



Oxfordshire Trailblazer: Homelessness Prevention

Year 1 Review

September 2017 – September 2018



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1. EXECUTIVE SUMMARY

The Oxfordshire Homelessness Prevention Trailblazer represents a multi-agency approach to tackling systemic issues in the public sector which can increase the risk of homelessness to individuals. The two year programme runs from September 2017 to August 2019. It received £790,000 from the Ministry of Housing, Communities and Local Government and Communities (MHCLG), and a further £100,000 from the Oxfordshire local housing authorities.

This report outlines the work of the first year of this two year programme. The first six months were spent researching the issue. This included analysis of homelessness data, qualitative stakeholder consultation and piloting of system interventions. Following the research a number of services were commissioned and the second six months has seen those services working holistically with a range of actors within public service sectors including those at risk of homelessness, and the professionals engaging with them.

Chapter two sets out the background to the Trailblazer bid and the broad objectives of the programme. These can be summarised as intervening as early as possible to prevent people at risk of homelessness reaching crisis point. It also provides an overview of the chronology of the project so far, showing how three key themes were developed; targeted upstream prevention, person centred resilience and strategic and integrated system change.

The data analysis which was carried out at the start of the programme is outlined in chapter three. Initially the statutory homelessness returns from the Oxfordshire local housing authorities was evaluated. This showed that the number of single people accepted as statutory homeless was disproportionately low compared to the volume of single people that approach housing teams for help. Data relating to housing issues for the health and criminal justice settings was also analysed. This showed that the presence of a housing issue could lead to a significant delay in discharge from hospital once a patient is medically fit. Within the Oxfordshire prison system, 88% of people entering prison with no fixed address, leave prison with the same status. These findings informed the design of Trailblazer services.

The appreciative enquiry conducted as part of the research phase is the subject of chapter four. Workshops were run with front-line housing staff, people with lived experience of homelessness and a range of professionals from health, criminal justice and children's social care. People with lived experience expressed a sense of hopelessness about their situation and difficulties in accessing services, but reflected positive experiences of being supported by other people with lived experience. Professionals within the systems felt there was a significant need to improve connections and relationships across statutory and non-statutory services. Awareness of the housing options available to individuals and the local housing authorities' role in this process was low. As a result, early indicators of homelessness were not being acted upon.

Chapter five outlines the development of the first of three strands of activity within Trailblazer. The research that had been undertaken suggested that there may be some benefit from embedding housing experts in other statutory systems. One of the Trailblazer team piloted this approach in the John Radcliffe hospital, basing themselves with the discharge and social work teams. This trial proved successful by helping to speed up the discharge of a number of patients. The Trailblazer team then developed an embedded housing worker model with Connection Support, to provide two embedded housing workers in the health, criminal justice and children's social services setting. The embedded workers have been trying to identify people at risk of homelessness in each setting in order to carry out prevention work.

The second Trailblazer service, Community Navigators, is covered in chapter six. The programme wanted to build resilience throughout the county and enable households and individuals to cope better with life and prevent housing related crises. This built on the feedback from people with lived experience who had reflected a sense of hopelessness about their situation, and had struggled to access the services they required. A Community Navigator service was commissioned to act as a navigator of services to people at risk of homelessness. Aspire Oxford are delivering this part of the programme, providing support, brokerage and advocacy to their clients, to empower them to engage with statutory services.

Chapter seven describes the Champions' Network which is the third element of the Trailblazer. The aim of this strand of the programme is to create a network of housing expertise across other statutory services. The network is facilitated by the Trailblazer programme team who have delivered training and network events on a bi-monthly basis. The network has been used to help design a single countywide process for the new "duty to refer" obligation brought in by the Homelessness Reduction Act (2017).

Chapter eight explains Trailblazer's approach to managing the learning that is developed within the programme. This is facilitated by the programme's learning partner, Ratio, who have applied an approach called Era 3 learning. Practitioners within the services are brought together on a monthly basis to talk about their work, both what has functioned well, and what hasn't. The focus is on the practice of the embedded housing workers and community navigators, and the system barriers that they encounter.

Finally chapter nine closes the report by looking ahead to the second and final year of the programme. This will focus on achieving some legacy for the programme, through changing systems in order to reduce the risk of homelessness, or in exploring options for new services based on the experience of the Trailblazer programme.

2. INTRODUCTION

The Homelessness Prevention Trailblazers are a national programme funded by the Ministry of Housing Communities and Local Government (MHCLG) which commenced in spring 2017. The programme's objective was to fund innovative new approaches to preventing homelessness, and develop approaches that could be applied across England by Local Authorities to meet their duties under the Homelessness Reduction Act (2017).

From the outset, the aim of the Oxfordshire Trailblazer was to reduce both the number of people becoming homeless, and those becoming at risk of homelessness. The Trailblazer set out to reduce the number of presentations at Local Housing Authorities, by intervening earlier with people, before they reach crisis.

The Oxfordshire Trailblazer has developed innovative approaches to intervene with people to prevent homelessness much earlier than often happens. This approach is called "working upstream", and has been applied in health, criminal justice, and children's social care settings. This has required a strategic and integrated approach across the county.

The bid was submitted on behalf of the Oxfordshire District Councils, with support from the Oxfordshire Clinical Commissioning Group; County Council; and other partners (Probation, Children's Trust Board and a wider provider network of voluntary and community agencies). Partners agreed to make far less of a distinction between households that would be statutory homeless as opposed to non-statutory homeless, as the overall aim was to reduce homelessness, not to just reduce pressure on statutory services. The bid was seen as an opportunity to:

- Develop improved homelessness prevention
- Address some identified unmet needs and improve multi-agency co-operation
- Inform the approach to the new prevention duty in the Homelessness Reduction Act (2017)

Partners agreed that the bid should attempt to achieve:

- Improved options and advice to vulnerable clients (before crisis where possible)
- Reductions in homeless presentations (to Councils and others – especially non-statutory/ non-priority clients)
- A holistic approach to homelessness from all relevant services dealing with vulnerable customers
- An understanding of people's journeys and triggers to fully inform upstream prevention, what prevention services are needed, and which approaches work best

The key partners and stakeholders in the Trailblazer Programme are:

- Local Authority Housing Needs/ Homeless Teams
- Health (Mental Health Partnership inc. acute services & pathway; A&E; Hospital Trusts; OCCG; GPs;)
- Social Care (Adult Care; Early Intervention and Think Families; Safeguarding)
- Criminal Justice (Community Rehabilitation Company; Probation; Prisons; ASB/ Community Safety teams; Domestic Abuse work)
- Day centres, employment, training and education organisations, substance misuse services, housing associations and less conventional services where people may first seek help (community groups etc.)

The Council submitted the funding bid in November 2016, and received notification that this had been successful in securing £790k of funding for two years (17/18 & 18/19) in December 2016. The programme has been enhanced by a further £100k provided by the Oxfordshire district councils and became fully operational in September 2017 following the initial recruitment phase.

Research phase

The first six months of the project were spent researching homelessness data, engaging with stakeholders and designing services. The research was used to set benchmarks in order to measure the impact of Trailblazer. Key findings in this phase included:

- 43% of prisoners released from Bullingdon Prison into Oxfordshire are discharged with “no fixed abode” or their expected housing outcome is “not known”
- 88% of Oxfordshire prisoners that enter Bullingdon prison with “no fixed abode” leave with “no fixed abode”
- The average Delayed Transfer of Care* in Oxfordshire is 19.8 days, but when only considering cases where housing is the reason for delay, it is 31.8 days

*this is the period where a patient is medically fit, but cannot leave hospital for a variety of reasons, include those related to their housing situation

The Trailblazer development was also informed by an appreciative enquiry. This was a qualitative piece of stakeholder engagement which asked questions about the best way to conduct homelessness prevention, rather than focussing on correcting problems in the current system. The enquiry engaged with front line staff, people with lived experience and professionals working across the systems. Key insight from people who participated was that they would like:

- Better access to housing and homelessness advice earlier, ideally on their own front lines
- Improved relationships across systems, with named contacts
- Not to be judged by the services meant to be supporting them
- Help to deal with the lack of self-esteem which prevents them from approaching the right support service

The research led to the development of three models based on early prevention, improving quality and timeliness of advice and support. These initiatives are summarised below.

Targeted Upstream Prevention (Embedded Housing Workers)

This is a commissioned service to identify households who may be at risk of homelessness, and intervene before any crisis point, when households may need to seek help from local authorities or other statutory agencies. This service is provided by Connection Support, who employ 5 full time equivalent (FTE) Embedded Housing Workers (EHWs) based in children’s social services, criminal justice and hospital settings around the county.

The client of the EHW’s is the system itself, rather than the individuals needing support. Their role is to support professionals in the setting to deal with their client’s housing issues, thereby passing on skills and developing relationships across systems.

In respect of health the officers are embedded in all of the general hospitals across Oxfordshire and in mental health wards. The work started with Delayed Transfer of Care

cases, and progressively moved upstream by attending ward rounds with social workers, enabling hospital staff to spot indicators of homelessness.

In the criminal justice system, EHWs are based in Community Rehabilitation Centre and National Probation Service offices in the community, as well as at Bullingdon and Spring Hill prisons to support resettlement staff to prevent individuals leaving prison with no fixed abode.

The officers embedded in Children's Social Services sit with LCSS and Early Help, to provide robust housing assistance at the earliest possible opportunity.

Person centred Resilience Service (Community Navigators)

In the first 3 months, the Trailblazer team developed a resilience map highlighting the wealth of services available across Oxfordshire. A broad spectrum of services was identified but people lacked the confidence to approach them, or were unaware of how to access the services. As a result Trailblazer co-developed an innovation that would embed a number of community navigators across the county in specific settings. The navigators both support and broker services with a focus on empowering individuals to engage effectively and confidently with what they need to prevent homelessness.

The service is provided by Aspire who offer a range of different services to support longer term solutions to preventing homelessness, working with households to build their skills and improve resilience to changes that may otherwise result in them becoming homeless or threatened with homelessness. They employ 5 FTE in a range of settings around the County and use a personal asset based approach to tackle issues of employability, financial resilience and resilience to homelessness. They link in with existing social prescribing initiatives as well as with housing associations and local authority options teams to help prevent evictions and stabilise tenancies. Many of the navigators have lived experience of homelessness which helps with advocacy and peer support.

Strategic and Integrated “systems change” - Homelessness Champions Network

This network has been established to enhance statutory and other agencies' knowledge of homelessness and effective homelessness prevention activities. It provides a forum for co-operation across key services. (e.g. health and criminal justice), and supporting staff in these settings. This work focuses on delivering more joined-up communication, case management and planning. Ultimately it is envisaged that this will bring about system change by leaving a network of skilled housing champions which can be supported by local authorities.

The delivery of these strands is covered in detail in Sections 5 to 7.

Approach to learning

The final element of Trailblazer is a proactive approach to learning that sits across the entire programme. Ratio has been commissioned to deliver this aspect of the programme. The principles underlying the learning process within Trailblazer reflect the ethos of the programme as a whole which is:

- to learn,
- to listen,
- to collaborate
- to build mutually respectful relationships

Ratio's approach is to hold honest and reflective conversations between actors in the system in order to improve practice. Learning and reflection drive improvement and accountability. This focus on learning and knowledge is a deliberate investment in the quality of relationships and underpins a "positive error culture" – one in which talking about mistakes, and the uncertainties that people feel about their practice, is viewed positively. Ratio have shared this approach within the programme, are applying it to the work of the Trailblazer team. Their learning so far is shown in section 8.

Trailblazer's approach to learning helps to define the ethos of the programme. The contracts with commissioned services are viewed as partnerships with learning at the core of all of them. This is clearly articulated within the service specification of each contract. The purpose of structuring the programme in this way is to develop a culture which encourages and enables challenge and honesty between actors. Learning from the data collected in Trailblazer is intended to lead quickly to revision and adaption and iteration.

3. DATA ANALYSIS

At the outset of the project the central Trailblazer team wanted to understand the extent of housing and homelessness issues across Oxfordshire. The Trailblazer team was particularly interested in understanding the main reason for presenting as homeless to a local housing authority (LHA), and whether there were any tangible differences between the five Oxfordshire LHAs. This analysis was completed by looking at historic P1E (statutory homeless applications) returns to central government. However, it should be noted that since April 2018 a new reporting methodology known as Homelessness Case Level Information Classification (HCLIC) has been implemented. This should produce a richer set of data that should allow for more in depth interrogation of homeless approaches, particularly those cases that do not result in a statutory duty to house the applicants. Under P1E, statistics connected to these individuals or households were not recorded.

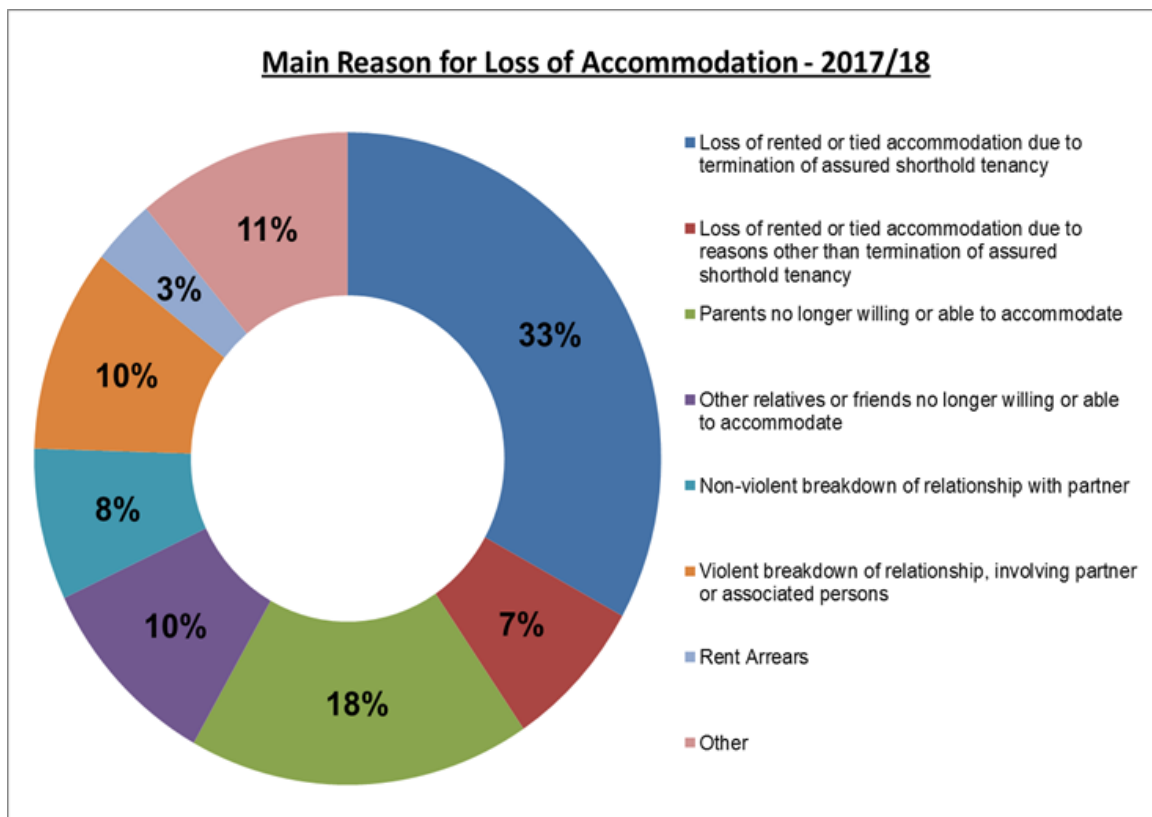
In 2017/18 there was an increase in the number of homeless applications made in Oxfordshire when compared to the previous year; an increase from 616 to 690. 306 (44%) of the applicant households were accepted as being eligible for housing assistance (e.g. a British national, EEA and EU nationals with a right to reside and other qualifying persons based on immigration status), unintentionally homeless and in priority need (certain households that are deemed to be most vulnerable based on known characteristics) and were therefore owed a full duty by the LHA. This number is virtually identical to the previous year's total of 302 (49%) but actually represents a drop in the percentage of homeless applications accepted.

Approximately 36% of homeless applications made in Oxfordshire result in either a decision that the applicant has made themselves intentionally homeless, or they are not considered to be in priority need. This therefore means that these households were not owed any duties under the previous legislative framework. The overall total of these decisions in 2017/18 was 246. This was a significant increase on the previous year (172) and is largely attributable to the decisions taken by West Oxfordshire who have seen their numbers of intentional or non-priority decisions increase from 25 to 88. However as a result of the introduction of the Homelessness Reduction Act (HRA) in April 2018, these types of household are now owed duties to prevent and/or relieve their homelessness and are likely to receive greater support from the LHA as a result.

Diagram 3.1 represents the main reason for loss of accommodation in 2017/18 when a statutory homeless duty was accepted by an Oxfordshire LHA. 40.5% of cases relate to an approach as a result of losing private rented or tied accommodation that is linked to employment. This figure is broadly the same for all of the Oxfordshire districts but the one major divergence relates to Oxford City where 50.5% of all acceptances result from a household losing private rented or tied accommodation.

36.0% of accepted cases were as a result of a non-violent relationship breakdown with a partner, parent, other family member or friend. This represents a decrease in the overall proportion from the previous year (41.6%) and is largely offset by the increase in violent relationship breakdowns, which increased from 6% (18 examples) to 10% (31 examples).

Diagram 3.1



Our analysis of the P1E data demonstrates that the Oxfordshire districts are disproportionately servicing a young population in respect of homeless applications. 81% of all individuals/ households accepted as eligible, unintentionally homeless and in priority need were aged between 16 and 44 (this age range is forced upon us by the configuration of the P1E report). In 2016/17 the proportion was higher at 86%.

Likewise, families with dependent children appear to be over represented. 75% of all acceptances relate to this group but the Trailblazer team has approximated that only 40% of approaches relate to families with dependent children. Conversely the number of single people accepted as statutory homeless is disproportionately low compared to the volume of single people that approach the housing options services. For example, prior to the introduction of HRA in April 2018 the Trailblazer team estimated that only 2.5% of single men that approached the housing options service in Oxford received a full statutory duty. The remainder received general advice on how to resolve their issue but with very little, if any, follow up support.

The introduction of the Prevention and Relief duties, in the HRA, will help to reverse this trend but the analysis did help to shape the Trailblazer programme and the focus of the commissioned services. In particular the programme was interested in how we could support non-statutory single people to prevent homelessness much earlier on in their journey.

Health

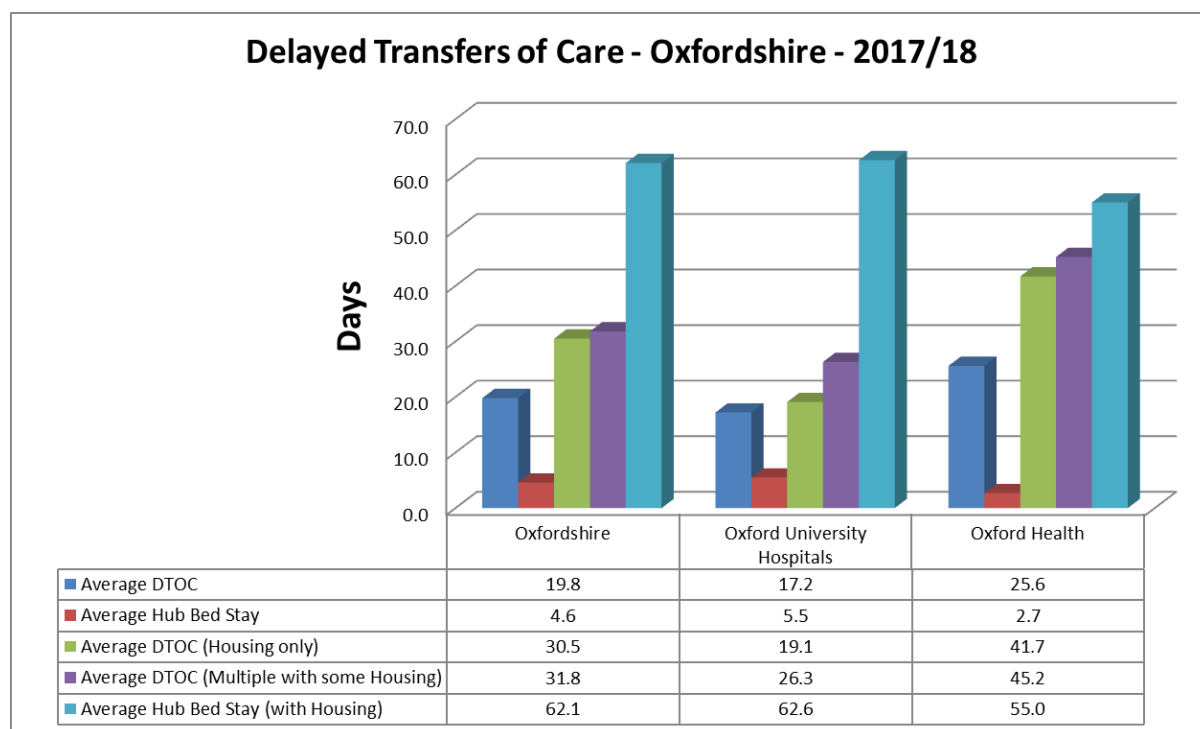
The following information is based on data that has been provided by the Oxfordshire Clinical Commissioning Group. It relates to all delayed transfers of care (DTOC) for the period of April 2017 to February 2018. This is when someone is medically fit for discharge but is unable to go home. This data is collected across 'Oxford Health NHS Trust' (OH) and 'Oxford University Hospitals NHS Trust' (OUH).

Within this timeframe there were 59 delayed transfers of care (DTOC) cases which have specified housing as one of the reasons for the delayed discharge. This resulted in 2,744 days of delayed transfer across Oxfordshire's hospitals and hub beds (additional beds in the community that free up hospital beds and support recovery) when someone was medically fit for discharge. If using the New Economy Manchester model of cost analysis the total cost of these beds to the NHS in Oxfordshire could be in excess of £1.2m (£451 per bed per day). In addition to this there is the unknown social cost of other individuals being unable to receive the treatment they need due to a lack of capacity.

Diagram 3.2 indicates the extent to which housing has an impact on an individual's DTOC across the county. It also indicates the split between OUH, 42 cases, and OH, 17 cases, over 2017/18.

Across the Oxfordshire hospitals the average DTOC case extends to 19.8 days, this figure encompasses all reasons for a delayed discharge. However when you isolate the cases that have indicated housing as the only reason for the delay, the average delay increases to 30.5 days. Equally, if all cases that have given housing as one of multiple reasons for the delay are considered, the average wait jumps to 31.8 days.

Diagram 3.2



The data indicates that there is a significant issue surrounding the use of hub beds for people with housing and homelessness issues. As indicated in the table above, the average use of a hub bed across Oxfordshire is just 4.6 days. However when isolating housing cases this rises to approximately nine weeks. There was one example where an individual was moved to a hub bed which resulted in an additional delay of 146 days.

The data also indicates that there appears to be a more pronounced issue across the OH portfolio in terms of all DTOC. In instances of DTOC involving housing related problems, the average delay can be twice as long as people that have been provided care by OUH (see

the green column in Diagram 3.2 above). It must be noted however that OH have experienced significantly fewer cases than OUH.

Criminal Justice

The following figures are based on information provided by the CRC Resettlement Team at Bullingdon Prison. It relates to information they have been collecting since June 2017 and relates to individuals with an Oxfordshire connection.

In this period 43% of prisoners released from Bullingdon Prison with an Oxfordshire connection are either discharged with 'No fixed address' (NFA) or their expected housing outcome is 'Not known'. This accounted for 112 individuals. As a comparison, only 29% of prisoners enter prison with this as their housing status.

There is a stark contrast between the outcomes for those managed by NPS and the CRC. 48% of CRC managed prisoners are either discharged with 'No fixed address' (NFA) or their expected housing outcome is 'Not known', but this falls to 35% for NPS managed individuals. The lower proportion is expected to be related to the use of approved premises for this higher risk category of prisoner. Work is still being collated to understand the extent of the NFA problem for individuals that move on from approved premises and have a Oxfordshire local connection.

Only 12% of Oxfordshire prisoners that enter the prison system with NFA as their housing status manage to secure some form of accommodation prior to their release. For CRC managed prisoners it is as low as 9.5%. Effectively this means that if you enter prison without a home, it is highly likely that you will leave prison without anywhere to go. In the 10 months monitored only 13 prisoners that had entered prison NFA managed to source new accommodation prior to release. This indicates that much more needs to be done at an early stage if an individual presents as NFA.

Conversely 88% of prisoners that enter prison with a known address, leave prison with somewhere secure to stay. In the 10 months monitored only 19 individuals went from having somewhere to live, to leaving prison NFA.

The data indicates that length of stay does impact on the proportion of prisoners released NFA, particularly for people on very short sentences. For those individuals with a sentence of less than 4 weeks; 56% are released NFA. For people on a sentence of 4-13 weeks; 29% are released NFA. For prisoners on a sentence of between 3 months and a year the figure is 33%. For those individuals serving a sentence in excess of 1 year, 35% are released NFA.

Children's Social Services

Given the nature of how Children's Social Services have operated in the past there was no clear benchmarking data that related to housing and homelessness issues. However some of the impact from working in this system is outlined in the Embedded Housing Worker section of this report (see Chapter 5.)

4. THE APPRECIATIVE ENQUIRY

The Trailblazer Programme is based on the principles of an appreciative enquiry. This is a strengths-based approach, giving value to front-line expertise, people with lived experience and building on the good practice that already exists within the system. The central team felt that it was imperative to take time to study the system, listen to the experts and form an opinion on how to improve homelessness prevention and avoid crisis situations.

Over the initial months of the Trailblazer programme a range of workshops were run with housing front-line staff, people with lived experience and a range of professionals across health, hospitals, mental health hospitals, midwives, Bullingdon and Spring Hill Prisons, Job Centre Plus, Think Families and care leavers' teams. The team has taken time to think, build relationships, build trust, establish a coalition of the willing, as well as evaluate the qualitative and quantitative information being gathered related to systems.

The team have taken advice and spoken to national experts such as the Lankelly Chase Foundation and Dr Michael Little from Ratio (formerly from Dartington Social Research Unit) to refine and think through the direction of travel for the programme and are keen to embrace the principles of a "study – experiment – re-design" approach to the programme and to the commissioning.

Lived Experience Analysis

With the support of Aspire Oxford, Bullingdon and Spring Hill prisons and Crisis, the Trailblazer team undertook a number of one-on-one interviews and focus groups with people that have a lived experienced of homelessness. We wanted to understand their encounters with the system, how it made them feel and what potentially they could have done differently to avoid homelessness. The hope was that the team could then take this learning and build it in to the development of the commissioned services.

The qualitative analysis of this data engendered a number of repeating themes, namely:

- People experiencing a sense of hopelessness about their situation;
- Low self-esteem which wasn't addressed and perpetuated the existing issue;
- A lack of awareness about how to access appropriate services
- Individuals lacking the skills or knowledge about how to maintain a tenancy
- A feeling that they were being judged, rather than supported, by statutory agencies;
- Individuals found that assistance from people with lived experience really helped
- A lack of continuity with direct support
- Unstable childhoods with an absence of guidance in formative years

The following quotes have been taken from some of the interviews and group sessions. They add context to the themes listed above and helped the Trailblazer team to think about how to develop a resilience service:

"I would have liked someone to help me ask questions and give me encouragement. I needed someone to see the potential in me."

"I was encouraged to approach the council but was offered no help and was turned away."

"Throughout my life having an advocate would have helped. It would need to be someone with lived experience or who actually cares."

“My support worker at Aspire is an ex-addict and understands how people feel. There is no judgement”.

The Frontline and Professional View

Having spent time studying the system, talking to professionals working in the system and those who are recipients of the system’s services, it was clear that frontline staff wanted better access to housing and homelessness advice. Ideally this would be on their own frontlines and easily accessible.

Moreover almost all professionals expressed a view that there was a significant need to improve connections and relationships across statutory and non-statutory services. It was acknowledged that there was a wealth of expertise and support available in Oxfordshire but that it was often difficult to know who these organisations were, and what specific services they delivered. This in turn made it difficult to signpost households to those organisations.

Furthermore our initial discussions with staff and service users of the three systems signalled that our preconceived assumptions about the levels of housing and homelessness knowledge were excessive. The team were constantly told that housing was considered as a ‘can of worms’ or ‘not my responsibility’, often meaning that cases were missed at the first opportunity. More particularly there appeared to be a number of recurring systemic barriers and concerns that prolonged or impaired a housing and homelessness issue. In general these could be broken down in to the followings categories:

- Early indicators of homelessness were not being acted upon
- There is a lack of understanding about housing rights and the applicable legislation
- Little knowledge on the suite of housing options available to households threatened with homelessness, when to use them and the role of the Local Housing Authority in this process
- Staff appeared to be unaware of the responsibilities placed upon a household in respect of maintaining their tenancy, or their property
- A lack of knowledge in respect of related legislation e.g. Universal Credit and Housing Benefit
- Poor communication between organisations and a lack of clarity about who is taking the lead

Based on our analysis of housing and homelessness data, combined with the findings of the qualitative research, the Trailblazer team were able to formulate an idea of how to move forward with the commissioning process. The following sections of the report demonstrate how the two main services; the Embedded Housing Workers and the Community Navigators, have this built in to them.

5. EMBEDDED HOUSING WORKERS

Following the data analysis and appreciative enquiry, the next stage was to deliver a response – an experiment. The concept of having on-hand housing expertise had been repeatedly requested by professionals and people with lived experience as something that they would like to see happening.

This prompted the team to consider the viability of embedding housing experts in other statutory systems so that housing issues could be flagged up at the earliest possible time. Additionally it should help to build awareness of housing issues in those settings by sharing knowledge with professionals about the options available to households threatened with homelessness.

The team utilised the knowledge and experience of the Champions' Network Co-ordinator, Mel Armstrong, who had previously worked as a front-line housing options officer. This enabled the programme to accelerate the roll out of this proof of concept by placing Mel at the John Radcliffe hospital, and subsequently both mental health hospitals, to test the model. This was with the following purpose:

- To establish housing expertise within the discharge and social work teams at the hospitals
- To “add value” to cases by providing advice on the suite of housing and prevention options available
- Share expertise with these teams in respect of housing and homelessness and at the same time build relationships across systems
- Test whether this approach works, and has value going forward
- Collect observations and data in respect of how hospital systems work and interact with housing services, enabling the programme to focus on system change in those settings
- Help the Trailblazer team think about what might be a sensible cascading system to enable the earliest possible indications of homelessness to be spotted

The response to the trial was overwhelmingly positive, particularly as a result of Trailblazer being able to produce ‘quick wins’ for both the health and housing systems. In the most part this meant that individuals were able to return home, or move to new accommodation, more swiftly than previously experienced because of a direct intervention by the embedded worker. This in turn meant that the bed became available quicker and that housing options teams did not encounter a crisis presentation at a later point.

Frontline staff were very appreciative of having a named person to talk to on site, particularly in cases of a legislative or local connection nature. Moreover, it was clear that there was a limited understanding of the housing options available to households and that by having an expert to talk to, more holistic techniques could be employed to prevent homelessness.

Based on the success of the trial, the Trailblazer team worked closely with Connection Support to develop a full service encompassing six embedded housing workers across the Health, Criminal Justice and Children’s Social Services systems in Oxfordshire (two in each system). The innovation has been commissioned for 17 months and will run from 1st April 2018 through to 31st August 2019.

The contract established the objective of the embedded workers as enabling professionals working in those systems to navigate the suite of homelessness prevention options in the county, and understand the differences and commonality between the five districts. In addition it was expected that they would build trust and relationships with professionals

working in their system and be seen as a go-to person for help whilst also inspiring others to do things for themselves.

They have also been tasked with thinking about the end-to-end journey of people's engagement with the housing system in order for the team to start unpicking the wider systemic issues that are threatening people with homelessness.

Health

Further to the initial work at the John Radcliffe, the Trailblazer programme is now embedded at all of the county's general hospitals and mental health hospitals. The two embedded workers each have designated sites and working patterns which enable staff in those locations to know when it is best to approach them. They also respond to requests for support via phone and email when not on site. They work in a systematic way to find relevant housing cases and support the healthcare systems existing discharge procedures and protocols.

What the trial uncovered was that the health system was accustomed to individuals getting stuck in hospital as a result of a delayed transfer of care (DTOC). This is when someone is medically fit for discharge but is unable to go home. Each case is coded based on the reason for delay and as indicated in chapter three, cases exhibiting a housing issue cause much longer delays than average DTOC cases in Oxfordshire. DTOC cases are important to hospitals because they want to release those beds to patients needing care and make more efficient use of the resource. In effect DTOC cases create an unnecessary financial cost for the NHS and a social cost for those people unable to receive timely treatment. Whilst it is difficult to pinpoint the exact financial cost of an NHS bed per day (it is reliant on the type of hospital and the specific ward it is situated on), the New Economy Manchester model estimates an indexed figure of £451 per day. A two week delay would therefore result in a potential overspend in excess of £6,000.

The team therefore deemed it appropriate to start the process by working with DTOC cases where housing had been highlighted as a reason as to why that person could not go home. The team wanted to resolve the threat to housing as quickly as possible but also to start unpicking these cases to understand how they could have been flagged up earlier, in order to totally prevent cases from becoming DTOC. Ultimately the programme is looking to reduce the number of people becoming DTOC as a result of a housing issue, but also to reduce the average length of a delayed discharge for these types of case.

In the trial phase it appeared that the perceived complexity of housing and homelessness meant that these types of cases were often only picked up at the point that an individual was ready to be discharged home. This clearly has implications for the hospital and the individual simply because it can take a significant amount of time to adapt a home or re-house someone, particularly when someone has had a life-changing material change of circumstances. As a result the team has been constantly thinking about how to move upstream to prevent DTOC cases from happening in the first instance, and to provide more time to resolve significant housing problems.

The embedded workers still regularly attend DTOC meetings, but with the assistance of the Oxfordshire Clinical Commissioning Group and the various discharge teams the programme is now supporting the 'stranded' and 'super-stranded' initiatives within these settings. These procedures have been set up to ensure that everyone admitted to a hospital for more than 7 days has a confirmed discharge plan in place. If an individual has been in the hospital for 7 days but does not have a known destination for discharge they are categorised as 'stranded'. This information is picked up on the ward rounds by doctors, nurses and social workers and is subsequently flagged to the embedded workers if a housing issue is raised. If

a patient gets to 21 days without a confirmed discharge plan they become a 'super-stranded' case. This is considered a serious threat to that person being able to leave the hospital once medically fit for discharge and is therefore escalated to a more senior level to find a resolution. Trailblazer staff are attending all 'super-stranded' meetings and are contributing to any cases where a potential housing issues has been raised. This is with a view of preventing as many cases as possible from reaching a DTOC status.

One of the key learning points developed thus far is how to ensure that the programme remains sufficiently upstream in a hospital setting. The pathway of stranded, super-stranded and DTOC has provided us with a systematic procedure to prevent homelessness but the monitoring suggests that the embedded workers are regularly asked to support rough sleepers. More often than not this is a chaotic cohort of people with significant complex needs that require specialist support from other commissioned services. The embedded workers will signpost to the relevant services but given the complexity of these cases it is not expected that they would necessarily spend a significant amount helping to resolve them.

In the Mental Health setting there has also been considerable learning about the limited options available to this cohort of people, largely due to the level of support needed to maintain tenancies. It has been noted that a number of people with mental health concerns have experienced eviction in spite of the fact that they are often positioned in specialist accommodation most suitable for their needs. Ultimately this then creates a cycle of homelessness that regularly results in the local housing authority placing the individual in temporary accommodation. This form of housing is likely to be unsuitable based on the vulnerability of the person and is often a precursor to being placed back in supported housing.

As a result of this the Trailblazer programme has engaged with both Oxfordshire Mind and Response to revise the pre-eviction protocol within the mental health pathway. This now places much more emphasis on early prevention and is a countywide protocol that has been signed off by all of the districts. The procedure is currently being put into practice with Trailblazer supporting effective delivery and mediation.

Health Case Study

A woman - vulnerable because of a learning disability - was admitted to hospital in a state of distress following the death of her partner. The patient was a social tenant and had been advised by her landlord that she should not return to the property because they had concerns over her ability to manage the tenancy on her own. The hospital staff believed that the patient did not have the right to return to her home so she remained in hospital.

The patient was referred to the embedded worker who advised hospital staff about the tenant's legal rights and confirmed that she was able to return home. The embedded worker identified sources of support, including tenancy sustainment services and money management, and worked with hospital staff to make the appropriate referrals.

As a result of the trailblazer, the patient was discharged to her home with ongoing support in place to help her maintain her tenancy. This reduced the delay in her discharge and the hospital bed was made available at a time of peak demand. Taking into account the costs that would have been incurred if the embedded housing worker had not intervened to prevent homelessness; this case was estimated to have resulted in savings to the public purse of £7,612. This estimate is based on figures contained within the New Economy Manchester model Unit Cost Database.

Criminal Justice

The nature of the criminal justice system means that is very difficult for an individual to resolve their own housing situation, mainly because they do not have access to the necessary support services. Hence it is the role of probation officers and the resettlement teams to work with prisoners to ensure that some form of housing advice and support is delivered to them. However, given the data analysis of people leaving prison with no fixed address (NFA) it was clear that more needed to be done to support staff to find suitable housing for this cohort where possible.

The Trailblazer programme has embedded two housing workers in the criminal justice setting to support Oxfordshire residents that are threatened with exiting the system NFA. One is located with the National Probation Service (NPS) and the other works alongside staff from the Thames Valley Community Rehabilitation Company (CRC). Both are located in Bullingdon and Spring Hill prisons, as well as in community settings. The NPS worker is also embedded at the two approved premises located in Oxford City.

The Trailblazer team have tried to approach the identification of cases in a systematic way by using the techniques already employed within the criminal justice setting. Effectively there are two main points at which housing information is collected from people contained within the system. On entry an initial interview is conducted to establish their circumstances, including their housing status. Likewise at 12 weeks prior to release a similar consultation is held to establish whether there is an accommodation need for that person. The embedded housing workers have been tasked with supporting those individuals that report that they are either leaving NFA, or suggest that they do not know where they are going at that pre-release interview. Where possible they will also use the entry information to start supporting those individuals that present as NFA from the outset.

By targeting this cohort the programme hopes to reduce the number of crisis presentations to local housing authorities (LHAs) immediately after release. Likewise the expectation is that by finding accommodation for these individuals the chance of re-offending is greatly reduced, which in turn produces a significant saving to the public purse.

However, it should be stated that the housing options for people being released from prison NFA are greatly reduced when compared to the average person. They are unlikely to receive any significant support from LHAs as they are less likely to be considered a priority need, and are likely to be considered as intentionally homeless. Likewise on release they can struggle to find accommodation with a private landlord because of a lack of deposit or simply because of their circumstances. Issues around claiming Universal Credit on release also impact an individual's ability to secure suitable accommodation. With this in mind the Trailblazer team have put together a check list of all possible options for this cohort and work with the staff in the system to explore them prior to release.

Children's Social Services

The Trailblazer programme is looking to place resilience further upstream to prevent families who may have children in need, or on child protection plans becoming homelessness. Anecdotally, professionals in the setting report that the root cause of 10% of all children who are currently in care is housing and their view is that it is significantly under reported across other areas of social services.

Our early work with Children's Social Services suggested that housing was a blind spot for the system as it was considered to be too complex to navigate. For instance, at no point in a Multi-Agency Safeguarding Hub (MASH) referral are any questions specifically asked about housing. This sometimes means that the excellent work being undertaken to keep families

together is being undone by housing issues that could have been resolved if a flag had been put up earlier.

With support from the Think Families team at Oxfordshire County Council, the team has considered the processes that already exist within the system and have tried to align the embedded workers with those processes. It took some time to ascertain exactly where to embed the housing workers but both are now located with the three Locality and Community Support Service (LCSS) teams in the north and south of the county, and in the city of Oxford. The two embedded workers each have designated patches and working patterns which enable staff in those locations to know when it is best to approach them. They have also started working closely with the MASH to support professionals in that part of the system should a housing issue be disclosed at the very start of the referral process.

The LCSS provides advice and guidance to professional partner agencies including schools, health and voluntary and community groups, across Oxfordshire when emerging concerns are raised for children that do not require an immediate safeguarding response. They are also the first point of contact where non-immediate safeguarding concerns are identified. Because of the work they do in connection to Early Help Assessments and the Team Around the Family (TAF) processes, Trailblazer saw this as an excellent opportunity for housing to become part of the thinking process at a much earlier stage.

Children's Social Services Case Study

This case study involves a grandmother caring for three of her grandchildren after they were removed from the care of their parents due to neglect. The grandmother had permanent custody of the eldest child, but the other two children were placed on a temporary arrangement, awaiting the court to award permanent custody. They were living in a one bedroom social tenancy flat.

The placement was at risk of breaking down due to inadequate accommodation and overcrowding; potentially leading to the children being taken into the care of social services. This was a difficult situation as the court would not award permanent custody of the remaining two children until they were adequately accommodated; and the local housing authority did not recognise the overcrowding as the two children were not in the permanent custody of the grandmother.

The embedded worker supported an application to the exceptional circumstances panel at the local housing authority so that they could be moved up the social housing waiting list. The panel awarded a two bedroom need and the family were allocated a home quickly as a temporary arrangement. They were subsequently awarded a three bedroom need but are waiting for appropriate housing to become available.

The placement has therefore been made permanent and the three siblings have been kept together without the need for placing any of the children in care. Using the New Economy Manchester model Unit Cost Database it is estimated the total saving to the public purse exceeded £50,000 (mostly to the benefit of children's social services) when considering that two of the children may have needed to be placed in care. Based on our estimates of net spend and net saving, the cost benefit ratio of this case suggests that for every £1 spent, somewhere in the region of £13 - £14 was saved. An added benefit is that this case improved the partnership working between the LHA and children's social services based on the positive and swift outcome.

Monitoring to date

Since April 2018 the embedded workers have received 338 referrals from across the various systems. The breakdown across the three systems is as follows; Health – 145; Criminal Justice – 126; and Children’s Social Services – 67. These numbers are representative of where the Trailblazer team was able to establish the embedded worker model during the initial piloting phase and the levels of staffing since the inception of the project. The numbers for children’s social services appear low because until mid-August there was only one embedded worker operating in this system.

Diagram 5.1

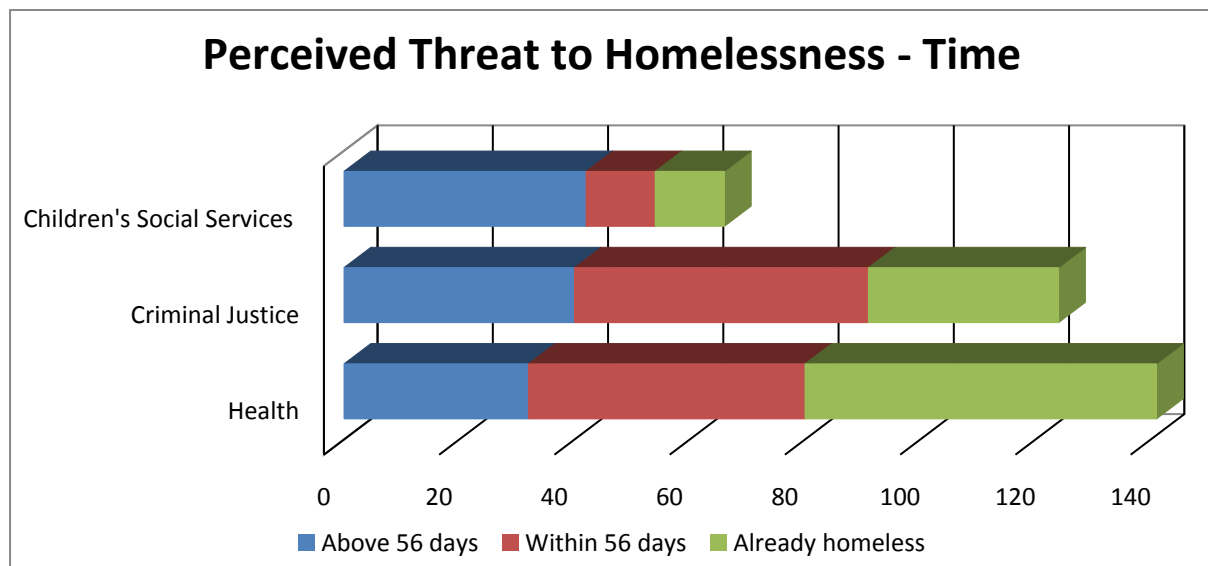


Diagram 5.1 indicates the assessment of the perceived threat to homelessness in terms of time (where recorded) for all cases across the three systems in quarters one and two. The timeframes mirror the Homelessness Reduction Act and therefore any case where the threat to housing is perceived to be above 56 days is regarded as being ‘upstream’.

What the table demonstrates is that the social care system has been supported by the embedded worker to highlight housing issues at a consistently early stage. It also illustrates that across the Health system, particularly in the John Radcliffe hospital, the EHWs have been supporting individuals that are already homeless. As mentioned above, the Trailblazer team have been working closely with Connection Support and our partners in Health to support the EHWs to move upstream. This is being facilitated by attending all DTOC, Stranded and Super-stranded meetings across the county, as well as making better links between the hospitals and homeless/rough-sleeping outreach services so that better signposting can take place.

It should be noted that between quarters one and two all of the systems were able to move progressively more upstream in terms of the clients they are supporting. The Trailblazer programme will continue to monitor this and consider ways that it can revise and iterate its approach to picking up cases at the earliest opportunity.

The outcomes for the embedded workers model are still emerging but in the first two quarters the team have reported 234 closed cases. Of these cases, 107 have resulted in a known prevention of homelessness, 24 have resulted in an unsuccessful prevention and the remainder (103) have been categorised as an unknown outcome. The nature of the EHW model (short, sharp interactions) means it is likely that there will always be instances when

the team is unsure of the impact of the intervention or advice provided. This is evidenced above and we have addressed this issue with the EHWs and are seeking support from the respective systems to reduce the proportion of cases being reported in this way.

6. COMMUNITY NAVIGATORS

One of the core strands of the Oxfordshire Trailblazer bid was to build resilience throughout the county and enable households and individuals to cope better with life and prevent a housing related crisis. This could potentially include help with matters such as financial inclusion and access to work opportunities, as well as tackling issues such as social isolation and drug and alcohol misuse.

Whilst the embedded worker model is focused on the system, this arm of the Trailblazer programme is a person centred approach focusing on those households threatened with homelessness. We were told by people with a lived experience of homelessness that any such approach to preventing homelessness should focus on the following areas:

- Alleviating an individual's sense of hopelessness and low self-esteem
- Improve awareness about how to access appropriate services
- Provide continuity in respect of direct support (a single point of contact)
- Deliver a service where people with lived experience are involved

In the initial appreciative enquiry phase the central Trailblazer team also undertook a mapping exercise which sought to identify any gaps in resilience services within the county, or gaps in specific geographical locations. This in turn would enable the team to determine what kind of commissioning, if any, was needed to better assist the population. Of the regional hubs across Oxfordshire, only Oxford seemed to have a strong network of organisations that understand the crossover and inter-related necessity of a diverse set of support services.

The team therefore decided to explore whether it is possible to replicate this level of interconnectedness in the other parts of the county by commissioning an organisation to function as a navigator of services. This was with a view of working with households to build their skills and improve resilience to changes that may otherwise result in homelessness or the threat of it.

Commissioning

Aspire Oxford have been commissioned to implement the Community Navigators Project, for a 17 month period from April 2018 to August 2019. The team incorporates three full-time community navigators and three part-time grow workers, some of which have a lived experience of homelessness. The team are divided in to three locations; the north & west of Oxfordshire, the south and the city; with one of each worker located in each area.

The purpose of the project is to provide a support, brokerage and advocacy function that will empower and enable beneficiaries to engage effectively and confidently with statutory and support agencies, centred on their housing and homeless prevention needs. This will include working in collaboration with multiple services across Oxfordshire, including from co-located venues and in an outreach capacity. As well as being in the major towns and cities in the county, the Aspire team have focused their attention on known areas of deprivation (e.g. Berinsfield). This is so that they can reach out and target households that may otherwise slip through the net and only appear at crisis point, By engaging with people at risk of homelessness before crisis point is reached, the team realises that there is far more potential to work with individuals and use their energy, ideas and resilience to create a better outcome together.

At the heart of the approach is partnership working with statutory services, housing authorities, housing associations, health partners (including GP practices), charities and

community organisations to reach those most in need. These organisations are often the first place where a housing issue will be raised by an individual and household. If this concern or issue is not raised or acted upon, it can often escalate quickly and lead to a much less manageable situation. The Trailblazer team are then asking our partner organisations to make referrals at the very first signs of a threat to housing (with the households consent). The community navigators will then speak with the household, triage the case, and determine the best course of action to prevent homelessness.

Key programme activities

- Aspire's new team of Community Navigators and support workers will work across five District Housing Authorities and Housing Associations, in co-located venues with a key focus on outreach delivery
- Aspire's Trailblazer team will proactively seek out those at risk of homelessness. This will include ex-offenders who are vulnerably housed and care leavers
- Their role will be to provide both a support and a brokerage function, designed to empower individuals to have confidence in engaging with statutory and support agencies, centred on their housing and homeless prevention needs
- The Community Navigators will work with individuals to sustain their housing options and maintain their tenancies
- The Trailblazer project team will work to enable each individual to help them maintain their accommodation through career & employability development advice. This will be linked to identifying local education, training and employment development and opportunities
- Individuals at risk of homelessness will also be given access to Aspire's wider employment programme

Work to date

Within the first two quarters of the programme the Community Navigator team have reached out to both statutory and non-statutory services across Oxfordshire in order to receive referrals at the earliest possible opportunity. The team have also co-located the service in housing associations, GP surgeries and support agencies (e.g. drug and alcohol advice and Jobcentre Plus) to create a visible frontline for homelessness prevention.

In the first two quarters the community navigators have received 153 referrals. There have been 23 self-referrals and the rest have originated from the local housing authorities and 21 separate agencies. These were: *Aspire; Building Better Opportunities, Turning Point, OxFed, Response, Crisis, Agnes Smith, Citizens Advice, Salvation Army, Unlocking Potential, Job Centre Plus, A2Dominion, Edge Housing, Rose Hill Community Centre, Berinsfield Volunteer Centre, Ministry of Defence, National Probation Service, Connection Support, GP Surgeries, Hospital Inpatient Wards, Oxfordshire Domestic Abuse Service.*

The breakdown of cases in terms of the perceived threat to homelessness is as follows:

- *Above 56 days: 92 cases (60%)*
- *Within 56 days: 57 cases (37%)*
- *Already homeless: 4 cases (3%)*

These figures indicate that the navigators have been able to pick up cases sufficiently upstream. This has been achieved by enabling referral agencies to truly understand the purpose of the service and when to refer in to it. Likewise the community navigators have been able to triage referrals and signpost households to support services (including local housing authorities) that are better able to deal with situations that are closer to crisis point.

The outcomes for the community navigator service are still emerging but to date they have been able to close 53 cases. Of these closed cases 35 have resulted in a successful prevention of homelessness. 30 households were able to stay in their existing home and 5 were able secure new accommodation. Four cases have resulted in an unsuccessful attempt to prevent homelessness and the remaining 14 cases are circumstances where the individual lost contact with the service or was unwilling to co-operate.

Key Learning

There were several key learning points in the project's first two quarters.

One has been to develop an understanding of the new service's aims and purpose within existing agencies and services, particularly where some of the Community Navigators' activities were not sufficiently differentiated from existing services (e.g. Floating Support). This has subsequently been resolved through discussion about the positioning of the service upstream and away from crisis point.

Work has also been required to position the Community Navigators properly in respect of advice and guidance services (e.g. Citizens Advice, and independent estate based organisations) as well as Tenancy Sustainment services in a number of housing associations. This has been achieved by continuing to deliver the message that the community navigator role works in a brokerage and navigation function alongside the experts and will not be looked at as a replacement for any already established services. The Aspire team found that spending time with each service face to face was the best way to move forward. This included senior management and support workers and avoided unnecessary emails.

The team has taken care not to fill, or be encouraged to fill, apparent gaps resulting from system failures across other areas of homeless prevention. This has often manifested itself in inappropriate referrals to Community Navigators (both up and downstream). It is interesting to note that in quarter two over 40% of the referrals were in respect of someone with a social tenancy, often relating to problems with rent arrears. Whilst these are not necessarily inappropriate referrals, it has allowed the central team to start thinking about how Trailblazer can work with these organisations to understand how intervention could have been undertaken at an earlier stage.

As the project has progressed the community navigators, along with the embedded workers, have started to consider the tension between fixing a household's housing issue and connecting them to the appropriate services in order to build resilience. For the community navigators there has been a particular concern in respect of financial issues and whether it is appropriate to fix the problem (pay off arrears or debt) in the first instance and then build resilience from that point onwards.

One of the next steps for the community navigators is to start seeking feedback from people that have used the service to understand how it supported them and whether any resilience has been developed. Likewise it is important for the programme to understand how referral agencies and support services feel about the service and whether it was useful for them. Of particular interest will be to determine whether this way of working is having an impact on the way that external services operate and interact with both clients and supplementary support agencies.

7. HOMELESSNESS CHAMPIONS' NETWORK

Why was the network created?

The third work strand of the Oxfordshire Trailblazer is the Homelessness Champions Network. This was established to become the eyes and ears of the programme. It aims to upskill individuals across all stakeholders in Trailblazer, and create a knowledge base that would enable network members to identify early risk factors of homelessness. These key people would be the housing 'Go to' person in their organisation and will either know what action to take, or who to ask for help when trying to prevent homelessness.

Trailblazer is all about system change, but change happens with individuals, not organisations, and as such it is people rather than systems which are prioritised. The Champions' Network is intended to break down the barriers between systems by developing relationships between individuals in the different systems as outlined above. These relationships will start to fill the gaps that exist between systems.

The network is also a support mechanism. Members get to know each other through learning events held by the Trailblazer team, and establish strong relationships, appreciating colleagues working in other systems, and becoming a resource for each other.

Finally the Champions Network was also intended as a precursor to the Duty to Refer which came in to effect from 1 October 2018. This is part of the Homelessness Reduction Act (HRA) 2017, and requires a range of public sector organisations to refer people they identify as being homeless or at risk of homelessness to a local housing authority.

Operation of network

The network consists of roughly 60 people from 25 separate organisations. This includes all bodies subject to the Duty to Refer as well as other interested parties. Workshops have been held on a bi-monthly basis to train the network on the following:

- Options available to people at risk of homelessness in Oxfordshire
- Early indicators of homelessness
- The HRA
- Universal Credit
- Developing the Oxfordshire Duty to Refer procedure

The network has been established for 10 months, and is managed by the Trailblazer programme team at Oxford City Council. The ambition for the network is that it will become self-sustaining and continue after the life of the programme has ended. It is also expected that the District Council Housing teams will provide ongoing support to the network at the end of the programme. It has been established in a similar way to the Safeguarding Champions Network or the Domestic Abuse Network.

Three tiered approach

To maximise the impact of the Champions Network, a tiered approach has been planned in order to upskill and provide relevant resources to as wide a group of people as possible.

Tier 1 Specialist level:

This comprises the 60 individuals who will participate in a series of specialised higher level training sessions which are outlined above. Networking opportunities will be provided and

they have direct access to the Network Coordinator in the Trailblazer Programme team for specialist advice. Tier 1 Champions will have an input into the design of training and workshops to ensure training meets specific needs. Tier 1 champions have been identified through the predictive data available to Trailblazer, our enquiries to date and experiences of initial embedded working and include front line staff across multiple disciplines and organisations including the voluntary sector.

Tier 2 Generalist level:

This is a wider group of people from the same organisations as the Tier 1 champions. They will receive training from the Network Coordinator aimed at achieving a more in-depth recognition of the early indicators of homelessness, how and who to sign post to, and any other emerging issues identified as Trailblazer progresses. It is anticipated that this will involve issues linked to prevention advice training.

Tier 3 Awareness level:

This will provide awareness level training for staff and volunteers working within organisations that might come in to contact with people at risk of homelessness. This level of training will be provided electronically via the Oxfordshire Safeguarding Children's Board (OSCB) website. The outcome of training will be the ability to recognise the indicators of homelessness, and how and who to signpost to.

Duty to Refer

The Champions' Network played a practical role in establishing a single countywide process for the Duty to Refer in Oxfordshire. The network were consulted on what they wanted the process to look like, rather than Housing teams across the County determining what this should be. Feedback from the network was that they wanted a uniform approach across Oxfordshire, a named contact in each Housing team, a prompt response to referrals and a process which was compliant with new data protection regulations.

A task and finish group was established to take this work forward, and worked in partnership with Crisis to develop a procedure. This work was completed in September, and a single county wide procedure and two page summary document was produced. The ALERT portal developed by Housing Jigsaw is the preferred solution for making referrals. Although local partners all indicated their willingness to use this tool, two government departments have issued instructions to their staff to email referrals to local housing authorities instead of using locally agreed processes.

The Champions' Network has embedded the understanding that service users' housing and homeless issues are more effectively resolved by agencies working together achieving better outcomes for all services involved. Over the second year of the programme these relationships will be deepened and strengthened.

8. THE LEARNING APPROACH

This section of the report summarises the learning approach, the principle findings to date and anticipated developments in 2019. This chapter has been written by Dr Michael Little of Ratio.

Ratio is an independent research organisation specialising in understanding how relationships influence human development. Ratio is the learning partner for the Oxford Trailblazer. It brings to bear a new approach to learning, referred to as Era 3, the primary features of which are described below.

Era 3 Learning

Don Berwick wrote a paper in 2016 that described three eras of health policy and science. The first era, he argued, was dominated by the professions. But by the 1960s health inequalities led to a drive for more accountability. A second era took hold. In the UK we call this 'new public management', with a focus on finding efficiencies that lie between inputs, outputs and outcomes. Health was to some extent transformed by this rearrangement, but it tended to favour those with the resources, knowledge and outlook to play what became a game (that could be gamed). Berwick has predicted the beginning of a new era, the moral era, with a focus on improvement and civility.

There are two innovations being tested in the Trailblazers work, embedded workers seeking to change the relationship between housing systems and health, social care and justice systems; and community navigators that work with residents long before their housing problems become a crisis. The learning approach employed:

- Brings the practitioners together once a month
- Creates a context for them to talk about their work, successes and failures
- Asks the workers to collect data on reach, quality and impact of their work, and
- to work with managers and other experts to develop and test adaptations to their practice.

The approach is producing new knowledge about:

- Improving embedded workers and community navigators' practice
- System barriers to effective policy and practice, and ways of overcoming those barriers
- National government barriers to effective policy and practice.

High-Level Learning

The embedded workers operate in three systems, where each produces different challenges and opportunities:

- Social care uses the advice of embedded workers to prevent family breakdown by addressing housing issues that contribute towards household stress. There are strong system incentives for social care to engage with Trailblazers, reductions in numbers of children requiring statutory support for example
- Hospitals find it more difficult to see housing issues before they become challenging. There are however strong system incentives, for example reducing DTOC cases
- There are government targets to reduce the number of inmates leaving prison to no fixed address, but the severe stress on the prison and probation systems appears to negate the potential benefits of Trailblazer work

There is more commonality in the stories of people who stand to benefit from the work of embedded workers and community navigators. The emotional reaction to the risk in their lives is strong. They feel culpable. They frequently exhibit a sense of shame. Their agency is lost. This contributes to a disconnection from sources of help just at the point when help is urgently needed.

The housing system is under severe stress. Need greatly exceeds supply, and the concept of the 'deserving poor' plus strong system dynamics -producing for example perverse incentives- lead the system to operate inefficiently, creating pressure for all its parts -people with housing problems, housing stock, public and private, processes that link need and supply, and the people who operate those processes.

In this context, an optimal result of reform of the systems is to keep as many people in the accommodation they currently use, and to find the next best alternative for those who must move on (and minimise the number whose change in accommodation reflects system inefficiencies).

The work has identified several factors that influence achieving optimal results including:

- Geography; there is variation in outcomes from one part of Oxfordshire to another
- Practitioner knowledge; there is variation in understanding and interest in learning more about how to get the best from the housing system
- Ethics; the dynamics of the systems can lead good practitioners who entered public service with noble intentions to behave in ways that are counter-productive to the needs of service users
- The need for provider agencies to protect contracts and jobs for their workers.

The practice of embedded workers and community navigators

As expected, the work has found variation in the practice of community navigators and embedded workers, which reflects their different tasks and possibly their parent organisations. There is also variation in *between* embedded workers, which may be explained by differences in the agencies they support. There is less connection between community navigators and embedded workers than some practitioners had envisioned at the outset.

Progress has been strong with the possible exception of the justice system where the level of need, the fragility of the prison and probation systems and the fact that prisoners are too often viewed by the housing system as less deserving than other citizens has hampered progress.

The market forces and dynamics that operate across systems exert a force on Connections and Aspire, the two organisations that employ the community navigators and embedded workers.

Practical Learning

The work is producing learning that may have relevance across the housing, social care, health and justice systems contributing to the Trailblazer programme.

The embedded workers and community navigators are encouraged to achieve their goals by connecting people (systems people in the case of embedded workers, citizens in the case of community navigators). This objective is both a challenge and an opportunity, throwing up examples of failure and success. Analysis shows that there are contexts and conditions that

favour connection, and contexts/conditions that favour fixing. A short paper exploring these options written to inform practice is in preparation.

Many of the community navigators have personal experience of negotiating the system, and they are highly attuned to the needs of the service users they support. They stress the need to maintain the 'humanity' of the system. At the same time, there are absolute limits on the systems' capacity to help. Current arrangements often fail to balance humanity and resource constraints, producing within system tensions. Further analysis of this tension and its resolutions continues.

The work has begun to map the system, with a view to an output that can help practitioners from all agencies better understand and navigate its pathways. Likewise a review of the literature on social prescribing has been completed with a view to informing the practice of community navigators and embedded workers.

Getting more precision

As the work moves into the next phase, it is proposed to introduce more precision into the process:

- Exploring whether learning about the practice of individual practitioners can become a routine part of practice supervision
- Whether that supervision can identify system barriers to effective practice
- Whether the monthly learning meeting can focus on finding effective remedies to system barriers, and
- Whether these remedies can be tested in between learning meetings

There is a general objective to adapt the Era 3 learning approach so that it can be applied across systems beyond the term of the Trailblazers project and without Ratio's direct involvement.

Overlapping learning

The leaning approach and lessons taken from the work has come to the notice of other innovators across the country. In particular, Toby Lowe from Collaborate and Newcastle University has provided useful illustrations from his work on complexity in public systems, and has suggested connection with teams he is supporting across the U.K.

9. PRIORITIES FOR YEAR TWO

There is already evidence to show that the interventions of the Trailblazer are having positive impacts on both people at risk of homelessness, and people working in the systems described earlier in the report.

Some of these outcomes have also saved significant sums of money as a result of avoiding delays in discharging people from hospital, or in avoiding the costs of taking children into care. How can Trailblazer ensure that these outcomes continue to be delivered after the programme ends next year? Can the observed system barriers be overcome, are new services required, and are the relationships that have developed between systems sustainable? These are the questions that the programme will seek to answer in its second year.

The monthly learning sessions, facilitated by Ratio, provide an opportunity for the Trailblazer programme to identify new approaches which may help to overcome system barriers or to create better connections within systems. The meetings in the next year will be used to identify different ways of working, and these will be trialled, and then reviewed at subsequent meetings. The innovation can then either be adapted, or a new barrier can be tackled using the same approach. Work has already commenced in the learning sessions to map the systems Trailblazer is working in. This map will inform the ongoing work of the programme.

Trailblazer's second year will involve work to overcome system barriers to effect permanent change which will reduce the risk of homelessness. However the systems that the programme is working in are under great pressure, both in terms of resources and demand for services. Trailblazer represents a £890,000 investment in preventing homelessness, so the end of the programme will represent a consequent reduction in support for preventing homelessness if there is nothing to replace it. As such the programme will be researching options for the funding of ongoing services. There are a small number of case studies from the first six months of operation which individually show some significant savings. The robustness of these figures need to be tested, as does the likely scale of potential savings in the different systems Trailblazer is working in. This will help make a case for further funding of services to continue the work of Trailblazer.

In the health system there is already a model for homeless healthcare teams. The organisation Pathway has supported 11 hospitals to create such teams which help over 3,500 patients each year. This model could be adapted to provide a more upstream service, ensuring people's discharge from hospital is not delayed.

The Champions' Network will continue to foster relationships between people in different sectors, and up-skill members knowledge of housing and related issues. The network provides a good opportunity to leave a lasting legacy from Trailblazer, both in terms of the connections formed between people in systems, and a knowledge base and toolkit. This is still in development, and will require some resource to be dedicated to maintain it after the programme has ended. Options for this will be explored during the second year.

Finally, the work of the Trailblazer programme will continue to be monitored and evaluated in the second year, to demonstrate its impact. This will include on-going data monitoring to see how the Trailblazer interventions impact on the system. Ethnographic research will also be conducted to understand how Trailblazer has impacted on people both working in, and engaging with the systems that the programme is working in. A further phase of appreciative enquiry will be undertaken to understand what, if anything has changed as a result of Trailblazer, and what work is still required.