have ended support	0	1	4	1
Reason for support ending	N/A	Return to prison (1)	Return to prison (1) Support completed (3)	Return to prison (1)
Number of Service users supported	1	5	9	6

Assertive Outreach Project

The Assertive Outreach Project provides independent and permanent accommodation for offenders, offering a broader housing- led approach, and providing additional support where required.

The properties made available for the project will be subject to the needs of each individual based on critical factors including their support needs and their links with friends and family. The

properties will be provided by each of the housing providers with support arrangements made available by POBL. The properties made available for the project will be at the discretion of each Registered Social Landlord and will sit outside of the Rhondda Cynon Taf Allocation scheme arrangements including any local letting plans or targets in an area. The project provides furnished one-bedroom general needs accommodation in consideration of the current service delivery model.

Performance Data

Table 9 Assertive Outreach Project performance data 2019-21

	2019/2020	2020/2021
Number of referrals	12	5
Number of new individuals into the project	12	5
Number of individuals that have ended support	1	1
Reason for support ending	Refused support/prison	Prison
Number of Service users supported	12	16

Rapid Response Project

The Rapid Response Project started in October 2019 and was developed by the Council to support individuals who present themselves as homeless and are repeat offenders. The project aims to support individuals with complex needs with the objective to prevent re-offending in the future. The project has been set up to provide an effective multi agency response based on the Housing First principles to individuals prior to leaving HMP Cardiff and Eastwood Park.

Following acceptance of an individual for the project, the Housing Association takes responsibility for sourcing a suitable property.

Intensive person-centered support is provided by Pobl along with the Housing Association's Housing Officers daily, tapering off to every other day subject to the individual's needs.

When service users are matched to a social housing property, the project fully furnishes the property for the service users, which enables the service user to move into a property that they can call home and negates the issue of them having to furnish it themselves, which is very often difficult due to lack of funds. The project also pays for one year's TV licence for the service users, this is also a great help to them as it assists to manage one utility bill. Service users often get overwhelmed with paying utility bills as many have not done this before, but support is provided to empower them and give them the skills and tools required to manage their finances and their tenancy.

Performance data

Table 10 Rapid Response Project performance data 2019-21

	2019/2020	2020/2021
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Number of referrals	7	1
Number of individuals that have ended support	0	3
Reason for support ending	N/A	Return to prison (2) Deceased (1)
Number of Service users supported	7	8

Learning Disability

RCT CBC Adult Social Services Learning Disability accommodation services utilise HSG funding. There is insufficient data on support outcomes achieved by HSG funded services for people with learning disabilities to be able to draw conclusions on their effectiveness.

The Cwm Taf Population Assessment estimates about 5,500 people in Cwm Taf have a learning disability and about 2,500 of these are children and young people. About 600 children and young people have an Autistic Spectrum Disorder in Rhondda Cynon Taf. Only a small number of these people were using services in Rhondda Cynon Taf at the time of the assessment and 234 children and young people were using services through the Disabled Children's Team. However, professionals reported higher needs than this in the community, leading to a potential shortfall in services.

People with a Learning Disability also want different services than have historically been provided, away from day services to playing an active part in their community. Other challenges highlighted in the population assessment were:

- Difficulties in accessing services urgently
- Services needing to work more collaboratively
- Services need to see the person, not the needs

Young people with a learning disability are known to Children's Social Services; therefore, it is possible to identify actual need rather than projected need. The data has shown that over the next 5-year period, 97 young people with a learning disability will transfer through to Adult Social Services and will require accommodation. This will be in addition to the individuals who are already being supported of which 13 are currently awaiting accommodation with an additional 33 needing step down accommodation options. However, this does not take into consideration those individuals who are living with older parents and not accessing services.

The Council has historically combined social care and HSG funding to support people with learning disabilities particularly in supported living. Measuring demand and outcomes with specific reference to HSG impact has therefore been challenging. Welsh Government

commissioned research in 2020¹⁴ highlighted the wide range of levels of spend on learning disability placements using what was then Supporting People funds across Welsh local authorities. The report proposed a number of options to potentially rebalance the percentages of Supporting People and Social care funding.

There is insufficient data on support outcomes achieved by HSG funded services for people with learning disabilities to be able to draw conclusions on their effectiveness.

Children and Young People

The Council Single Point of Access saw an increase in referrals from vulnerable families and Vulnerable Single Parent/Expectant Mothers each year for the last three years. Single people aged 16-25 are the highest proportion of homelessness applications to the Council, increasing year on year and through the COVID-19 pandemic.

HSG funds Housing First projects for young people as well as the Supported Lodgings scheme for care leavers 16-18 years.

There is insufficient data on support outcomes from supported lodgings for young people which although arrangements are in place with Children's Service to start to develop and effectively monitor the effectiveness of this housing option for young people leaving care.

According to the Population Assessment the child population in Cwm Taf is estimated to have increased slightly between 2005 and 2015 - up 2.2 percent (6406 people). The growth in the population has been larger in Merthyr Tydfil than in RCT, up 5.3 percent and 1.4 percent respectively.

RCT and Merthyr have a relatively young age profile with its 62,210 children making up 21 percent of the population (i.e., 1 in every 5 people living in Cwm Taf is under 18).

Young adults (aged 18 to 24) make up 9 percent of the population.

Across RCT and Merthyr the overall population aged 0 to 24 has been declining since 2011, down from 90,442 to 89,772. There has been a similar decline down 0.8 percent over the same period.

The 2014 based population projections across RCT and Merthyr show the overall population of people aged 0-24 will decline by 1.6 percent between 2016 and 2025.

The Cwm Taf Population Assessment predicted that both Rhondda Cynon Taf and Merthyr Tydfil to see small percentage increases in the number of children aged 0-17 who experience abuse and neglect.

The Council Single Point of Access saw an increase in referrals from vulnerable families and Vulnerable Single Parent/Expectant Mothers each year for the last three years.

Single people aged 16-25 are the highest proportion of homelessness applications to the Council, increasing year on year and through the COVID-19 pandemic.

¹⁴ <https://gov.wales/sites/default/files/statistics-and-research/2020-03/understanding-local-authority-funding-for-learning-disability-housing-support-across-wales.pdf>

Young People Project

The Young People Project provides a multi- agency response to prevent homelessness for young people aged 16 – 24 with highly complex and challenging needs, who are furthest away from independence and have disengaged from more traditional pathway services.

The model does not simply replicate adult models for Housing First, but also meets the developmental needs and capacities of young people.

The project provides up to 10 units of dispersed supported accommodation to young people with complex needs and a history of repeat homelessness. The young people who are supported on to the project all have a care background and have been supported by Children and/or Adult Services.

The properties made available for the project are subject to the needs of each young person based on critical factors including their support needs and their links with friends and family.

The properties are provided by each of the Housing Associations (Cynon Taf Community Housing Group, Hafod, Newydd, RHA Wales, Trevallis and Wales and West Housing) with support arrangements made available by Llamau.

Performance Data

Table 11 Young People Project performance data 2019-21

	October 2019 - March 2021
Number of referrals	10
Number of referrals accepted onto the project	7
Number of individuals that have ended support	0

Supported Lodgings Places

The Supported Lodgings Scheme provides supported accommodation to young people aged 16 to 21 years of age, by enabling them to access lodgings in approved private households within RCT. It is part of a range of accommodation options for young people supported by the 16+ Teams.

As part of the Accommodation and Support Strategy¹⁵ a review identified the need to expand the Supported Lodging Scheme. Covid 19 unfortunately impacted on our ability to drive this forward, but we are planning to run a new recruitment campaign in the Spring.

Data for the Supported Lodging Scheme in recent years:

February 2020 – 11 Placements

February 2021 -10 placements

November 2021 – 12 placements

There is insufficient data on support outcomes from supported lodgings for young people.

¹⁵ Accommodation and Support Strategy for Young People 16+ Years of Age Leaving Care. 2019-2022

Older People

The Population Assessment states that the number of older people that live in the communities in Cwm Taf is growing as people are living longer healthier lives. The population assessment expected the population of people over the age of 65 years to grow by 30% and those over the age of 80 years to grow by 70% in the following 15 years.

The Joint Commissioning Statement for Older People seeks to ensure that older people live longer, healthier, fuller, and happier lives; where they are encouraged and supported to maintain their independence for as long as possible, whilst recognising that some may become ill, frail, or vulnerable, and ensuring that these people receive the respect, care, and support they want and need at the right time and in the right place.

Projected increases in the old-age population will lead to increased levels of dementia which will have a large impact on the need for provision of care and support services for this group

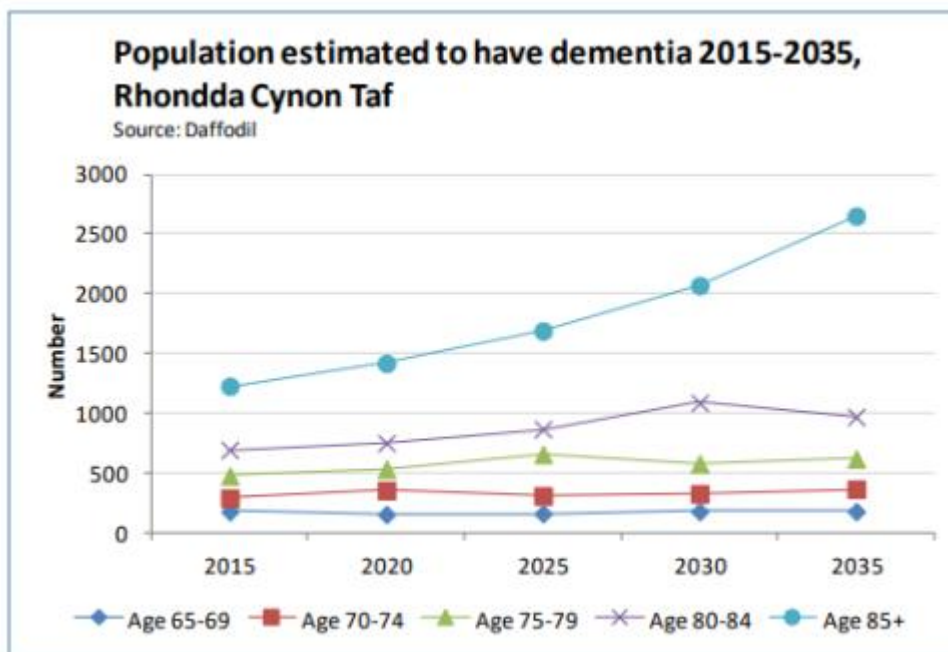


Figure Population estimated to have dementia 2015-2035

It has been estimated that by promoting and adopting healthy lifestyles in middle age, an individual's risk of developing dementia could be reduced by approximately 20%.

Based on the "More Choice, Greater Voice" model, a given area should provide 25 units of Extra Care accommodation for every 1000 people over 75 years. Given the changing demographic of RCT and increasing life expectancy, using this benchmark. RCT will require an additional 350 units of Extra Care accommodation by 2025. This is in addition to the 300 planned units of Extra Care accommodation already agreed by the Council.

Physical Disability and Sensory Impairment

Headlines:

HSG funds specialist placements for people with physical disabilities within Adult Services. There is insufficient data on support outcomes achieved through HSG funded services for people with physical disabilities and sensory impairments.

People with physical difficulties apply for rehousing from hospital often with very short timescale. RCT need more data and notice at an earlier stage. Going forward this needs corporate pathway signed up by all partners.

There are around 4150 people in Cwm Taf registered as having physical disability or sensory impairment. Service providers believe this number is not a true reflection of the numbers affected as people do not identify with the language, definitions and terminology used. Deaf and blind, especially culturally Deaf, and blind (those born Deaf or blind), service users feel particularly disconnected with the term impairment, they do not feel they have an impairment or loss as they have never had that sense to impair or lose. There are also issues with under reporting as people do not want to be on registers as they are not sure how this information will be used, or they are worried about discrimination.

Some of the common themes identified through the population assessment include:

- Everyone wants to feel part of their community and not feel socially isolated.
- People didn't know what services are available to them or how to access the support and help they need
- Choice and independence are important to disabled people just as they are for all people. Everyone wants to feel involved, in control and listened to, and respected. People may have multiple needs but don't want to access multiple services, having to retell their story again and again.

Physical disability specialist placements have seen a year-on-year increase with a significant spike in need in 2021. There are currently 26 individuals with physical disabilities in specialist placements. All of these individuals would be considered for new accommodation that can better meet their needs and bring them closer to home while promoting independence and choice. There is insufficient data on support outcomes achieved through HSG funded services for people with physical disabilities and sensory impairments.

People with physical difficulties apply for rehousing from hospital often with very short timescale. RCT need more data and notice at an earlier stage. There is a need to find short term solutions whilst move on is adapted or built. Two ICF funded properties are in place for this purpose RCT are also looking at the use of Extra Care Respite. Going forward this needs corporate pathway signed up by all partners.

Carers

At the time of the population assessment nearly 13% of the population in Cwm Taf (29,640 carers in RCT and 7,427 in Merthyr Tydfil) were providing care to a family member, friend, or neighbour. This is slightly higher than all Wales figure of 12% and higher than the England and Wales figure of 10%.

The Carers Strategy for Cwm Taf sets out key objectives that HSG service need to contribute to:

- Identify carers
- Carers must be able to find the information and support they need easily and quickly
- Carers must be listened to and understood
- Preventative support

HSG services need to ensure they are integrating these objectives into commissioning and delivering support.

Violence Against Women, Domestic Abuse and Sexual Violence (VAWDASV)

Headlines

Increasing numbers of referrals are unable to be accepted to Refuges in RCT because of levels of need and/or risk.

Whilst homelessness applications for those fleeing domestic abuse are not high there is a need for service development particularly in respect of enhancing domestic abuse perpetrator Programmes in Cwm Taf Morgannwg.

Headline challenges found in the Population Assessment were:

- People need to be empowered to report incidents of violence and take up the services on offer. Many victims don't report the violence or abuse they are experiencing. Many people who do report incidents to the police or other agencies do not go on to take up the offer of support. The services provided often predominantly help those at the greatest risk and less support is available for others.
- Services need to meet the needs of all groups in our communities. For example, there were no services specifically provided for men.
- Services need to work together to tackle the underlying problems that are leading to violence. Many people who access services are experiencing a range of problems such as substance misuse or poor mental health and may be known to other services. These may be causing or contributing to the violence or abuse they are experiencing and should not be tackled in isolation.
- Services need to protect and support children in families where violence and abuse is happening. The information from services was that children are present in most homes supporting a victim of violence or abuse. Children who see or have experience of domestic abuse are more likely to experience problems in later life.
- The people who use services do not routinely get involved in telling them what they want or how services can meet their needs. This means that services may be designed by professionals who believe they know what people need without being informed by the people who will ultimately use the service.

The Cwm Taf Morgannwg Violence against Women, Domestic Abuse and Sexual Violence Strategy and Delivery Plan has five key aims:

- Increase awareness of violence against women, domestic abuse, and sexual violence across the Cwm Taf population
- To break the generational cycle of VAWDASV behavior in families by promoting healthy relationships in children and young people.
- Hold perpetrators to account for their actions and support them to change their behavior.
- Ensure services are designed and commissioned to meet the needs of the Cwm Taf population.
- Ensure that services are fit for purpose and quality assured

Progress against the plan can be found [here](#).

Use of HSG VAWDASV services in RCT

The table below shows referrals, referral decisions and unmet needs for HSG VAWDASV services in RCT linked with refuge provision.

Table 7: Single women fleeing domestic abuse with high complexities / substances misuse and crisis Mental Health

Refuge referral information	2017 /18	2018/19	2019-20	2020-21	4-year total
Number of referrals	280	316	282	286	1164
Referrals Accepted	193	185	169	154	701
Referrals Not Accepted	87	131	113	133	464

Reasons for referrals not accepted	2017 /18	2018/19	2019-20	2020-21	4-year total
Risk of harm violence towards other residents	16	18	12	14	
Domestic abuse not a lead need	28	27	28	20	
No recourse to public funds		2	3	4	9
Unable to complete risk assessment		19	3	2	24
Not entitled to benefits		2	2		4
No available refuge space		5	14	14	33
Unsafe in RCT client supported to access other area	24	13	6	11	54
Unable to Meet High Support Needs	19	37	42	51	153



Noticeable increase

Reasons for unable to Meet High Support Needs	
Physical disability required adapted facilities / unavailable at time of referral	6
Mental Health- client presenting as suicidal/self-harming at point of referral	48
Chaotic substance misuse – client not current to D&A services	66



Mental health- client requires daily support from MHT – dynamic within refuge inappropriate at point of referral	4
History of violent offending.	18

Reasons for non-acceptance is out by 24. one was due to arson, however during 2017- 18 data was not as effectively recorded as the past 3 years which may have caused anomaly in the data

Whilst homelessness applications for those fleeing domestic abuse are not high there is a need for service development particularly in respect of enhancing Domestic Abuse perpetrator provision in Cwm Taf Morgannwg particularly for those stepping down from the higher level “Drive” Perpetrator Programme.

Rapid Review of Homeless Services

A rapid review of homelessness services was carried out by the Council's Housing Strategy Department in August 2021.¹⁶ The purpose of the review was to examine current arrangements supporting homelessness and to make recommendations for changes designed to prevent homelessness and make homelessness rare, brief, and unrepeatable.

The following are the key recommendations from that review.

Preventing Homeless	
Housing First	<p>The Council should develop a Housing First Projects Operational Manual for staff, that sets out the process, procedures and key responsibilities expected of organisations.</p> <p>Update: Project Officer appointed and in post who will be responsible for developing a HF framework including operational arrangements.</p> <p>The Council should further review the Housing First Rapid Response Project to investigate why service users haven't received a response to service user feedback.</p> <p>The Council should further review staffing resources and capacity for Housing First Projects ensuring there is sufficient staffing to safely support high risk service user.</p> <p>Update: An additional 5 project staff have been funded and are in post to assist the HF Team. This includes a project manager who is responsible for overseeing the day to day operational and staffing arrangements.</p> <p>The Council should further review the Housing First Projects referral process to involve Project Workers within the process. The Project Workers work closely with the service users, their input could benefit the referral process, helping to make further improvements.</p> <p>Update: As above, the new project officer will review the referral form and referral pathway as part of the new role. In addition, there are fortnightly operational multi agency meetings which are chaired by the Homefinder Team Manager which are attended by the HF Project workers.</p> <p>The Council should continue to manage the Social Housing Grant Programme with a focus on prioritising an increase in the much-needed supply of permanent 1 bedroom accommodation.</p>

¹⁶ RCT Rapid Homelessness Review August 2021

	<p>The council should continue to work closely with local landlords through avenues such as the landlord forum to acquire suitable accommodation to support the needs of projects and service users.</p> <p>The council should continue to secure funding for temporary units for young people, in order to prevent homelessness and provide them with the skills to maintain a permanent tenancy.</p> <p>The Council should ensure that intensive support from Social Services (support workers) is fundamental for individuals with mental health issues to maintain a tenancy.</p>
Allocation Policy	<p>The Council should further review the content of the Homefinder website ensuring that the site is user friendly and accessible. It is recommended that there should be a dedicated Officer who has responsibility for updating the functionality of the website as well as ensuring that customer satisfactions surveys are accessible through the website in order to collect feedback from service users.</p> <p>The Council should carry out a further review of the RCT Allocation Scheme to incorporate any changes that have been adopted during 2020/21 and ensure that the Scheme continues to give overall priority to the reasonable preference categories.</p>
Local Lettings Policy	<p>The Council should continue to support the approvals for Local Lettings Policies, provided robust evidence is provided by the Registered Social Landlord (RSL) to support the need for the policy.</p>
Securing Accommodation	
Emergency Accommodation	<p>The Council should employ a Young Persons' Housing Officer to help raise awareness amongst young people of their housing options, where to go for help and assistance and provide advice on the support available.</p> <p>Update: We have recently seconded a HSO to be a single point of contact for care leavers. Having dedicated workers can be challenging linked with cover and lack of expertise for annual leave and sickness absence.</p> <p>The Council should have more efficient data recording and analysis of move on reasons to ascertain if tenancies/family returns have been sustained. There are cases of move on reasons not being recorded and this may prevent a full analysis of the effectiveness of the scheme being able to be undertaken.</p>

Mill Street Hostel	The Council should recommission and relocate the Hostel provision in Mill Street and develop a new Assessment Centre. The new Centre should accommodate 24 units, which would double the capacity of the current provision. This would then take the strain off the use of B&B's for temporary accommodation, resulting in financial savings for the council as well as providing purpose-built units for individuals and support on site.
Rough Sleepers	The Council should ensure that emergency and temporary alternatives to rough sleeping are available with the capacity needed, and the diversity of provision, to maximise impact and dignity.
“Get Ready and Move On” project	The Council should work closely with the service providers at ‘Get Ready and Move On’ (GRAMO) to identify those who are not within a support system and ensure they have a support worker until a tenancy is found. It is also recommended that plans are made to accommodate service users in a socially distanced classroom environment at the earliest possible opportunity to help with engagement and attendance.
Providing Support	
Mediation services	The Council should have more efficient data collection for homelessness data around youth homelessness specific to age ranges, numbers engaging in support and outcomes achieved.
MIND Resilience	The Council should extend training for staff in hostels delivering the MIND Resilience project to overcome any further disruptions to the service due to the Pandemic.
Youth homelessness worker and CAB dedicated worker	The Council should further review the Citizens Advice Bureau Homeless Prevention project as evidence suggests that engagement with service users in difficult circumstances should be prioritised.
Location of Housing Solutions, Homefinder and Supporting People Teams and Training Opportunities for Staff	The Council should have one location for combining office space with hostel provision. The office space should be used to accommodate the Housing Advice Centre (HAC), the Homefinder and Supporting People teams and aim to reduce the impact of anti-social behavior on members of the public.

Stakeholder Engagement

A range of local stakeholders were involved in developing this needs assessment. Stakeholders included council departments, statutory partners such as health and probation, along with representatives from Registered Social Landlords and HSG providers. Stakeholders were engaged via online workshops, one to one interview and via questionnaire.

The key themes arising from stakeholder engagement are summarised in the table below.

Statutory Partners

**Stakeholders were asked about primary prevention how to build resilience and creating the conditions in which problems do not arise in the future.
What is RCT's current offer? What should it look like?**

There were a range of views including:

- There needs to be a better focus on family/domestic violence and young people, particularly young people with complex needs, to support resilience in families. A lot of work is already happening through Resilient Families initiative.
- The HSG funded housing officer is working well. There is an opportunity to further amalgamate the resilient family's initiative and prevention agenda in the HSG programme.
- Attendance and wellbeing services in schools need to identify issues – making every contact count. Behaviours in school are often indicators for issues in later life such as mental health and substance misuse.
- Resilient families currently have a process for profiling vulnerability in families. There is an opportunity for a more corporate approach to profiling future need between Adult Social care and the Housing Support Programme.

**Stakeholders were asked about secondary prevention, targeting action towards areas where there is a high risk of a problem occurring.
What is RCT's current offer? What should it look like?**

- See Appendix 2 for an example of a prevention programme undertaken by another local authority in Wales. The observations and recommendations of this work closely aligned with the feedback from stakeholders in RCT.
- Housing First projects are having a good impact – they are stopping individuals going around the system. These need to be developed further.
- Existing accommodation projects need to review their access rules given the increase in presenting complex needs i.e., co-occurring mental health and substance misuse.
- A multi-agency Inclusion Panel should be set up for those who are or at risk of serial exclusion. The terms of reference for this panel should have an emphasis on how to accommodate people with even the most complex needs.
- It was felt that the efficacy of Supported Lodgings as an option for young people leaving care should be explored in relation to outcomes and value for money.

Stakeholders were asked about tertiary prevention, intervening once there is a problem, to stop it getting worse and prevent it reoccurring in the future.

What is RCT's current offer? What should it look like?

Stakeholders felt:

- Housing First Projects work well for most people.
- WISDOM project (Housing First prison leavers) also works well.
- Move on was successful and prevented many people from reoffending, however this was becoming more difficult because of a lack of more permanent housing options across the system.

Stakeholders were asked about acute spending, which acts to manage the impact of a strongly negative situation but does little or nothing to prevent problems occurring in the future.

What is RCT's current offer? What should it look like?

Stakeholders felt:

- There were several pockets of good practice in RCT but that agendas could be better aligned e.g., Resilient Families and HSG, thus using resources more effectively.
- Needs to be better investment at an early age e.g., school age to prevent problems spiraling out of control.
- There is an opportunity to enhance corporate parenting ensuring Children's Services and housing colleagues in relation to how they jointly plan around the needs of vulnerable children and children leaving care.
- There should be youth worker presence in schools (See Appendix 2 for thoughts on how youth services could contribute to the homelessness agenda).
- Need to look at the Cardiff assessment Centre model to assess its suitability for RCT. The model should include multiagency assessment and bed provision for all single homeless people including those with complex needs.

Stakeholders were asked, what would you stop, start, and continue in relation to HSG Programme?

Stakeholders suggested:

- Continue floating support
- Need more evidence on supported lodgings
- Review reasons for breakdown in placements and use as an opportunity for learning and development.
- Review supported accommodation access rules and length of tenure
- Look at Cardiff Assessment Centre model
- Management information system needs to be improved and understood across the system

- Ensure the Council and its partners align planning and commissioning in relation to the anti-poverty agenda e.g., HSG and CCG build on joint working to develop more single delivery approaches.
- Better joint commissioning with Health, Social Care, HSG and APB for Substance Misuse is required to respond to the increasingly complex needs in RCT.
- Ensure commissioning is based on good quality triangulated data that reflects the intelligence held by voluntary sector, Health, Probation social services and housing partners.

NHS Stakeholders

An interview was carried out with:

- Linda Prosser – Executive Director of Strategy and Transformation CTMUHB
- Philip Daniels - Consultant in Public Health

The interview covered broadly how the CTMUHB was committed to improving its accessibility to homeless people. Specifically, the interview highlighted three broad areas for improving access.

The need to review the remit and outputs of existing community-based posts across the health and social care partnership.

There was recognition that community-based practitioners who understood the importance of providing relationship-based services was vital. There is a clear plan to move towards delivering health services via a locality model. There was a view expressed that there are a number of posts that potentially overlap in their reach and remit e.g., Community Navigators and Inverse Care Team posts. It was recommended that how these posts/services complement each other required exploration across the partnership to ensure best value for money.

The need to ensure a reasonable balance between the development of specialist services and improving access to mainstream services for all.

There was also recognition that a proper locality-based approach would need to be inclusive in its entirety and that some learning and development activities were required to ensure that all mainstream services are as inclusive as possible – taking account of the specific access needs of e.g., people with learning disability, mental health, homeless people. There was a view that a reasonable balance needed to be struck to between the development of specialist services and improving access to mainstream services for all.

The need to ensure that the recommendations from the recent Health Needs Assessment are considered and implemented by relevant planning forums.

A recent (2020) health needs assessment carried out in CTMUHB in respect of homeless people highlighted a clear interest in the health needs of homeless people in most service areas in CTMUHB, and the forays that some services have made into understanding and meeting the health needs of homeless people was encouraging.

There is a need to ensure that the recommendations from the Health Needs Assessment are properly reviewed and implemented in CTMUHB in respect of homeless people by existing partnership forums (e.g., area planning boards) that cover:

- Mental health
- Substance Misuse
- Housing and homelessness

Relationships at the local level between some NHS services and hostel providers is also to be welcomed and something to build upon. However, a strategic and co-ordinated multi-disciplinary approach to fully meeting the health needs of homeless people, that would meet best practice standards, appeared to be largely absent at the time of the assessment.

The current focus in the Health Board on a locality management model provides an opportunity for each area to test its service model design to ensure that the needs of the most vulnerable in each community, including homeless people, have been addressed.

The following recommendations were highlighted in the health needs assessment for the appropriate authorities and partners in the area to consider as priorities in relation to the health needs of homeless people.

1. Safeguarding procedures should be reviewed to ensure that they are sufficiently robust to ensure that individuals and organisations are able to raise concerns about homeless people and feel that their concerns are being heard and acted on.
2. Existing forum, or new group should be convened, to oversee the implementation of the strategic actions arising from the health needs assessment. This group should be comprised of key stakeholders; health, social care, housing, criminal justice, and welfare services and have a line of accountability to the Regional Partnership Board. A first goal of this group should be to set out its vision for health services for homeless people, drawing on the groundwork that has been undertaken in individual services. An integrated model service delivery for homeless people should be developed for delivery in each local authority area, that takes account of the standards set out by the Faculty of Homeless and Inclusion Health and take an action learning approach to service development.
3. An operational forum should be established in each of the local authority areas to provide a focus for building relationships between the variety of health service providers and the hostel providers, with a specific emphasis on Primary Care to improve day to day management of healthcare for homeless people.
4. A network of health professionals should be established with an interest in health and homelessness across the Health Board (including primary care) to build professional capacity and understanding of needs and services for Homeless People.
5. Data relating to service use by homeless people across the Health Board should be brought together into a single dashboard to aid understanding of the utilisation of health services by homeless people, and feed into IMTP planning and to inform the HAVGHAP. This can be achieved through interrogating existing service data, rather than needing new systems, and will provide visibility to the needs of homeless people on an on-going basis.
6. Staff in key leadership and clinical roles should undertake awareness raising of the issues raised in this report on a multi-disciplinary basis. This should include people visiting the hostels and meeting homeless people to gain empathy and challenge their unconscious bias. Training should cover these topics:

- Causes and types of homelessness
 - Needs
 - Access criteria and arrangements
 - Escalation
 - Shared risk
 - Information sharing
7. The Taf Ely cluster's work on the homeless is a significant and highly positive development and should be used as a pilot to test a method of working that can be rolled out across the Health Board as appropriate
 8. A specific piece of work is required to further explore the role of mental health services and substance misuse services in supporting the homeless:
 9. Primary mental services are available in some but not all hostels, funded from a variety of sources outside of the NHS. Primary mental health services are also provided by the NHS accessed via Primary Mental Health Workers in Primary Care. Homeless people are most likely to access services provided in or near hostels. A consistent offer should be available across all venues that is easily accessible as stabilising mental health underpins all other interventions with homeless people.
 10. There is a need for direct and regular liaison between Community Mental Health Teams, Crisis Mental Health Teams, Substance Misuse Services, and hostel services to establish a shared understanding and approach to supporting people homeless people in crisis, including exploring information sharing between mental health services and housing providers.
 11. A public health approach to primary prevention of homelessness should be considered, including a review of the local approach to identifying young people at risk of homelessness through school and education services, particularly those at risk due to family breakdown and families in crisis, and to assess if current arrangements are sufficiently targeted. Particular attention should be paid to how young LGBTQ are supported through family breakdown.
 12. Partners should review their hospital discharge arrangements to ensure that they are not unwittingly contributing to homelessness.
 13. Some service responses to COVID-19 have seen more rapid access to services for people in need – for example more rapid access to substitute prescribing for people using substances. The Health Board should review with homelessness services how this access can be maintained.
 14. Health Services should provide information on a regular basis to the homelessness hostel services, as part of their regular service updates, about how to access services e.g., changes in dental service access, accessing podiatry etc.
 15. A model to align therapeutic interventions for homeless people with co-morbid mental health and substance misuse should be developed and implemented.

16. Further exploration of the transfer of care on release from Parc Prison should be explored in the context of re-commissioning of prison health services.
17. All organisations should consider how they can offer volunteering and other opportunities that are accessible for homeless people.
18. An opportunistic vaccination service should be introduced to serve the needs of the homeless population in CTMUHB. This should form part of the remit of the immunisation team when human resources allow.
19. Women in the eligible age-groups for breast and cervical screening should be encouraged and supported to attend for screening.

Key themes from the stakeholder engagement

Improve accessibility consistently for all from low to complex needs. A one door / assessment centre approach with a 'no wrong door' philosophy.
Improve multiagency working in particular for mental health, substance misuse and where these are co-occurring.
Ensure there is a better multi-agency operational response to inclusion. This could take the form of a panel made up of RSLs, Social Services LA Housing, Health & Third Sector – with the expressed aim of agreeing a consensus on how to collectively work with homeless complex individuals or individuals at risk of losing their accommodation.
Extend Housing First Model for more complex needs (separately for YP and adults). Recognise that people will need permanent living options within a supported housing environment.
Housing Related Support responses for the most complex and hard to engage with need to be rapid. People need support when they need it.
Review the use of bed and breakfast and look at other approaches to Temporary Accommodation. Cardiff has temp beds attached to its Assessment Centre.
Ensure prevention and early prevention initiatives across RCT are strategically and operationally aligned. E.g., Resilient Families with effective information management and profiling.
HSG intervention should start at the earliest opportunity – should be placed based. Targeting high risk areas.
Ensure HSG and Children's Services utilise funding for Supported Lodgings effectively and understand the outcomes for young people.
Safeguarding procedures should be reviewed to ensure that they are sufficiently robust.

[Feedback from service users](#)

The service user view of services is contained in the Cwm Taf Morgannwg Housing Support Service User Survey undertaken for the Regional Housing Support Collaborative Group. The

survey was undertaken in December 2020 with 47 responses from Rhondda Cynon Taf and 21 from other areas of the Cwm Taf Morgannwg area. Respondents were people using either supported accommodation services or floating support

When asked about the experience of receiving support during lockdown people generally felt well supported by their support workers and the regular phone calls and face to face meetings had helped to relieve some of the isolation of lockdown for many. It was very clear from the responses what a difference housing support had made.

People generally found it easy to contact their support worker, that support was readily available and that the regular contact had been “a godsend”; as well as being a lifeline. It was clear that the regular contact and support had helped a huge number of responders maintain their mental health and had helped to combat isolation and loneliness. One person advised that *“I would not have been able to manage without your support through lockdown and feel that i would not be here now if the support was not there”*.

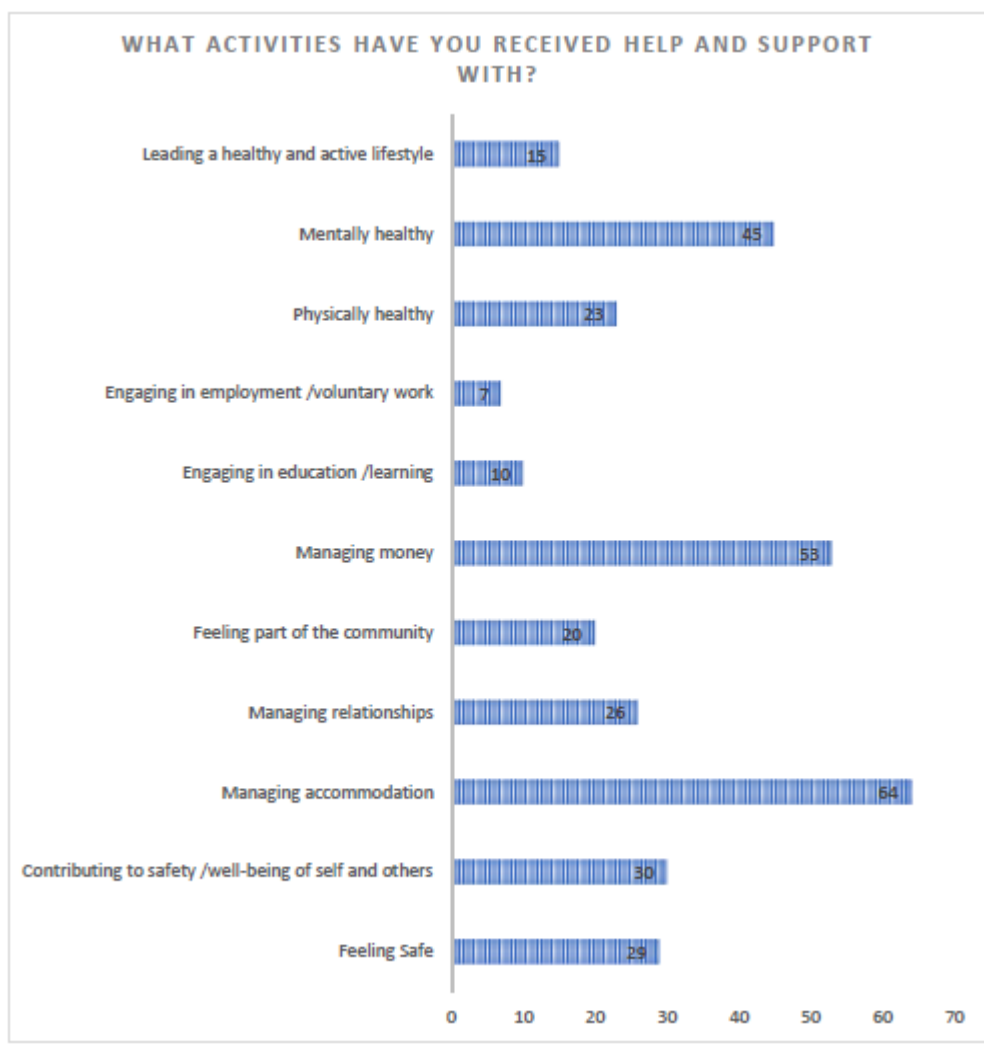
Service User Survey:

Service users also provided feedback through interviews with their support worker regarding how they feel about how they were previously or currently helped or how they feel they could be helped differently in the future. A range of services, including fixed and floating support, were represented, including Cynon Floating Support, Llamau Tenancy Support, Pobl, RCT Supported Housing, Hafod and Trivallis.

38 service users provided feedback, of which 21 were male and 17 were female. There was a wide age range among the service users who provided feedback, with the youngest being 17 years old and the oldest being 85 years old. The mean age of the service users was 37 years old.

The interview questions focused on:

- Identifying the main reasons people needed help
- What has helped them the most with their current situation
- How they could achieve a good life that no longer relies on services
- The main barriers to overcoming homelessness or support needs



Everyone was happy with the support received, but many found it challenging not being able to have face to face visits during lockdown if they were due to have them in their own home. However, everyone reported support workers made alternative arrangements either online or over the phone.

Most could not give suggestions about service could be improved except for the following comments:

'I would like the move on panel and home-finder process not to delay and give us a chance to move on sooner, as we are ready to move on to independent living'

'I had difficulty accessing Legal advice or aid - I was referred to Citizens Advice and they passed me on to someone else. I didn't feel I had support in this area'

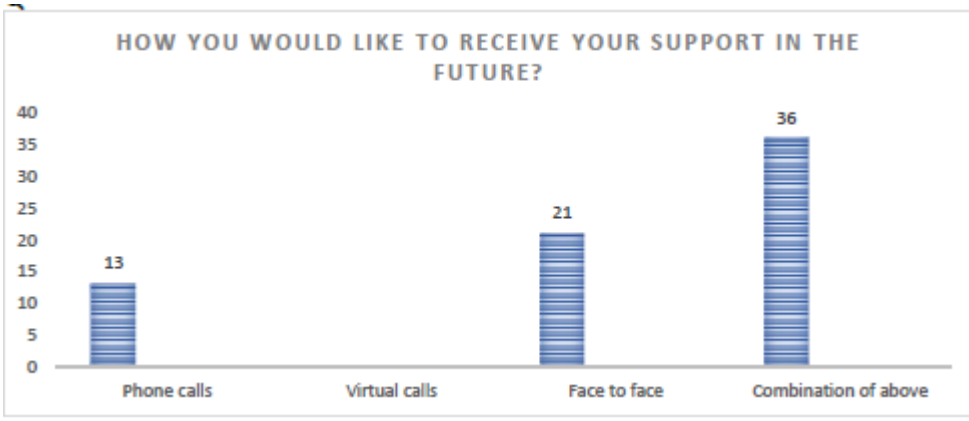
'There are not enough temporary accommodation placements.'

'Yes, there are barriers, but I think is more to do with funding and the government.'

'Would have like support with being part of the community and further education but due to Covid lockdown these could not be done.'

'I need Psychological support, but I have been referred to GP.'

'Just be nice to have some face-to-face support when things settle down'



In line with the feedback which highlighted the difficulties people had with accessing support digitally; overwhelmingly people would like to receive future support either face to face, by phone or as a combination.



The reasons given by those who struggled to receive support are as follows:

- I struggle with depression
- I was told there is a long waiting list.
- Housing was harder to get hold off as were other services
- Found it very difficult and experienced a lot of fighting and arguments at home.
- I want to be re housed in assisted living which social services are assisting in.
- I was struggling so phoned my support worker and she started supporting me again.

Housing Support Outcomes

Headlines

There is little data available on the outcomes of support, making it difficult to understand why support ended in a planned or unplanned way and whether the outcome was satisfactory to the client.

The new outcomes framework needs to be developed and implemented to fully understand what support is achieving.

Services are seeing more clients with needs that are higher than the service was set up to meet.

The waiting lists show that there is a risk that the needs of young people are not being fully met by the current service provision.

This section reviews the outcome data on HSG services (as separate to homelessness duty outcomes)

Until recently RCT have used the Welsh Government Outcomes Framework.

As part of the terms and conditions of the grant, each Local Authority has to complete the Welsh Government outcomes template to evidence the Programme. The current measurement of support is based on the Welsh Government's Outcomes framework this has 4 main heading and 11 subheadings; they are:

Promoting Personal and Community Safety

- Feeling Safe
- Contributing to the safety and wellbeing of themselves and others

Promoting Independence and Control

- Managing accommodation
- Managing relationships
- Feeling part of the community

Promoting Progress and Control

- Managing money
- Engaging in education/learning
- Engaged in employment/voluntary work

Promoting Health and Wellbeing

- Physically healthy
- Mentally healthy
- Leading a healthy and active lifestyle

However, the outcomes framework, has been found not to be fit for RCT purposes, and so a new outcomes framework is in development with Welsh Government

Work is on-going at WG in regard to introducing a Single Outcome Frameworks across both HSG and CCG, which has been delayed as a result of the pandemic. This comes with an expectation that departments will demonstrate that all projects are developed with integration and collaboration at the forefront, looking at co-commissioning where possible and integration amongst the grants to deliver the best outcomes for the service user in the most efficient way.

Outcomes for Supported Accommodation

Data provided by the Council shows that:

- 102 Individuals moved into Supported accommodation during 2020-21
- 83 individuals ended support 2020-21

The tables below show the outcome at the end of support.

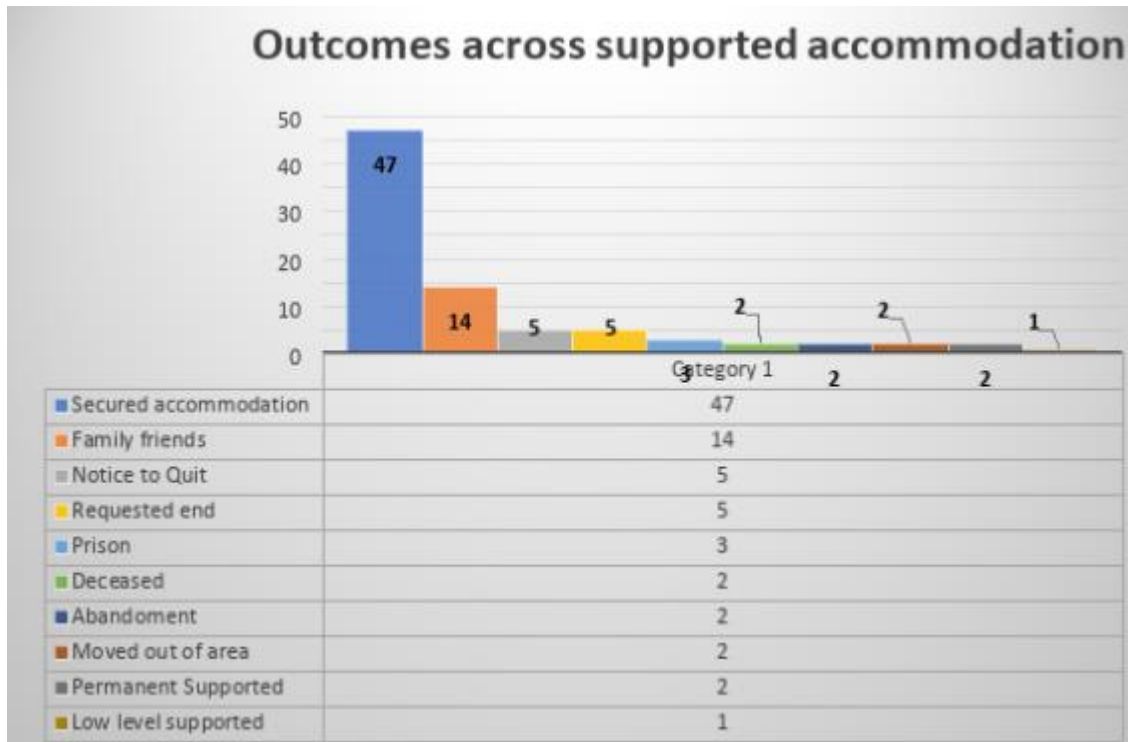


Table 9 Outcomes across Supported Accommodation 2020/21

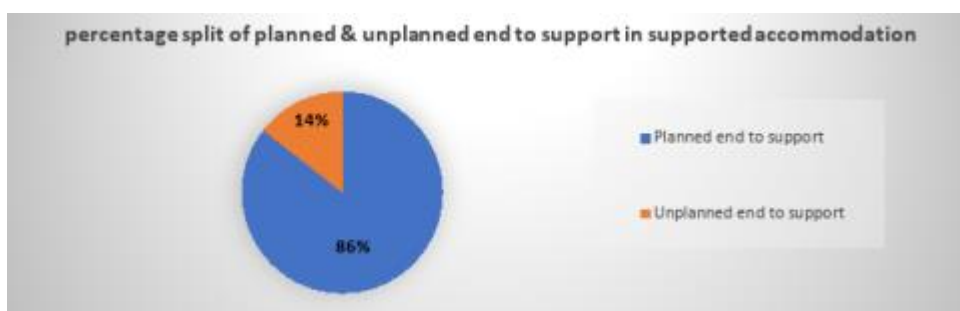


Table 10 percentage split of planned & unplanned end to support in supported accommodation

This would indicate that overall supported accommodation projects were effective at moving people on to appropriate accommodation in a planned way.

Although it is not reflected in the data, it has been noted in stakeholder feedback that service user's mental health needs have increased, which has then impacted their substance misuse. This can cause challenges to support and engagement.

Specialist services for those clients with support needs around substance misuse is a common barrier. Referrals are submitted to the specialist services, however due to the lengthy timescales

from referral to receiving the specialist support, this impacts on the client's engagement whilst in a supported accommodation environment.

Outcomes for Floating Support

The number of clients ending stage 3 floating support during 2020-21 was 2547. The tables below breaks down the reasons for support coming to an end.

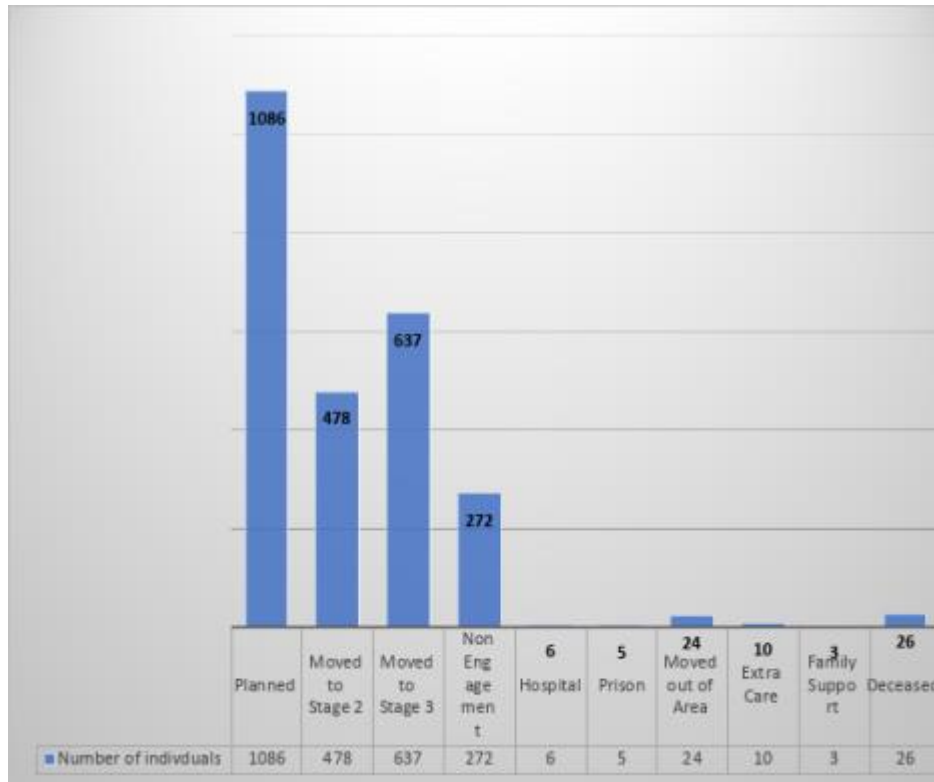


Table 11 2020-21 number of clients ended support

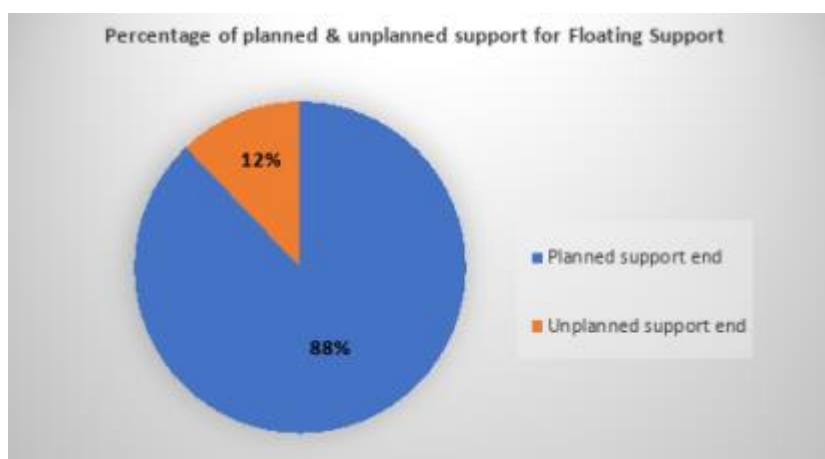


Table 12 planned & unplanned support for Floating Support

As stated above, the current outcomes framework does not give the information needed to understand fully how successful floating support is for clients. However we can see that a

significant percentage of clients leave the service in a planned way which may indicate that support needs have been met.

Unmet Needs

Understanding unmet needs is a significant challenge. However, waiting lists give an indication of unmet need in the community:

Supported Accommodation

Waiting list at the end of March 2020-21

20 individuals

- 9x High level 24hr supported (Adults)
- 6 x High level 24hr supported (16-24)
- 2x Medium level 9-5 (Adults)
- 2x Low Level (Young people -16-24)
- 1x Low Level (Adults)

Waiting list as at 1 September 2021

21 individuals waiting for support on 1-921

- 7 x High level 24hr supported (Adults)
- 12x High level 24hr supported (16-24)
- 2x Low Level (16-21)

This shows an increase in the need for supported accommodation for people 16-24 years in the county. However, the challenges with taking snapshots like these is that all intelligence on referrals, throughput and external factors leading to an increase in referrals needs to be reviewed at the same time to understand the whole picture.

Appendices

Appendix 1: Other Housing Support Grant Services

Housing First

Housing First in RCT is funded by the Supporting People Grant and consists of four projects:

- the Wisdom Project,
- The Assertive Project,
- the Rapid Response Project and
- the Young People (16-24) Project.

Housing First Projects

Wisdom Project

The Wisdom Project works with offenders who present with a high level of risk and have difficulty in securing housing, including those with complex needs who sit outside current arrangements in place for the rehousing of Multi-agency Public Protection Arrangements (MAPPA) designated offenders.

Performance data

	2017/2018	2018/2019	2019/2020	2020/2021
Number of referrals	1	4	5	1
Number of individuals that have ended support	0	1	4	1
Reason for support ending	N/A	Return to prison (1)	Return to prison (1) Support completed (3)	Return to prison (1)
Number of Service users supported	1	5	9	6

The Assertive Outreach Project provides independent and permanent accommodation for offenders, offering a broader housing-led approach, and providing additional support where required.

The properties made available for the project will be subject to the needs of each individual based on critical factors including their support needs and their links with friends and family. The properties will be provided by each of the housing providers with support arrangements made available by POBL. The properties made available for the project will be at the discretion of each Registered Social Landlord and will sit outside of the Rhondda Cynon Taf Allocation scheme arrangements including any local letting plans or targets in an area. The project provides furnished one-bedroom general needs accommodation in consideration of the current service delivery model.

Performance Data

	2019/2020	2020/2021
Number of referrals	12	5
Number of new individuals into the project	12	5
Number of individuals that have ended support	1	1
Reason for support ending	Refused support/prison	Prison
Number of Service users supported	12	16

The Rapid Response Project started in October 2019 and was developed by the Council to support individuals who present themselves as homeless and are repeat offenders. The project aims to support individuals with complex needs with the objective to prevent re-offending in the future. The project has been set up to provide an effective multi agency response based on the Housing First principles to individuals prior to leaving HMP Cardiff and Eastwood Park.

Following acceptance of an individual for the project, the Housing Association takes responsibility for sourcing a suitable property.

Intensive person-centered support is provided by Pobl along with the Housing Association's Housing Officers daily, tapering off to every other day subject to the individual's needs.

When service users are matched to a social housing property, the project fully furnishes the property for the service users, which enables the service user to move into a property that they can call home and negates the issue of them having to furnish it themselves, which is very often difficult due to lack of funds. The project also pays for one year's TV license for the service users, this is also a great help to them as it assists to manage one utility bill. Service users often get overwhelmed with paying utility bills as many have not done this before, but support is provided to empower them and give them the skills and tools required to manage their finances and their tenancy.

Performance data

	2019/2020	2020/2021
Number of referrals	7	1
Number of individuals that have ended support	0	3
Reason for support ending	N/A	Return to prison (2) Deceased (1)
Number of Service users supported	7	8

The Young People Project provides an effective multi agency response to prevent homelessness for young people aged 16 – 24 with highly complex and challenging needs, who are furthest away from independence and have disengaged from more traditional pathway services.

The model does not simply replicate adult models for Housing First, but also meets the developmental needs and capacities of young people.

The project provides up to 10 units of dispersed supported accommodation to young people with complex needs and a history of repeat homelessness. The young people who are supported on to the project all have a care background and have been supported by Children and/or Adult Services.

The properties made available for the project are subject to the needs of each young person based on critical factors including their support needs and their links with friends and family.

The properties are provided by each of the Housing Associations (Cynon Taf Community Housing Group, Hafod, Newydd, RHA Wales, Trivallis and Wales and West Housing) with support arrangements made available by Llamau.

Performance Data

	October 2019 - March 2021
Number of referrals	10
Number of referrals accepted onto the project	7
Number of individuals that have ended support	0

Floating Support

The Locality Based Floating Support service was implemented on April 1st, 2019. Support is available to anyone in Rhondda Cynon Taf and is provided by three support providers, each one responsible for one locality:

- Rhondda Hafod,
- Cynon Llamau
- Taf Trivallis

Each provider operates a triage service based on presenting level of support need i.e., intervention and prevention, housing related support and low-level ongoing support in which one support worker can assist the service at all levels. Each provider assists with all aspects of housing related support.

The referral comes into Supporting People's Single Point of Access (SPA), the application is processed based on area, the Supporting People team are notified of a vacancy by the support provider, referral is assessed with the provider determining support needs and service is provided based on presenting need. Throughout support, providers will refer service users to appropriate agencies if required.

Supported Accommodation

RCT Refuge Provision – Mitchell Terrace, Tonypandy

The Council is working in partnership with United Welsh Housing Association, who have provided 4 units of accommodation, to offer refuge provision to house 4 women and their children fleeing domestic violence

Changes to capacity for 21/22

Mill Street Hostel

Temporary Accommodation Hostel for the homeless that present to the housing advice centre and are part of the housing advice pathway. It is located at the centre of Pontypridd Town, the building is owned by RCTCBC, and a lease agreement is currently in place with Pobl, who are commissioned to provide the support on site. Residents are to stay at Mill Street for a minimum of 3 months and a maximum of 6 months before they are either found alternative permanent accommodation or provided with further support by the way of specialist supported accommodation schemes.

The hostel has 12 supported accommodation units, with a communal lounge, kitchen bathroom and laundry room for the residents to access. Mill Street is also staffed 24/7 with a reception located at the main entrance. The hostel also has training rooms, office space and meeting rooms that are used by the staff and residents at the hostel, as well as the occasional use by RCT staff.

Supported Lodgings Places

The Supported Lodgings Scheme provides supported accommodation to young people aged 16 to 21 years of age, by enabling them to access lodgings in approved private households within RCT. It is part of a range of accommodation options for young people supported by the 16+ Teams.

Other services

Get Ready and Move On (GRAMO)

Set up in 2018/2019 as part of Rhondda Cynon Taf County Borough Council's response to the Housing (Wales) Act 2014 requirement to formulate and adopt a homelessness strategy. After the Council's Strategic review of the way money was spent a portion of the £9 million of the funding provided by the Supporting People Grant (SPG) was used to set up the service.

The project is delivered in partnership with Registered Social Landlord Trivallis, who also contribute financially. The project provides information on all aspects of being a good tenant such as paying utility bills to just general day to day management of money and tasks with the aim of keeping their tenancy long term. It is there to support care leavers and residents placed in the Council's hostels, supported accommodation and those stepping down from specialist adult care placements.

Mediation

Mediation has been in use for a number of years among some voluntary groups working with young homeless people. In some cases, qualified mediators deliver it, and in others project workers provide it more informally. Mediation is usually only one aspect of the support made available by such projects; other services offered may include housing advice and information, practical support, and temporary accommodation. Mediation may take place between the young person and their parents, or anyone else who has been providing them with a home, or, more rarely, between the young person and the hostel or supported housing.

Youth Homeless Support Worker

The outcome of a recent review of the service resulted in the appointment of a Youth Homelessness Support Worker in April 2021. This new role will deliver more focused support to young people and will assist with the workload of the Youth Homelessness Officer. Previously the service was funded via Youth Support Grant and delivered through the Emphasis Project. The new project will provide immediate and crisis provision and offer 1:1 support to young people aged 16 – 24, who experience family breakdown and are at risk of becoming homeless. The project will work closely with the Council's Housing Solutions Team to offer support to young people who present as homeless.

The focus of the role is prevention and assisting the young person in remaining at the property or a return home.

MIND Resilience

The Resilience Project is run by Cwm Taf Morgannwg and encompasses Bridgend, Merthyr Tydfil and Rhondda Cynon Taf. Its aim is to support those at risk of homelessness and have mild to moderate mental health conditions.

In Rhondda Cynon Taf, the project works with homeless hostels to assist and support them to become more psychologically informed environments as well as making homeless people more resilient. MIND describe resilience as 'Taking steps to look after your wellbeing can help you deal with pressure, and reduce the impact that stress has on your life. This is sometimes called developing emotional resilience

Citizens Advice

RCT's Citizens Advice Homelessness Prevention Project was established in 2018 to support the Council in meeting its statutory duty under the Housing Act 2014 to prevent and relieve homelessness. Through the provision of advice and financial assistance to people who are receiving support from RCTCBC's Housing Solutions team and Supporting People providers in RCT, its aim is to stabilise and improve the financial situation of vulnerable people in RCT, who are facing problems such as debt, employment, tenancy management, substance misuse, domestic abuse and mental health issues and prevent homelessness at the earliest opportunity.

(RCT Rapid Homelessness Review August 2021)

Appendix 2

An example of a prevention programme undertaken by another local authority in Wales. The observations and recommendations of this work closely aligned with the feedback from stakeholders in RCT.

	Youth Service (YS) Input	Activities	Youth Service Impact	Future Outcomes (by age of 25)
Primary Prevention Building resilience – creating the conditions in which problems do not arise in the future. A universal approach. Primary prevention averts new cases of homelessness by intervening well before homelessness may occur	<ul style="list-style-type: none"> • Appropriately trained youth workers • Cabinet champion of Primary Prevention • Schools and YS to introduce wellbeing measuring tools for all children and young people 	<ul style="list-style-type: none"> • Helping young people develop life skills • Helping young people with their personal development • Helping young people with health and well-being matters • Facilitate education around targeted subjects for all as opposed to targeted groups – reducing stigma and ensuring universalism • Life skills training • Budgeting • Managing accommodation • Promote awareness of realistic accommodation options 	Young people develop knowledge and skills	I have a safe, secure place to live
	<ul style="list-style-type: none"> • Corporate approach to school-aged interventions 	<ul style="list-style-type: none"> • Awareness raising of homelessness for all young people • Agree coordinated 	Young people aware of key issues for homelessness	I have completed my formal education/schooling I have skills,

	<ul style="list-style-type: none"> Trained youth workers 	<p>Programme of support/intervention with schools/Careers Wales and local colleges for all from 14 years</p>		<p>training and/or qualifications that allow me to be work ready</p>
	<p>Youth Service (YS) Input</p>	<p>Activities</p>	<p>Youth Service Impact</p>	<p>Future Outcomes (by age of 25)</p>
	<ul style="list-style-type: none"> Youth workers Corporate sign up to assessing, monitoring, and enhancing relationships and purpose as a key activity for social care, education, housing, and Youth Service. 	<ul style="list-style-type: none"> Participation in multi-agency casework around individuals Monitoring circles of support Putting in place activities that encourage connections with other people and build on existing strengths/interests 	<p>Young people receive tailored multi-professional support</p>	<p>I have stable, consistent, healthy close relationships</p> <p>I have a supportive relationship with my family</p>
	<ul style="list-style-type: none"> Youth workers 	<ul style="list-style-type: none"> As above Signposting young people to appropriate advice and guidance services Youth workers trained in mental health first aid YS activities designed to minimise isolation and loneliness 	<p>Young people access appropriate advice and guidance</p>	<p>I have good mental health</p>

	Youth Service (YS) Input	Activities	Youth Service Impact	Future Outcomes (by age of 25)
	<ul style="list-style-type: none"> Youth workers 	<ul style="list-style-type: none"> Facilitate learning activities that enhance life and independent living skills for all young people Inclusive learning for all with specific reference to groups at high risk of homelessness 	All young people are able to access youth services	I'm financially stable
	<ul style="list-style-type: none"> Youth workers 	<ul style="list-style-type: none"> As above Assist Education Welfare provision (the lead) where appropriate with young people at risk of exclusion to remain in school and complete their education Contribute to a coordinated Programme of support/intervention with schools/Careers Wales and local colleges for all from 14 years 	Young people supported to complete education	I have the skills to live independently

	<ul style="list-style-type: none"> Youth workers 	<ul style="list-style-type: none"> Supporting young people to build friendship networks with their peers Recognising young people's strengths and building on these as a vehicle for developing healthy relationships (including across generations). 	Young people have friendship groups/activities in their community	I have hobbies and interests that I follow
	Youth Service (YS) Input	Activities	Youth Service Impact	Future Outcomes (by age of 25)
	<ul style="list-style-type: none"> Psychologically informed youth work practice 	<ul style="list-style-type: none"> Youth workers recognise early mental health challenges, provide Tier 1 mental health intervention and signpost to other services where appropriate YS activities designed to minimise isolation and loneliness 	Young people have skills to manage their own mental health	I have developed resilience and/or good coping strategies following a pattern of early trauma

<p>Secondary Prevention Targeting action towards areas where there is a high risk of a problem occurring. A targeted approach, which cements the principles of progressive universalism</p> <p>Secondary prevention treats new cases as early as possible, often when a young person presents to LA</p>	<ul style="list-style-type: none"> • Targeted youth service where specialist funding allows for extra provision (above and beyond the statutory universal provision) • Target specific funding to support 	<ul style="list-style-type: none"> • Recognising young people at early risk of homelessness • Providing tailored advice and guidance to individual circumstances • Supporting young people to access family mediation • Work within a coordinated plan of intervention with schools, social care and 3rd sector • Use tool to assess 'high risk' young people 	<p>High risk young people are identified, and tailored support put in place</p>	<p>Ended a pattern of recidivist behavior/use of services</p>
	<ul style="list-style-type: none"> • Skilled youth workers • Dedicated team to work with NEET young people 	<ul style="list-style-type: none"> • Supporting young people not in employment education or training into pathways for employment • Work within a coordinated plan of intervention with schools, social care and 3rd sector, colleges etc. 	<p>Young people identify and follow a future training and employment path</p>	<p>I have not been in prison/secure detention for some time</p>

		<ul style="list-style-type: none"> Begin transition planning from 14 yrs. 		
	Youth Service (YS) Input	Activities	Youth Service Impact	Future Outcomes (by age of 25)
General	<ul style="list-style-type: none"> Youth service managers External contracts 	<ul style="list-style-type: none"> Youth Service leadership engaged in multi-agency planning for homelessness prevention and service delivery at Gwynedd level Contracts reflect primary prevention of homelessness: <ul style="list-style-type: none"> - inclusion - psychologically informed - signposting to advice and guidance Support for approaches to peer support groups for high risk/excluded groups: <ul style="list-style-type: none"> - LGBTQ+ - neuro-linguistic diversity All contracts reflect primary prevention of homelessness as key focus 	<p>Youth Service is part of a multi-agency response of preventing homelessness</p> <p>All services understand and follow a preventative ethos to homelessness</p>	

Rhondda Cynon Taf County Borough Council

Draft Housing Support Programme Statement of Need

January 2022

Contents

[Summary of needs](#)

[Homelessness](#)

[COVID-19](#)

[Accommodation](#)

[Support Needs](#)

[Key Issues](#)

[Summary of needs](#)

Rhondda Cynon Taf (RCT) is the second largest authority in Wales with a population of 234,410 according to the 2011 census. It covers an area of 424 square kilometres and borders Merthyr Tydfil and Caerphilly to the east, Cardiff, and the Vale of Glamorgan to the south, Bridgend and Neath Port Talbot to the west and Powys to the north. The principal towns in the area are Aberdare, Llantrisant and Pontypridd.

RCT has an increasing older population and features some of the most deprived areas in Wales. However, the pattern of deprivation across RCT is uneven and is concentrated areas, in large part concentrated along the Cynon Valley in communities such as Penrhiwceiber and Pen-y-waun, and along the Rhondda Valley in communities such as Tylorstown and Treherbert.

[Homelessness](#)

Outcomes for people presenting to the Council for both prevention and relief of homelessness are on average better than the national average and other Local Authorities in the surrounding region, suggesting that RCT was performing well-above average in the run up to the Covid-19 pandemic. Data shows that where assistance for homelessness is provided outcomes are largely positive for duty to prevent, help to secure and final duty. There has been significant improvement in outcomes following the provision of assistance since 2015, for both prevention and relief. Single person households have consistently accounted for the majority of cases where the Council have provided assistance to those who are homeless or threatened with homelessness. Single male applicants are the largest proportion of applications made by those who have been homeless within the last two years. The proportion of single male applicants has risen from 46% of the total in 2017 to 58% in 2021.

[COVID-19](#)

COVID-19 has had a huge impact on the numbers of vulnerable people now owed a homelessness duty, and the range of complex needs that need support.

It has led to a rapid increase in the numbers of people in temporary accommodation and reduction in availability in the Private Rented Sector.

The pandemic has also highlighted their need for system partners such as Housing, Health and Probation to work better together and improve their data sharing.

Accommodation

Single male applicants account for more placements into temporary accommodation than all other households combined, with single female applicants accounting for the second highest number of placements.

40% of the people placed in temporary accommodation had been placed multiple times, and the number of people requiring temporary accommodation has significantly increased.

One bedroom housing is the highest need across all allocation bands, 91.25% of applicants for housing are assessed as having a low or no housing need

Meeting the needs of urgent housing or adaptations for people with a physical disability is a significant challenge. Although some suitable temporary accommodation is in place, frequently the Council do not have sufficient time or information to meet needs quickly. Better data sharing and joint working with Health is needed.

Since the pandemic and the increase in house values in RCT, many private landlords now no longer want to work with Council referred clients, preferring to find private tenants.

The Council have secured funding from Welsh Government to set up the Social Lettings Agency. This is improving access to the private rented sector but it's impact is slower than was hoped because of the current challenges engaging private landlords.

Support Needs

RCT has amongst the highest reported incidences of substance misuse, mental illness and poor well-being in Wales.

The most common reason for priority housing need in RCT is mental health and housing problems are frequently given as a reason for a person being admitted or re-admitted to inpatient mental health care. People with mental illness are far more likely to live in rented accommodation and their mental ill-health is often given as a major reason for tenancy breakdown.

Where several agencies are involved, information sharing arrangements between partners should be improved, and aligned with agreed national frameworks to better inform future service planning

The Council has previously seen a year-on-year increase in HSG mental health referrals however, it is anticipated that this will rise significantly in the aftermath of the COVID-19 pandemic.

RCT CBC Adult Social Services utilise HSG funding to provide specialist mental health accommodation projects. There is insufficient data on support outcomes achieved by HSG funded services for specialist mental health placements to be able to draw conclusions on their effectiveness.

There are high numbers of people requiring HSG services that have co-occurring mental health and substance misuse issues. These are particularly challenging for support services to get NHS mental health and substance misuse treatment services involved. A new specialist regional service is now in place, but it is too early to fully evaluate.

For ex-offenders, there are a range of Housing First projects to meet their needs. However, there are multiple challenges in meeting their housing and support needs.

The Council Single Point of Access saw an increase in referrals from vulnerable families and Vulnerable Single Parent/Expectant Mothers each year for the last three years.

Single people aged 16-25 are the highest proportion of homelessness applications to the Council, increasing year on year and through the COVID-19 pandemic.

There is insufficient data on support outcomes from supported lodgings for young people which although arrangements are in place with Children's Service to start to develop and effectively monitor the effectiveness of this housing option for young people leaving care.

RCT CBC Adult Social Services Learning Disability accommodation services utilise HSG funding. There is insufficient data on support outcomes achieved by HSG funded services for people with learning disabilities to be able to draw conclusions on their effectiveness.

HSG funds specialist placements for people with physical disabilities within Adult Services. There is insufficient data on support outcomes achieved through HSG funded services for people with physical disabilities and sensory impairments.

People with physical difficulties apply for rehousing from hospital often with very short timescale. RCT need more data and notice at an earlier stage. Going forward this needs corporate pathway signed up by all partners.

Increasing numbers of referrals are unable to be accepted to Refuges in RCT because of levels of need and/or risk.

Whilst homelessness applications for those fleeing domestic abuse are not high there is a need for service development particularly in respect of enhancing domestic abuse perpetrator Programmes in Cwm Taf Morgannwg.

Services are seeing more clients with needs that are higher than the service was set up to meet.

The waiting lists show that there is a risk that the needs of young people are not being fully met by the current service provision.

There is little data available on the outcomes of support, making it difficult to understand why support ended in a planned or unplanned way and whether the outcome was satisfactory to the client. The new outcomes framework needs to be developed and implemented to fully understand what support is achieving.

Key Issues

The needs assessment has highlighted a number of issues that need to be reflected in the Housing Support Programme Strategy:

- The need for improved data sharing between the Council and HSG providers with Health, Probation and Education.
- The need for better joint working and access to services for people with mental health, substance misuse and where they are co-occurring.
- Continue to develop services for Violence Against Women, Domestic Abuse and Sexual Violence (VAWDASV)
- Build on the successes of the Housing First model in RCT towards Rapid Rehousing.
- Develop new approaches to providing support and accommodation for single homeless people
- Understand, what is needed to utilise private rented sector accommodation
- Meeting the increasingly complex needs of people presenting as homeless in HSG services
- Improve multi-agency responses and system working with reference to those who have complex and multiple support needs.
- Implement the new outcomes framework when agreed across HSG, Adult Social Care and Children's Services