

REVIEW
OF
REGIONAL SETTLEMENT SERVICE
MIDLANDS

COMMISSIONED BY
MIDLANDS SIMON COMMUNITY

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1. INTRODUCTION & BACKGROUND

Midlands Simon Community (MSC) has provided homelessness services in the local authority areas of Laois, Longford, Offaly and Westmeath (LAs) since 2005 and works collaboratively with all service commissioners and providers within the regional service management and delivery structures including the Midlands Region Joint Consultative Homelessness Forum (MRJCHF) and the Homeless Action Teams (HATs). MSC's keynote service is the Regional Settlement Service (RSS) established in 2005 and is complemented by emergency residential accommodation currently located in Athlone and Tullamore.

The RSS is commissioned jointly by the four LAs and is delivered under a detailed protocol agreed in 2005 and is the subject of this document. All referrals to the RSS emanate from the LAs on a formal basis, and MSC provides regular reports to the LAs separately and jointly through the MRJCHF. While MSC reviews its services on a regular basis as part of its business planning process, it has now commissioned an independent review of the RSS with a view to taking the service forward from 2014. This is in recognition of the changing profile of Service Users, the developing needs of the housing departments of the LAs and the improved practice in homelessness service provision.

While the Review has been commissioned directly by MSC and is therefore an internal review, it will be of special relevance to the Management Committee of the MRJCHF and will be presented to the Forum in autumn 2013. In the course of this review, consideration will be given to findings from the Murtagh Report and from the Review of the Pilot Phase of the RSS.

1.2 TERMS OF REFERENCE

The key TOR of the Review are:

1. To review the existing protocol for the RSS and advise on recommendations needed for the development of the RSS.
2. To review criteria for admission to RSS and to make recommendations for any changes to same.
3. To review interventions being used by RSS and recommend any changes.
4. To map the use of resources and interventions from other agencies that supports the settlement of people out of homelessness.
5. To evaluate from a RSS perspective how to enhance inter-agency working so as to ensure people are supported to settle out of homelessness.
6. To evaluate the effectiveness of HAT in supporting the cases that are presented by the RSS.
7. To review referral route, guidelines for length of time in the service, caseloads for the RSS, and to make recommended changes.
8. To make recommendations¹ for any gap in services in the areas of:
 - Tenancy Sustainment
 - Housing with Support
 - Supported Housing

The Review has used both primary and secondary research and has liaise with senior officers of MSC at all stages of the exercise.



¹ Definitions will be provided in the review for Tenancy Sustainment, Housing with Support and Supported Housing.

The primary research entailed face to face interviews with all RSS staff in Midland Simon and a focus group meeting with members of the MRJCHF which includes key staff from Local Authorities and HSE.

The secondary research involved reviewing data on the RSS as collected by the staff in the RSS, and reviewing key information relating to the service including the 2005 protocol itself and other relevant support documents.

Referrals to the RSS for 2005 - 2010, 2011 and 2012 were analysed, particularly the key factors:

- Gender;
- Age;
- Reason for referral;
- Date of Referral and date of service exit (duration of support);
- Frequency of Referral;
- Support Level and Interventions used by RSS;
- Housing Outcome resulting from RSS intervention.

1.2 SERVICE DELIVERY PROTOCOL

Role of Midlands Simon Community

The current protocol aims to define the role and responsibilities and resource commitments of the H.S.E. Midland Area, the Local Authorities of Laois, Longford, Offaly and Westmeath and the Midlands Simon Community, in relation to the Regional Settlement Service. A key tool of the MSC approach promotes the use of the Continuum of Care Model as a response to homelessness and the model argues that any service working with people affected by homelessness should have clear objectives which seek to support people to move out of homelessness.

In the Regional Settlement Service, the role of Midlands Simon Community is:

1. To develop a settlement plan with the service user that would support the service user to progress out of homelessness.
2. To support the service user to source suitable accommodation.
3. To liaise with relevant service providers to ensure needs identified in the settlement plan are being met.
4. To provide pre-tenancy support and training.
5. To provide the necessary supports that would assist the service user in maintaining their tenancy.
6. Support the service user in integrating into their community and in building up a network of supports.
7. To assist the service user in securing alternative accommodation in the event of any existing tenancy coming to an end.

There are six stages to the RSS implementation and integrated service plan for all referrals.

All referrals emanate from the Local Authority Housing Department and may be existing tenants requiring support at a critical time in the retention of their tenancies or Service Users of other temporary or emergency accommodation homelessness services who are returning to independent living.

- Stage 1: Housing Needs Assessment

- Stage 2: Holistic Needs Assessment
- Stage 3: Development of an Integrated Settlement Plan.
- Stage 4: Implementation of the Individual Service Users Integrated Settlement Plan
- Stage 5: Review of the Individual Service Users Settlement Plan
- Stage 6: Six Month Review of Individual Service Users Integrated Settlement Plan

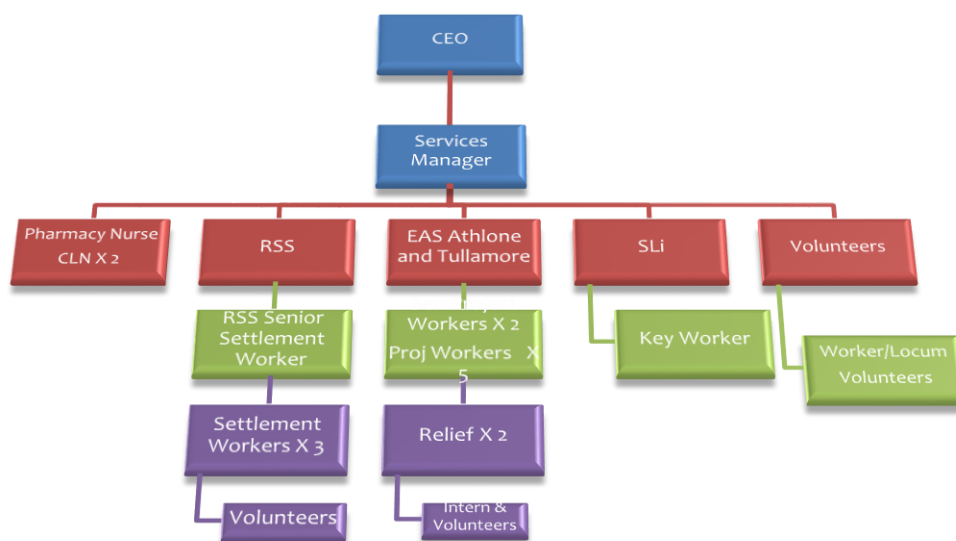
Table 1 below sets out the many components of the current protocol which sets out clearly the six stages and the responsibilities of the key stakeholders, LAs, H.S.E. Midland Area and MSC.



Table 1 Current Referral Process 2013

1.3 SERVICE DELIVERY ARRANGEMENTS

The RSS is one of a suite of homelessness services managed by Midland Simon Community. They are implemented on a discrete level but bound by the integration of skillsets and the management function. There are 30 persons (26 Full Time Equivalent) employed across the various service areas at MSC.



Service Delivery Structure Midlands Simon Community May 2013

The RSS has a staff complement of five including 3 Settlement Workers, 1 Senior Settlement Worker and is managed on a day-to-day basis by the Senior Settlement Worker who reports to the Services Manager. It also has the support of the CEO and volunteers. The four Settlement Worker posts are funded by the LAs (3) and HSE Midland Area (1) while 4 hours per working week of the Senior Settlement Worker and the Services Manager function are funded by MSC from its own resources.

Currently, LAs refer Service Users directly to each of the four Settlement Workers who manage and carries an optimum caseload. Team meetings are held weekly and the Homeless Action Team of each LA assists in the pathway for each resident. The management and staff of HSE Midland Area and the four Midlands LAs play a full part in supporting the work of the RSS. HSE Homelessness Liaison Nurses are available to the RSS and play a vital role in co-ordination and implementation of Service User Support Plans. There are also good communications channels and liaison with HSE Social Work teams and LA Housing Section teams in the Service User pathway through services. Under the current protocols, LAs are the only agencies to refer to the RSS.



1.4 FINANCIALS

The majority of current funding for the Regional Settlement Service is undertaken by the four Local Authorities (74%) and HSE Midland Area (17%). Midland Simon Community contributes 9% of the total annual expenditure from its own resources secured through fundraising. It includes the additional cost of the Senior Settlement Worker (4 hours per week), proportionate rent and administration costs, a contribution to management costs including travel and administration.

<i>RSS Funding Structure 2013</i>	€	%
<i>Local Authorities</i>	€184,000	74%
<i>HSE Midland Area</i>	€41,660	17%
<i>Midland Simon</i>	€22,833	9%
Total 2013	€248,493	100%

RSS Funding Structure 2013

Funding from external sources has remained relatively unchanged over the 7-year period of the current arrangement with the exception of region-wide, marginal reductions to the core funding from LAs and HSE Midland Area.



2. PROFILE OF THE REGIONAL SETTLEMENT SERVICE

The Midlands Region Settlement Service has long been respected and admired as an exemplar of good practice and good policy in the design and application of homelessness services. While the RSS is not the only support service in the Midlands Region, it is the only dedicated service which has the express focus of maintaining residents in, and returning people to independent living with high quality support.

There are temporary/emergency accommodation services available in seven locations across the Region and the RSS reaches out to the residents in all of these services with a view to supporting them in their move to independent living once referred on to appropriate accommodation. This provides a pervasive exposure to the focus of the LAs' preferred, ultimate solution of returning and retaining Service Users in need, in their own homes. It also ensures that the pathway for Service Users has a formal settlement service as a crucial component of their Care/Support Plan and that a rounded focus is applied to return and sustain Service Users in independent living.

The formation of the Homeless Action Teams (HATs) on foot of the 2011 Review of Midlands Region Homelessness Services² has provided a fully co-ordinated response by agencies and frontline workers involved in the Key Working and settlement of Service Users. The HATs can facilitate Service Users to progress seamlessly between services to the ultimate goal of independent living with supports to sustain it.

Approximately half of the referrals include residents in their own tenancy who require specific support, and the RSS meets the possible onset of homelessness in a preventative way. This accords appropriately with the 'early intervention' imperative of homelessness services which implies that the earlier that relevant support services are provided, the more likely that long-term homelessness is prevented.

The configuration of services in the Midlands Region is differentiated from other regions in the country by the key role of RSS as an integral component producing the highest rate of resettlement in the State based on the recent reviews of eight of the nine regions. The relevant resettlement rates in the Midlands demonstrated that in 2010, Midlands Simon Community, Bethany House and TEAM achieved rates of 60%, 100% and 79% respectively. A lower rate of 25% was recorded for residents of St. Martha's and while there are separate reasons for this relating to it providing quasi-night shelter services, this is still significantly higher than other parts of the country which can be as low as 1% or 2% and rarely higher than 20%. There is little doubt that the adherence of the Midlands Region to a true Housing First approach through the allocation of appropriate resources to settlement is delivering the impressive results as presented in the 2011 Review.

Data

The Review has analysed data on referrals and outcomes since the RSS was established although the 2011 and 2012 trends are focussed on in this section. The review process has included a detailed examination of all data across the Region and on an LA basis. The detail, including initiation and quality control, are matters which are being addressed internally at MSC and the Review will present the



² Review Services Addressing Homelessness in the Midlands - Offaly Laois Longford Westmeath - M & P February 2011

headline data and trends with a view to making strategic recommendations later in the document.

Approximately 100 persons are referred to the RSS annually across the Region while the caseload managed in any one year is in excess of that since many Service Users are in receipt of support for periods longer than twelve months. The supporting data is presented later.

Referrals and Caseload and Individuals

Before presenting the data, some of the datasets need to be explained within the context of the RSS configuration and process.

LAs make referrals on an individual basis directly to the RSS Support Worker for their LA location. In 2011 and 2012, 23% of these referrals did not progress to RSS Service Users (analysis below) for various reasons. There is no specific analysis of the details of that 23% in the Review other than the reported reason for their non-progression to service.

Once referred successfully, Service Users' details are recorded and referred Service Users then become part of the existing caseload which is ongoing. The data here analyses the caseload managed in the various time periods which provides a dynamic analysis rather than a static analysis. This facilitates the elimination of duplicate referrals and the observation/calculation of critical indicators such as gender, age, duration of support, level of support and housing outcome thus providing a comprehensive analysis of the impact and effectiveness of the RSS component.

2.1 DATA

Chart 1 below notes that the annual caseload being managed in the Midlands has increased over the 2006 – 2012 period. It is almost double in 2012 than 2006 and all LAs have contributed to the increase, although Westmeath seems to have grown most and includes the greatest volume of Service Users. Offaly LA also has a high referral rate but for a different reason – many of the current emergency facilities are in Westmeath while there were none (in the 2006 – 2012 period) in Offaly.

Successful Referrals

An analysis of the referrals to the service including unsuccessful referrals was carried out in the course of the review.

Table 2 notes that 22% of referrals to RSS were unsuccessful during the 2011 – 2012 period. Success rates were 63%, 84%, 90% and 92% in Westmeath, Longford, Laois and Offaly respectively. The prevalent reason noted for a referral being unsuccessful was the referred person not attending or reporting to the service in 44% of cases while a further 14% had no INA. The remaining 42% related to resources not being available or the person being unsuitable for the RSS service on account of their primary need for health services, mainly mental ill-health needs.

This analysis is useful since it is the intention of the Review to recommend the implementation of planned responses by the RSS to address all referrals to the point of closure. There may also be an issue of time lapse between referral and date of initial attendance by the referred person and a recommendation regarding a proposed streamlining of the service may ensure that all referrals are addressed

efficiently and that 'closure' is agreed and known to all stakeholders as a matter of priority.

	Referrals	Successful	Not Successful	% Successful	% Not Successful	DNA	Resources	Needs Other Services	Did Not Meet RSS Criteria	More Info Required	No INA
Offaly 2012	49	45	4	92%	8%	1	3				
Offaly 2011	44	33	11	75%	25%	6	2	1	2		
Westmeath 2012	73	46	27	63%	37%	15		7	4	1	
Westmeath 2011	46	24	22	52%	48%	4		6	2		10
Longford 2012	25	21	4	84%	16%	2	2				
Longford 2011	20	20		100%	0%						
Laois 2012	29	26	3	90%	10%	3					
Laois 2011	19	19		100%	0%						
Total 2012	176	138	38	78%	22%	21	5	7	4	1	0
Total 2011	129	96	33	74%	26%	10	2	7	4	0	10
Grand Total	305	234	71	77%	23%	31	7	14	8	1	10

Table 2 Successful Referrals and Reasons for Unsuccessful 2011 - 2012

The following sections includes analysis of people who had been successfully referred to RSS.

Reason for Referral

Although all people referred to the RSS receive similar support services, MSC has been keen to note the relative proportion of Service Users referred who have their own tenancies, and are in the 'homelessness preventative' category and the referrals who have been referred from emergency or temporary accommodation.

Table 3 notes that 49% have of the total referrals in Midlands have been categorised 'at risk' identifying those whose tenancies have been identified as 'at risk' on referral. The lowest 'at risk' referral rate is in Westmeath at 24% and the highest is in Laois at 85%. Longford's rate was 64% and Offaly 46%.

Although not conclusive, it is assumed that all other referrals have been Service Users of emergency or temporary accommodation amounting to 51% - 38% definite and 13% noted as 'Not Known'. However, it is assumed that those identified as 'at risk' have been properly referred by the LA as current tenants whose tenancy is 'at risk' while the 13% classified as 'Not Known' are not in that category.

LA	At Risk	Homeless	N/K	Total
Westmeath	25	42	39	106
	24%	40%	37%	100%
Laois	57	10	0	67
	85%	15%	0%	100%
Offaly	42	49	0	91
	46%	54%	0%	100%
Longford	29	16	0	45
	64%	36%	0%	100%
Midlands	153	117	39	309
	49%	38%	13%	100%

Table 3 Reason for Referral (Caseload Based) 2011 - 2012

The usefulness of collecting and analysing this indicator is useful in terms of the characteristics of the care/support plan, the urgency of response by RSS, the resources required and type of support. As such, the indicator could assist in the planning of services and allocation of resources on an ongoing basis in any proposed, streamlined service.

Caseload Analysis 2006 – 2012

Table 4 sets out the referrals recorded from 2006 – 10 and for 2011 and 2012.

The two figures of 650 (top table) and 512 (lower table) are included to note that a number of Service Users on the caseload are referred more than once and although this occurrence is infrequent, it is important to acknowledge that some residents demand more of the process than others and that this has an impact on resources for all agencies and frontline workers.

Referrals (Caseload)	2006 - 10	2011	2012	Total
Westmeath	96	46	71	213
Offaly	172	44	48	264
Longford	39	20	25	84
Laois	41	19	29	89
Total Midlands	348	129	173	650

Individuals (Caseload)	2010	2011	2012	Total
Westmeath	92	23	60	175
Offaly	149	32	30	211
Longford	37	8	19	64
Laois	39	10	13	62
Total Midlands	317	73	122	512

Table 4 Caseload Analysis 2006 – 2012

The breakdown of Service Users in the RSS on an annual basis is recorded in Chart 1 below.

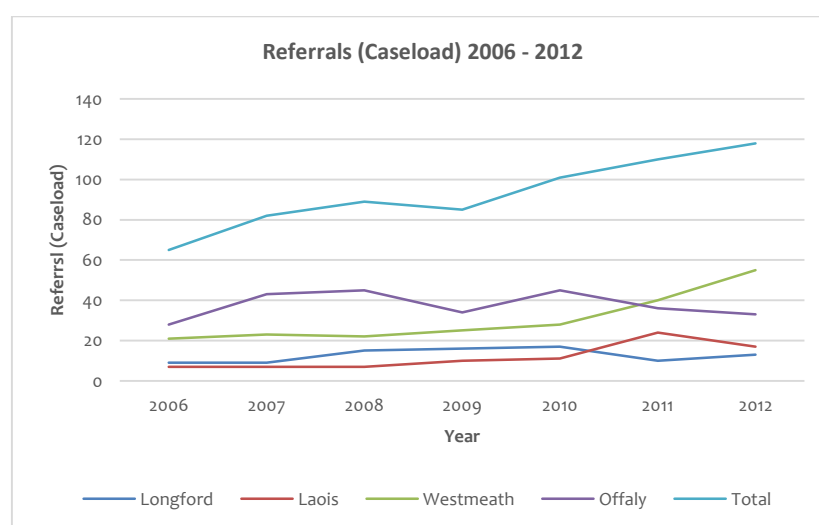


Chart 1 Referrals (Caseload) RSS 2006 – 2012

In the period, there were approximately 650 referrals representing 512 individuals, evidencing that over a 7-year period, a small number of people were referred on two occasions or more.

Frequency of Referral

The Frequency of Referral indicator has been calculated on the data available over the 2006 – 2012 period thus providing a substantial period within which to assess the sustainability or otherwise of Service Users placed and maintained in independent living.

Frequency of Referral Comparative Analysis by LA Midlands 2010 - 12

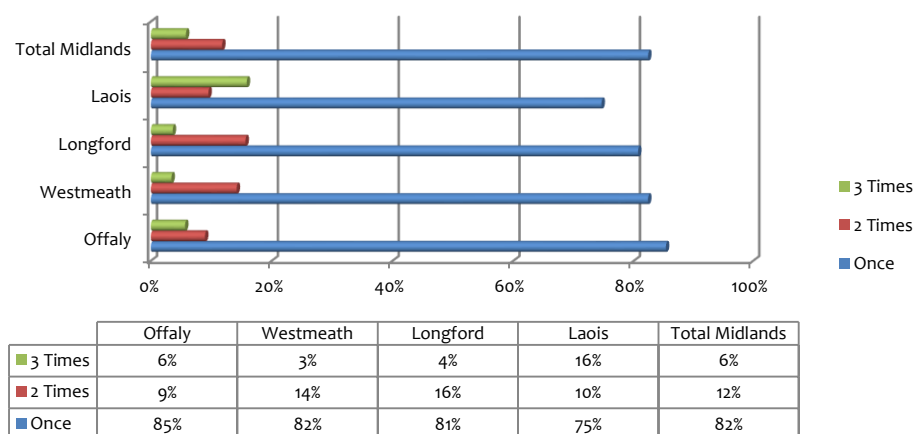


Chart 2 Frequency of Referral RSS Midlands 2006 – 2012

82% of referrals in the Region were referred once while 12% were referred on two occasions and 6% three times over the seven-year period. Offaly retained the highest rate at 85% once while Laois was lower at 75%. This outcome implies that the support was sufficiently effective to deliver a high success rate in terms of housing outcomes.

Gender

In the same period, 2006 – 2012, the gender mix of referrals indicates that some 46% were men and 54% women. The gender mix by LA is outlined in Chart 3.

Gender Mix Midlands Referrals 2006 - 2012

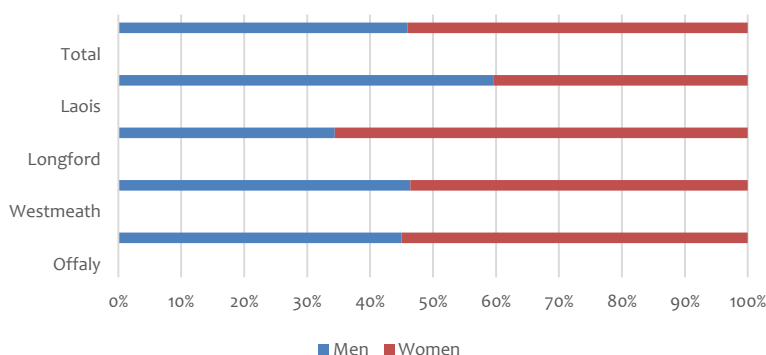


Chart 3 Gender Mix RSS Midlands Region 2006 – 2012

The mix differs between LAs and reflects in some measure, the configuration of homelessness emergency services available locally.

Age Analysis

Chart 4 indicates that 53% of individual referrals to RSS between 2006 and 2011 were under 40 years of age emphasizing the importance of the Midlands RSS in

addressing the living arrangements of this young profile, many with children, in terms of long-term outcomes, benefits and sustained quality of life.

Older age groups also benefited from the service and the RSS contributed to their sustained living in their own homes. Age analysis on this scale can also contribute to more informed planning of support services, components, resource need and type.

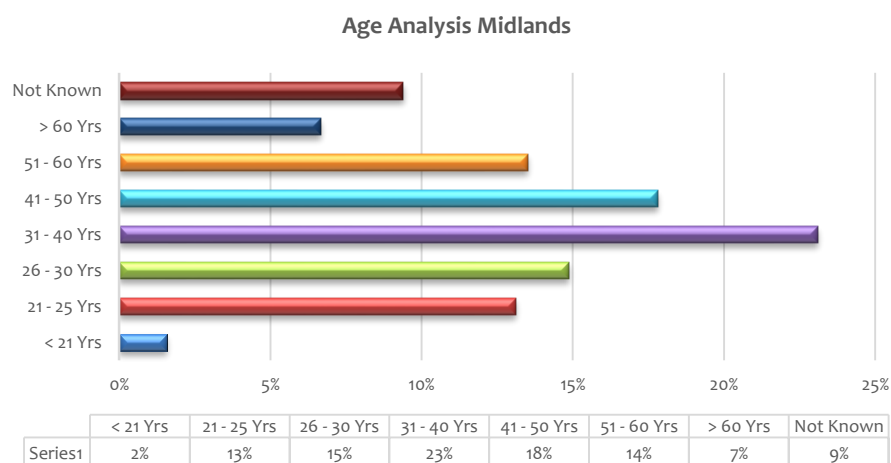


Chart 4 Age Distribution of Referrals (Individuals) 2006 – 2012

Duration of Support

Examining the duration of support over the longer period of seven years (2006 – 2012) provides a good snapshot of the support service.

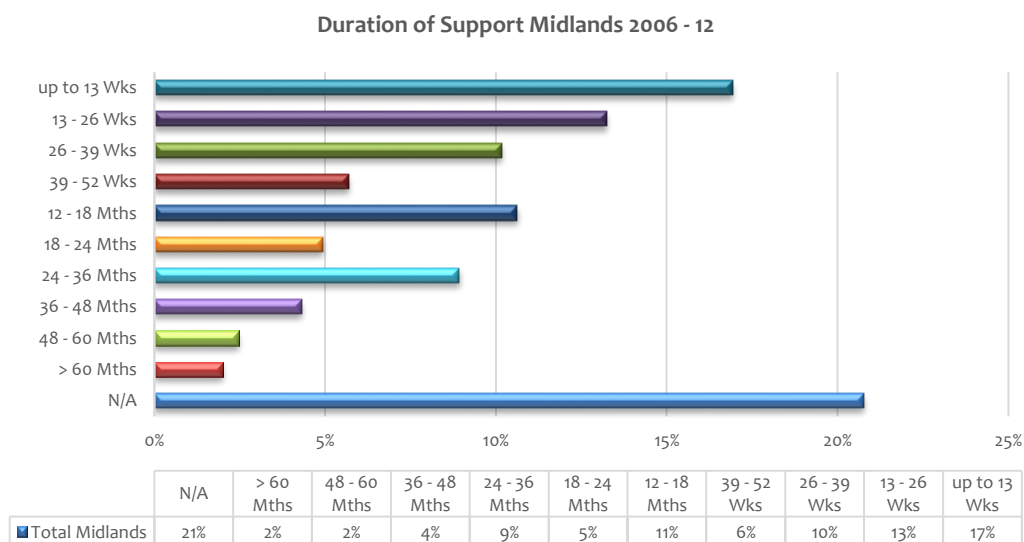


Chart 5 Duration of Support RSS 2006 - 2012

While it was not possible to identify the duration of support for 21% of the caseload (n = 650) due to data collection certainty, it is nonetheless apparent that approximately 46% of referrals receive support for up to 12 months with 30% less than 6 months. A further 16% are supported for up to 2 years and 9% up to 3 years. 6% received support for periods longer than 3 years.

This indicator will be useful in terms of planning exit strategies for Service Users, the allocation of resources, response times and caseload quantum.

Level of Support

For simplicity, this has been analysed over three categories of intensity - high, medium and low – which have been subjectively applied by MSC Support Workers to all caseload 2006 – 2012.

Level of Support Comparative Analysis by LA Midlands 2006 - 12

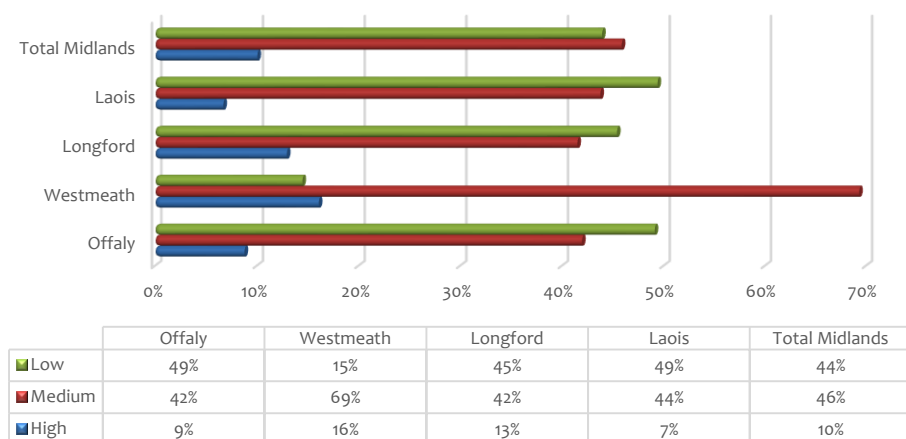


Chart 6 Level of Support RSS 2006 – 2012

The largest category of support level is medium for 46% of Service Users in the period, 44% in 'low' and 10% 'high' support. Three of the LAs have broadly similar patterns of support while Westmeath has a significantly lower percentage of its Service Users in the 'low' category and much higher than average in the 'medium'.

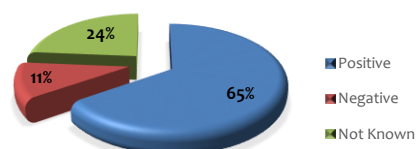
This indicator also provides good information on the resources' need and type.

Housing Outcomes

A final indicator is the housing outcome for Service Users over the 2006 – 2012 period. A positive outcome is recorded if the referred Service User has remained in housing at the end of their period of support or at the time the review commenced in April 2013. A negative outcome is recorded where the tenancy has not been retained at the end of the period of support or if the Service User has returned to emergency or temporary accommodation.

An additional category is recorded as 'Not Known'. This cohort includes former Service Users whose period of support had ended for whom MSC had no brief to continue collating information on their independent living circumstances.

Outcomes - Midlands Referrals
2006 - 2012



Outcomes - Midlands Individuals
2006 - 2012

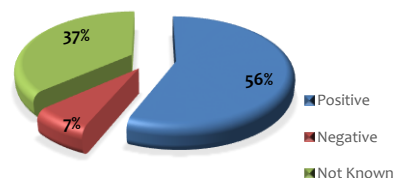


Chart 7 Outcomes – Referrals and Individuals RSS 2006 – 2012

The Housing Outcome indicator is measured over two different caseloads – all referrals (which includes Service Users who have been referred more than once in the period and are therefore duplicated) - and individuals. (Chart 7 refers.)

The top chart on the right notes that 65% of referrals has positive outcomes and 11% had not. The outcome for 24% was unknown. This chart includes Service Users who were referred more than once.

In the lower chart, 56% of the caseload (individuals) had positive outcomes for the period and 7% had not. The outcomes for 37% of individuals was not known.

M & P acknowledges that it has been difficult to maintain contact with all Service Users over the 7-year period. While a 56% tenancy sustainment level is good, if even half of the 'Not Known' category had sustained tenancies (18.5%), an estimated outcome for the Individuals category would be 74.5% which implies a high success rate in homelessness.

The next section forms the recommendations and discussion of the way forward for the RSS against the relevant background.

3. RECOMMENDATIONS AND DISCUSSION

There are a number of key issues arising from the Primary Research interviews with key informants including MSC management and staff and the service commissioners including the Midlands Local Authorities and HSE Midland Area.

Generally speaking, the service meets with the approval of the commissioners and has met its Service Level Agreement details. It is acknowledged that in the intervening period 7-year period since the RSS was established though, that there have been significant changes to the operating environment which have impacted on the services. These are both structural and knowledge-based, and MSC is keen to address both within the context of the Review. The service commissioners also observed some important changes in the way the service has developed over the period which the Review will also address.

The key areas which the Review will address and make recommendations on are:

1. **Response threshold parameters and phases;**
2. **Referral procedure and protocols;**
3. **Duration of support, capacity and caseload;**
4. **Management structure;**
5. **Monitoring process.**

3.1 RESPONSE THRESHOLD PARAMETERS AND PHASES

The nature of homelessness has changed in the past ten years with more families and young people accessing services. There have also been significant improvements in the housing supply through the actions of both Local Authorities and Voluntary Housing Associations. These improvements have extended general and specific permanent housing to specific groups of vulnerable individuals and families. The HSE has also been implementing progressive social inclusion programmes which aim to keep people in their own homes as a priority and many Service Users have been reached in this strategy and have been in receipt of services successfully. However, an outcome from these developments is the emergence of a more vulnerable cohort of homelessness Service Users who have escaped these safety nets and whose needs are more complex requiring more intensive and sustained actions and support. The implication for services is that agencies and frontline workers must be more skilled than ever to address homelessness within the context of very complex health and social circumstances.

Since settlement services have been established and developed in the Midlands since 2005/06, it is the view of M & P that it is one of the few areas which are well-positioned to progress services to the next stage to address the emerging needs as mentioned. The recommendations contained in the Review are advanced to address the current needs experienced by the LAs and HSE Midland Area and the capacity of the RSS to respond. In this regard, the starting point is the nature of the current referrals and the importance of any service contract in providing a response which meets current demand.

The data analysis above (Table 2) suggests that the percentage of referrals not successful in 2011 and 2012 was 23%. The majority of these referrals (44%) did not attend the initial meeting while about 41% seem to refer to inappropriate referrals or the RSS as currently configured not having the necessary resources. While there are many reasons for inappropriate referrals and referrals not responding,



steps should be taken to minimise these occurrences not just for the benefit of the Service Users but for the efficiency and effectiveness of the various services including the HSE, LAs and MSC. The most constructive way of approaching these issues lies in the timeliness of the response to referral, the management of the caseload and the monitoring of all outcomes.

While the skillsets within the RSS are appropriate to address current need, the referral process could be streamlined and re-configured to ensure that there is a rapid response to all referrals following the formal assessments and referral by LAs, thereby acknowledging the importance of early intervention. Services for vulnerable people, including those who are in need of homelessness services, have a brief window of opportunity to respond before the option to intervene may effectively be lost.

3.2 REFERRAL PROCEDURE AND PROTOCOLS

The referral procedure should continue to be formal but should also be cognisant of the need to respond and intervene quickly. The recommendation here is that all referrals should be made directly to the MSC RSS centrally and then allocated to the most appropriate Settlement Worker. In the main, this will be the worker responsible for the LA but speedy referral and intervention will be based on the caseload and availability of the worker. By definition, there will always be a six-week period in any year when the frontline worker will be on leave and there will be unplanned absences caused by illness among others. The service has to provide continuity of service and this can be achieved with minor alterations to the referral process and the early stages of intervention.

The development of a 48-hour (or period to be agreed) Rapid Response Intervention for referrals should be considered. Not all referrals will require a rapid response. Approximately 50% of referrals are residents in their own homes and may not require such a swift response although all referrals should be contacted by phone as soon after referral as possible. Such rapid response contact has the capacity to reinforce the formality of the service to the Service User and provides the best opportunity to initiate a successful plan and outcome. It also gives the RSS, the LA and HSE the early opportunity to consider alternative solutions in full knowledge and in consultation where necessary. These actions have the capacity to reduce the number of referrals escaping the safety net on account of reaction time after referral. It also facilitates the expeditious consideration of alternative support plan or referral options where initial identified needs are greater than first thought.

The criteria for admission to the RSS was devised and agreed in 2005 and the Review recommends that these criteria are revised to take account of recent changes in need and other developments within the operating environment including response times and other recommendations in the Review.

MSC should draw the criteria are prepared and agreed with the service commissioners to ensure that all agencies' needs are met in the exercise.

3.3 DURATION OF SUPPORT, CAPACITY AND CASELOAD

Duration of support, capacity and caseload are integral components to the capability of the RSS to continue to deliver services effectively and efficiently. Chart 1 above records the annual average caseload increasing from 65 Service Users in 2006 to 118 in 2012. While referrals also increased in the period, at least 33% of referrals are in RSS over one year, at least 17% more than two years and



smaller percentages over 3 and 4 years (Chart 5). The cumulative impact on average caseload of Service Users being retained in services and referrals continuing, delivers an increasing quantum of cases. Of course, Chart 6 notes that 44% of the caseload has a low support requirement and 46% a medium support need, and 10% high and this mix is crucial in terms of determining the optimum resource allocation at any moment in time.

While many Service Users have a reducing need from the initial levels of support, it is clear that many remain on the caseload possibly creating pressure on resources and restricting access by new referrals. The recommendation here is that there is a clear exit strategy by the support workers for most if not all Service Users. Since the purpose of the RSS is ostensibly to reduce dependency and deliver independent living for Service Users, it is logical that all parties including the Service User will plan for that outcome. It is accepted that a small number may require ongoing support particularly if the emerging need Service Users are successfully referred. It may be possible to consider the use of volunteers for Service Users of more than one year or referral to another low support or visiting support service available from other volunteer-based agencies locally (eg SVP). The crucial factor here is that the high level of skillsets available at MSC RSS are made available to all new referrals, as soon as possible and to the Service Users with the most challenging needs.

In terms of a recommended duration of support, it may be useful to consider a maximum of six months as an initial period. The model proposed here in the Review envisages the 'front-loading' of support as an intensive programme at the beginning and reducing thereafter. For most Service Users, this period would also serve as a period of ongoing assessment during which the achievement of support plan key milestones can be pursued and measured. Within this approach, the projected duration of support can be assessed and reviewed monthly with a view to minimising dependence and generating independence expeditiously, thus delivering improved outcomes for Service Users and the service capacity.

The purpose of this recommendation is to ensure that the caseload is managed such that all new referrals and the Service Users with the most challenging needs are prioritised within the service delivery cycle. There is no precise caseload ratio of Service Users to Support Worker simply because it depends on the mix of Service Users and their needs. The ratio could be as high as 20:1 at certain times and 10:1 at others, and an average of 15:1 could be a working standard. The priority of the RSS under the recommendations of the Review is to ensure that all referrals receive an intervention as soon as possible and that the management of the caseload is sufficiently flexible to continue to prioritise the work throughout the Region.

Given the available resources and emerging need, the Review recommends that the rationale for caseload composition and the caseload mix should be a key discussion point between the service commissioners and the providers.

MSC should profile the proposed caseload and mix, and agree the approach with the service commissioners acknowledging that this will be act as a guideline framework.

3.4 MANAGEMENT STRUCTURE

In order to deliver the 'priority principle' RSS, its management should be re-configured to:

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1. **Accept referrals centrally;**
2. **Assess and allocate referrals expeditiously within the available resources that day;**
3. **Advise the referring LA and associated team of the proposed Service User RSS plan or any alternative plan at the post-referral stage;**
4. **Manage the Settlement Worker team to achieve flexibility for 'priority principle' outcomes;**
5. **Provide good quality management information to the Homeless Action Team.**

The central referral of Service Users is designed to provide the LAs with a more streamlined approach to the RSS. The RSS will also benefit from the efficiencies derived from a managed caseload and central referral. These efficiencies will be further enhanced through improved co-ordination of resources as a result of the synergy between Settlement Workers operating regionally rather than solely Local Authority geographic locations. In other words, the re-configuration will mean that there will be no absence of service at any time and Settlement Workers will have a regional brief reflecting the regional nature of MSC.

Notionally, there would be a Settlement Worker servicing each Local Authority area but this would not preclude the imperative to provide Rapid Response work to new referrals and planned, intra-regional cover for holidays and periods of sickness. In other words, the Service User is always central to the service provision and the priority principle guides the allocation of resources through effective case and caseload management.

3.5 MONITORING PROCESS

The proposed centralisation and management of the RSS functions provides the opportunity to modify the existing data collection and monitoring data to a uniform system. In time, it will also ensure that assessment and pathway progression procedures comply with regionally standardised systems and these will be important for all stakeholders.

It is recommended that data recording variables are kept to a minimum. Such an approach provides for less cumbersome datasets, improved management effectiveness and confidentiality of Service Users' information. Most of the professionals involved with Service Users will retain and maintain their own client records which, in turn, will comply with their professions' ethics and standards.

Smaller and more targeted datasets are the most efficient in terms of management. At any moment in time, MSC RSS should know how many and who are the current recipients of RSS and what stage of their development has been attained on the pathway. This is essential information for RSS case management and caseload management and will form the basis for bilateral discussions with the LAs and the MRJCHF when required.

3.6 LONG-TERM SUPPORTED HOUSING

Currently the RSS includes Service Users with a wide range of needs. One of the key objectives of the Homeless Action Team approach and RSS is to identify Service Users who will, in all likelihood, have a need for long-term supported housing. In other parts of the country, where there is no dedicated settlement service, there may be long-term supported housing which houses people in dependent settings who do not require it, or there is supported housing with little formal, funded support. In Kilkenny, the Good Shepherd Centre (Men's Hostel) has developed the Homeless Action Team structure with the LA and HSE, and



have been able to identify residents who will always require long-term supported housing and who are allocated housing which is provided with ‘floating support’ from the Good Shepherd Centre. Several houses are now allocated and leased by Kilkenny County Council for people who have permanent needs (mental ill-health) and who had previously been confined to institutional life in Department of Psychiatry units. Good Shepherd Centre, HSE and Kilkenny County Council have collaborated to provide independent living with floating support for a number of people and the four houses have been running successfully for about three to four years now.

MSC is fully immersed in the settlement function and manages a SLI project also for long-term settlement support on a floating basis. MSC believes that this model could be applied to some Service Users in the current RSS and indeed to others in the community who are in receipt of continued services. It has discussed the possibility of establishing a Social Housing Leasing Agency to develop a stock of housing that it would rent and then sub-lease, and thus become a Social Housing Leasing Agency. Sourcing the properties would be carried out with the agreement of the Midlands Local Authorities possibly through the Slí Scheme and accommodation sourced would be prioritised for people who need long-term support and provided in association with the Local Authority.

It is understood that the Midlands RSS currently provides settlement support for a small number of referrals who may never live independently and that there are many others in the Midlands Region currently living or resident in other types of institutional-type accommodation whose quality of life may benefit from a supported living environment with floating support. This could be implemented from allocated individual housing units or from a customised, cluster housing configuration which is defined as ‘supported’ but which, as far as possible, honours the principle of residents having access to their own front door. Either way, it is probable that this service would be a separate service which would build on the competences and experience of the current Midlands RSS but would be implemented with different skillsets and caseload management systems.

For this strategic development, the Management Committee of MRJCHF and the LAs should consider how to house/re-house the cohort of people in the Region whose independent living needs preclude sustained tenancies and to examine how the principles of the Housing First Model can assist in address the issue.

3.7 **RSS MULTI-PHASE SETTLEMENT MODEL**

In the course of the Review, it became apparent that most of the ingredients of a stand-alone, MSC proprietary implementation model are currently being fulfilled by the RSS Team. Given that the Midlands RSS Team has been implementing an innovative and unique service for a period of seven years, it may be possible to take the necessary steps to formalise the current practice into a Multi-Phase Settlement Model.

The essential elements to the model are the various phases which typify Service Users’ pathways through settlement services towards independent living. The Review sets out the framework of such a model and make a recommendation for its full development in a formal, staged and consultative process. It could be formalised by the end of 2013. Crucial to its development will be the input from all stakeholders including:

- *RSS staff and management;*
- *Midlands Local Authorities;*



- HSE Midlands;
- Midlands Homelessness Service Providers.

3.7.1 FRAMEWORK

Chart 1 sets out a suggested framework which typifies a Service User's pathway through the RSS. The five phases contain specific actions which the service and staff can provide and once a Service User has satisfied the relevant phase criteria, s/he can be move into the next phase for the purposes of case management. There are benefits for the Service User and the service in terms of planning, skillset and skill mix, targets which Service Users can agree and Settlement Worker can satisfy, team involvement and service exit.

Most importantly, Settlement Workers will be confident that the Service User has adjusted sufficiently to resume an independent lifestyle.

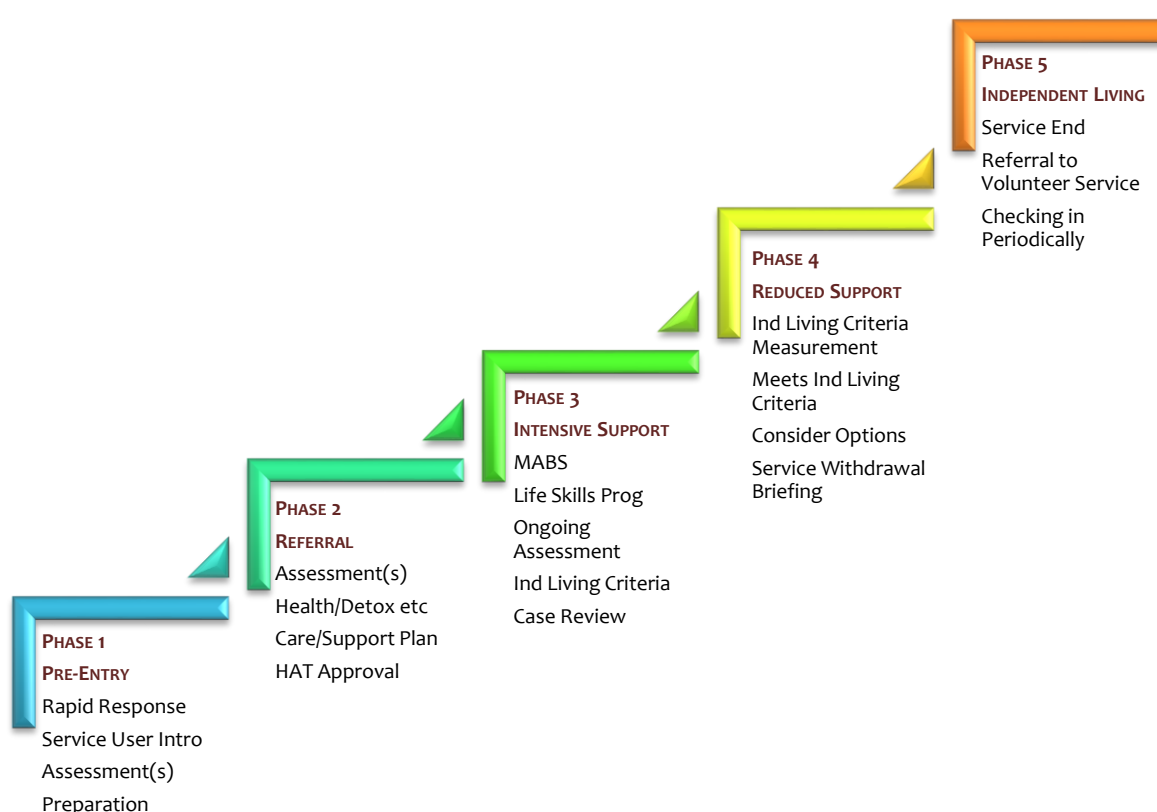


Chart 8 Multi-Phase Settlement Model

The model may also include the agreement of various indicators which will assist in defining and assessing the various stages of development including support level type and independent living itself. For example, there are existing criteria which identify the competence level of independent living skills that Service Users possess and if developed and applied consistently, the Regional standards will be coherent, reliable and constant.

Although development of the Multi-Phase Settlement Model will be challenging, it is largely a case of formalising existing practice and ensuring that all stakeholders are a part of its construction. It has the potential of adding to existing professionalism in the Midlands and developing a greater confidence in the skills and methods being applied in the field. Once complete, the RSS could publish the Multi-Phase Settlement Toolkit which would inform future practice and would extend to all participating employees and Service Users.

3.8 DEPOSITS ETC

One of the barriers to placing people from emergency or temporary accommodation is the ability of some Service Users to attract sufficient funds for a deposit for private rented accommodation. This relates to caps on deposits and rents by Local Authorities and HSE which private landlords exceed in many cases. While the flexibility of the LAs and HSE is limited, it is possible that MSC's RSS effectiveness could be enhanced by application of a Loan Scheme. It would be operated by MSC. Repayment of the loan would rely on the trust developed by Settlement Workers with Service Users. It would require a small seeding amount of funding and would in most cases act as a 'top-up' to LA or HSE deposit funding. Apart from the fact that it would facilitate the expeditious placement of Service Users in independent living accommodation, the proposed Loan Scheme could generate substantial cost and efficiency savings derived from the optional need to fund emergency accommodation for the Service Users who cannot meet the deposit.

3.9 DATA AND SERVICE MANAGEMENT

The Review acknowledges the efforts that have been made by all parties to develop accountability and service management through the collection and collation of data. It is proposed that these processes are streamlined and reflect the main attributes and management configuration recommended in the Review.

There are two types of data required:

- *data for the management of the service; and*
- *data for the management of the Service User pathway.*

3.9.1 DATA FOR THE MANAGEMENT OF THE SERVICE

Datasets for this purpose should include the most basic of information relating to the Service User and should be manageable by all Settlement Workers and management. These datasets will be useful for the management of the Regional caseload and for any derivatives of it such as LA level enquiry, Homeless Action Team review etc. The variables required here should include:

- *Name*
- *PRSI No*
- *Address*
- *Last Address*
- *DOB*
- *Marital Status*
- *Date of Referral/Presentation to Services*
- *Projected Date of Key Phase Attainment*
- *Date of Departure from Service*
- *Housing Outcome*

M & P describes this data as 'Quantitative Data' or 'Records' relating to service management.

3.9.2 DATA FOR THE MANAGEMENT OF THE SERVICE USER PATHWAY

As mentioned above, Settlement Workers and other health professionals will maintain their own records on the various types of support provided and these will all ethical and professional requirements in terms of data control and protection. In line with the focus of the Review recommendations, it is further suggested that a Service User Record Card/File is completed by the Settlement Worker on each session/visit and left with the Service User in the accommodation. It should record each visit and some brief details which will inform the Settlement Worker (and locum Settlement Worker) of the history. It could also act as a 'Welcome Pack' for the Service User with important information on the Settlement Service, key contacts and other support service information such as MABS, Social Worker, Housing Department etc.

M & P describes this data as 'Qualitative Data' relating to the Service User.

3.9.3 VALUE FOR MONEY CONSIDERATIONS

The Review has essentially addressed the role of the RSS within the configuration of services in the Region. It is the only Region wide, homelessness service in the Midlands and, as such, has a major impact on all other services. MSC's approach since its inception was built on the Housing First model and is encapsulated in the RSS with Settlement Officers in all four LAs. It is significant that the four LAs in the Midlands Region launched the services in a true partnership with the providers and that the focus on returning service users to independent living has always been a priority – in line with Government homelessness policy.

Despite the changing working environment of need and resources, the RSS has delivered enviable achievements in the field of homelessness. The proportion of service users accessing independent living³ at 72% is at least ten times the national average while the proportion of referrals retaining and maintaining their tenancies at a minimum level of 65% is substantially above the national average.

A clear interpretation from the analysis is that a dedicated and co-ordinated placement and support service as profiled above, delivers sustained housing outcomes for most service users. The absence of such (settlement) services delivers few positive outcomes and requires the need for more extensive residential services where the use of services is frequent and long-term for many service users.

The focus on settlement - both preventative and returning service users from emergency services to independent living with supports – reflects positively on cost and resources.

Region	Population	% of 7 Regions	Funded Staff	Total Statutory	PP	Funding %
Midlands	282,195	6%	33	€1,442,445	€3,184	1.5%
North West	257,975	6%	53.7	€1,934,176	€3,358	2.0%
North East	256,177	6%	58	€3,059,863	€4,547	3.2%
South East	497,305	11%	118	€5,143,288	€6,080	5.4%
Mid East	530,437	12%	37.9	€2,352,875	€7,493	2.5%
South West	663,176	14%	313	€16,310,578	€8,395	17.0%
West	444,991	10%	88	€7,234,587	€10,670	7.6%
Dublin	1,270,603	28%	892	€58,262,412	€10,933	60.9%
Mid West	378,410	8%				
Total (8 Regions)	4,581,269	100%	1,594	€95,740,224	€8,855	100%

³ Analysis of Reviews of 8 out of 9 Regions M & P 2013

With reference to the table above, the cost per capita revealed in the eight of nine reviews carried out in Ireland by M & P is lowest in the Midlands as is the funded employee resource. M & P's analysis is that the data which suggests that the Midlands has the lowest per capita cost; and the best housing outcomes and associated performance indicators such as lowest frequency of return and low levels of stay at emergency accommodation, is no accident. The focus on returning service users to independent accommodation with supports delivers these outcomes and contains costs. As the table suggests, no other region has achieved these outcomes and efficiencies⁴.

⁴ Review of Homelessness Services M & P 2011

4. CONCLUSION

This concludes the Review of the Midlands RSS which is prepared with a view to implementation in 2014 with the necessary steps outlined to progress the recommendations.