

Merthyr Tydfil HSP Strategy Needs Assessment



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Glossary

LA – Local Authority

LD – Learning difficulties

LDP – Local Development Plan

LSOA – Lower layer Super Output Area

RSL – Registered Social Landlord, otherwise known as housing associations

S66 – Section 66, duty to prevent

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

S75 – Section 75, final duty

TA – Temporary accommodation

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

WIMD – Welsh Index of Multiple Deprivation

Introduction

This assessment is a statement of what the Council knows about the needs and future demand for homelessness prevention and housing support services. Local authorities must undertake a comprehensive needs assessment every four years, with a light touch review every two years.

This needs assessment encompasses the statutory requirement for a homelessness review as well as the full assessment for the HSP. The assessment needs to be informed by the following data:

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

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

Background and National Policy Context

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

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

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

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

Appendix 1 provides a full summary of relevant legislation and policies.

About Merthyr Tydfil

Covering 55 square miles, Merthyr Tydfil is the smallest Unitary Authority in Wales. The main population centre is concentrated in Merthyr Tydfil itself but the area also contains a number of villages including Troedyrhiw, Aberfan, Bedlinog and Treharris.

Over the last twenty-five years, the County Borough has experienced considerable structural and economic change. The economic structure has changed from that of an area dominated by primary and secondary employment to that dominated by tertiary activities. A number of major recent developments in Merthyr Tydfil such as the Cyfarthfa Retail Park and new Leisure Village have given the area an economic boost, providing jobs for local people and attracting visitors and investment into the town.

The County Borough of Merthyr Tydfil is split into eleven electoral Wards: Vaynor, Dowlais, Gurnos, Penydarren, Cyfarthfa, Park, Town, Plymouth, Merthyr Vale, Treharris, and Bedlinog.

Wellbeing assessment

Summary

- 60,424 people lived in Merthyr Tydfil in June 2020, the population will grow modestly and people aged 65+ become a larger proportion of the population with more complex health and social care needs
- A number of areas have significant levels of housing deprivation such as Merthyr Tydfil Town, Penydarren, Merthyr Vale and Gurnos.
- Austerity and welfare reform have had a greater negative impact than in other areas of Wales and these risk increasing inequalities further.
- Merthyr Tydfil features some of the most deprived areas in Wales. There is a greater concentration of deprivation in the north of the County in the areas surrounding Merthyr Tydfil such as Penydarren, Gurnos and Gellideg in Cyfarthfa. There is a significant concentration of deprivation in Merthyr Vale which is one of two areas of deep rooted deprivation along with Penydarren.
- Deprivation indicators for health, income, employment and housing can put people at higher risk of homelessness. In the health domain this includes mental health conditions, limiting long term illness and chronic health conditions, all of which can make finding and retaining suitable accommodation challenging.
- HSG alongside partners within Health and Social Care, Education and other key stakeholders all have a significant role to play in addressing these needs.

Public services across Wales have a legal duty to work together with the people of Wales, for their future well-being. This duty is set out in the Well-being of Future Generations (Wales) Act. The Act includes seven national well-being goals, which the Council needs to take into account in all of its plans.



Figure 1 Well-being goals of the Well-being of Future generations (Wales) Act

A Well-being assessment is undertaken to help understand what the Council needs to do to improve well-being. This was first done in 2017 it will be refreshed in 2022. The most recent assessment was carried out by the Cwm Taf Public Service Board (PSB) and covers Rhondda Cynon Taf and Merthyr Tydfil, and data has been drawn from this for this needs assessment. The Council sets out objectives based on the Well-being Assessment. The Housing Support Grant and the Outcomes Framework complement the wellbeing objectives, particularly in terms of the 'Living Well' objective to improve the lives and promote the independence of people living and working in Merthyr Tydfil through safer communities, promoting good health and reducing dependence. Relevant findings of the Cwm Taf Well-being Assessment are summarised below:

Population

At the recording of the 2011 census the population of the County Borough was 58,802 of which 43,820 were in the Town. In 2011, the mean age of the population was 39.7. The population of the County Borough was comprised of:

- 10,960 people under the age of 16,
- 7,048 people between 16 and 24,
- 30,998 people aged 25 to 64 and
- 9,796 people 65 and over.

There were 24,264 dwellings, these were made up of:

- 8,277 owner occupiers households where the property is owned outright,
- 7,566 where the household has an outstanding mortgage on the property
- 42 households in shared ownership.
- 5,118 households live in social housing lets with
- 2,809 households live in the private rented sector
- 452 households live rent free in some form of tenure

This picture will be updated in 2022 with the new census data. The Housing Support Programme strategy will be refreshed after two years, allowing this new data to be incorporated into the needs assessment.

The Welsh Government estimated that 60,424 people lived in Merthyr Tydfil in June 2020, an increase of 98 people from the 2019 estimate. Merthyr Tydfil's total population is predicted to grow modestly, largely as a result of migration, whilst the demographics of the population will change significantly as people aged 65+ become a larger proportion of the population. The population of the area is projected to grow to 63,154 by 2040, a growth of 5% from the 2020 estimate.

However, between 2018 and 2040 population projections estimate that the number of people aged 65+ will grow from 11,224 to 14,537, a growth of 30%. Older age groups have significantly higher levels of population growth, with people aged 80+ predicted to grow by 48% in the same time period, reflecting an ageing population with more complicated and intensive health and social care needs.

Area	Estimated population 2018	Projected population in 2040 based on 2018 estimate	Estimated variance in projected population	Estimated percentage variance in projected population
Merthyr Tydfil	60,183	63,154	+2,971	4.9%
Cwm Taf Morgannwg	445,190	472,900	+27,710	6.2%

Table 1: Population Growth Projections for Merthyr Tydfil CBC to 2040

The Council must consider the ageing population in line with other associated factors, including the rising prevalence of dementia (which is featured further in the document) when developing new stock and provision to meet the future demand adequately.

Housing

The Council has a Local Development Plan (LDP), which sets out the plan to use land in the County. Where people live has a big influence on their well-being, with particular associations between housing and physical and mental health. In Merthyr Tydfil a number of areas have been identified as having significant levels of housing deprivation such as Merthyr Tydfil Town ward, Penydarren, Merthyr Vale and Gurnos. Using the LDP as an opportunity for targeted regeneration of deprived neighbourhoods could lead to improvements in physical and mental health and overall well-being. Relevant themes to homelessness include:

- Urban regeneration in the County gives the opportunity to create places that attract investment and business and improve well-being.
- Homes are more affordable in Merthyr Tydfil than in other areas of Wales, but may still be beyond the reach of young people and those on low incomes.
- Welfare reforms have badly affected communities, particularly Gurnos.
- Less prosperous areas of Wales including Merthyr Tydfil have historically benefitted from investment of European funding. The withdrawal of this funding now that the UK has left the European Union will be a considerable loss.
- The geographical landscape of parts of Merthyr Tydfil makes transport difficult. This, together with transport costs is a barrier to accessing work.
- Children growing up in poorer families leave school with lower levels of educational qualifications, which reduces their prospects for employment.

Deprivation

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

Merthyr Tydfil features some of the most deprived areas in Wales with 8 LSOAs, out of the 36 total, classed as among the 10% most deprived in Wales and half of LSOAs in the local authority classed as among the 30% most deprived in Wales.

There is a greater concentration of deprivation in the north of the local authority particularly in the areas surrounding Merthyr Tydfil such as Penydarren, Gurnos and Gellideg in Cyfarthfa. Although levels of deprivation are lower in the south of the local authority, there is a significant concentration

of deprivation in Merthyr Vale which is one of two areas of “deep-rooted deprivation” in Merthyr Tydfil.

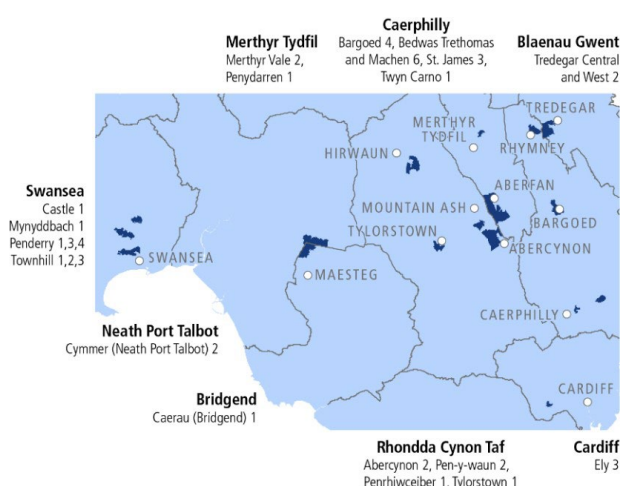


Figure 2 Map of South Wales highlighting areas of deep-rooted deprivation (WIMD 2019)

Deep-rooted deprivation is defined as an area that has remained within the top 50 most deprived, roughly equal to the top 2.6% of small areas in Wales for the last five publications of WIMD rankings (WIMD 2005, 2008, 2011, 2014 and 2019). Using this definition, the two areas of deep-rooted deprivation in Merthyr Tydfil are Merthyr Vale 2 and Penydarren 1. 46% of people in Penydarren 1 were in income deprivation in 2016-17 and the area has been ranked within the top 14 most deprived areas since WIMD 2005.

LSOA	National rank in WIMD 2014	National rank in WIMD 2019	Change in national rank 2014 19
Penydarren 1		7	- 7
Merthyr Vale 2	8	34	+ 26
Gurnos 1	32	56	+ 24
Cyfarthfa 2	30	65	+ 35
Gurnos 2	61	106	+ 45

Table 2 Merthyr Tydfil LSOA rankings nationally

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

The housing domain is made up of two equally weighted measures: the likelihood of poor quality housing (being in disrepair or containing serious hazards) and the percentage of people living in overcrowded households (bedrooms measure). Housing deprivation is at its highest around the Merthyr Tydfil train station and in the south of the local authority, in communities such as Merthyr Vale, Troedyrhiw and Bedlinog.

Domain Construction

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

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

The levels of homelessness and accommodation insecurity in Merthyr Tydfil likely parallel levels of deprivation, particularly for areas performing worse in the domains identified above.

Austerity measures and welfare reforms have had a greater negative impact in Merthyr Tydfil than in other areas and these risk increasing inequalities further. The Wellbeing Assessment recommends that the following evidence based actions could improve outcomes and reduce inequalities, in which HSG funded services have a role to play:

- Programmes that ensure adequate incomes, reduce debt and reduce income inequalities;
- Programmes that target vulnerable groups by investing in more intensive services and other forms of support for such groups¹

Wellbeing Plan

From the Well-being Assessment the Cwm Taf Public Service Board created the Well-being Plan and will deliver this through the five ways of working:

¹ Cwm Taf Well-being Assessment 2017

- Long term
- Prevention
- Integration
- Collaboration
- Involvement

Housing Support Grant funded services have a significant role to play in delivering a number of key objectives including:

Tackling loneliness & isolation

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

Thriving Communities

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

Healthy People

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

Homelessness in Merthyr Tydfil

Summary

- Changes made to homelessness legislation as a result of the Covid19 pandemic removed 'priority need' and adopted an 'all in' approach. This has resulted in a significant increase in the amount of homelessness presentations since March 2020.
- The Housing Solutions Team invariably relies on local bed & breakfast and guest houses, to provide TA.
- The proportion of successful preventions and relief as a total of each duty's outcomes is lower in Merthyr Tydfil than the Wales average.
- The Council's outcome data in many some areas, such as for Section 73, improved year on year between 2019 and 2021, with Merthyr Tydfil improving year on year in some areas, in contrast to national trends of decline.
- COVID 19 has had a significant impact on the numbers of vulnerable people now owed a homelessness duty, and the range of complex needs that need support.
- The One Stop Shop should undergo an evaluation following five years of operation
- The pandemic has highlighted the need for system partners to work better together and improve data sharing.

This section analyses the data for:

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

Homelessness statistics and housing data have been primarily sourced from the Council's own assistance data and its quarterly WHO12 returns. Data from 2021 covers the period from January to August, unless otherwise stated, and therefore any trends and interpretations from the data will not necessarily account for changes that occurred after August. Figure 3 below demonstrates schematically how the duties on the Council under the Housing Act are applied.

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

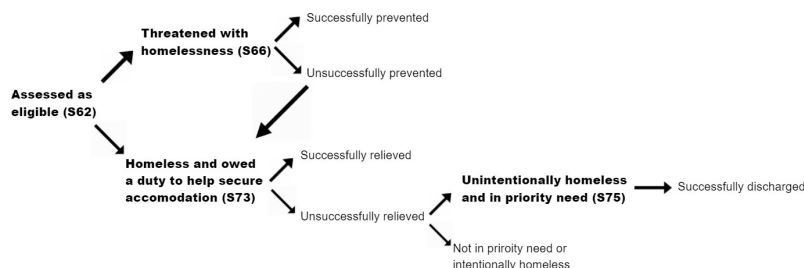


Figure 3 Welsh Government Homelessness Assessment Flowchart

The number of people approaching the Council for a homelessness assessment has increased consistently year on year since the new housing legislation came into force in April 2015. Presentations have seen a further significant increase following the changes made to priority need in March 2020 as a result of the Covid 19 pandemic that placed a statutory duty on the local authority to provide temporary accommodation until affordable permanent accommodation can be secured. The Council use the following types of accommodation as temporary accommodation:

- Refuge Accommodation
- Hostels
- Flats owned by a registered social landlord/housing association
- Supported housing schemes
- Bed and Breakfast accommodation
- HMO's (shared accommodation)

The Housing Solutions Team invariably relies on local bed & breakfast and guest houses, to provide this temporary accommodation (TA), at a cost of between £50 (single) - £90 (family) per room, per night.

National Trends

Utilising national level data, including the national aggregation of quarterly homelessness returns, comparisons can be made between Merthyr Tydfil and Wales as a whole regarding homelessness and outcomes.

A significantly higher proportion of single person households were assessed and/or provided assistance in Merthyr Tydfil than the national average, with single person households comprising 89% of all outcomes in 2020/21 compared with a national average of 68%. Of the 105 households assessed as ineligible or eligible, but not homeless or threatened with homelessness, 99 were single person households (94%) compared to 64% for Wales. These differences suggest that the types of households being provided assistance by the local authority are different in Merthyr Tydfil and do

not mirror national trends.

Area	Section 66	Section 73	Section 75
Wales	48%	80%	76%

Table 4 Proportion of single person household outcomes by duty

Merthyr Tydfil has a smaller proportion of successful outcomes across all duties when compared with the national average, with the largest difference between the proportion of households positively discharged from final duty (Section 75).

Area	Section 66	Section 73	Section 75
Wales	65%	39%	75%

Table 5 Proportion of successful outcomes by duty in 2020/21

There is a gap of 17% between the proportion of successful preventions in Merthyr Tydfil and the national average. The total number of households subject to a duty to prevent homelessness in Merthyr Tydfil more than halved between 2019/20 and 2020/21, which is a greater reduction than the national average, which only reduced by slightly more than a third in the same period.

The difference between Section 73 outcomes in Merthyr Tydfil and Wales as a whole is 8%, representing the smallest difference between the national average and the local authority of any of the duties. The proportion of successful Section 73 outcomes rose marginally between 2019/20 and 2020/21 in Merthyr Tydfil, rising from 29% to 32% of total outcomes. This is in contrast to the national trend where the proportion of successful outcomes fell from 41% to 39%.

The rate of positive discharges from final duty (Section 75) represents the greatest difference between the national average and Merthyr Tydfil, with only 56% of households progressing through to final duty to being positively discharged. In 2019/20, 79% of households were positively discharged, which was higher than the national average of 78%. However, with the total number of households progressing to final duty close to doubled between 2019/20 and 2020/21, positive discharges fell by 23% - in the same time frame the national average fell by only 3% to 75%.

Outcomes for each duty

Summary

- Outcomes following the provision of assistance to people subject to a duty to help secure, improved between 2019/20 and 2020/21 with the proportion of people being successfully relieved of homelessness growing from 29% to 32%.
- Merthyr Tydfil has fewer successful outcomes when assistance is provided in cases where people are threatened with homelessness or owed a duty to help secure accommodation for up to 56 days (section 73) than some other local authorities. This is likely connected with the high levels of deprivation across many communities in the local authority

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

- Section 62, duty to assess
- Section 66, duty to prevent
- Section 73, duty to help secure accommodation (for 56 days)
- Section 75, final duty

Section 62, duty to assess

In 2020/21 there were 1,345 applications for assistance which resulted in a Section 62 assessment being made, the vast majority of which were single person households – 89% of the total. This represents an increase in the proportion of single person households since 2019/20 where they comprised 56% of the total and may be connected with the impact of the COVID-19 pandemic.

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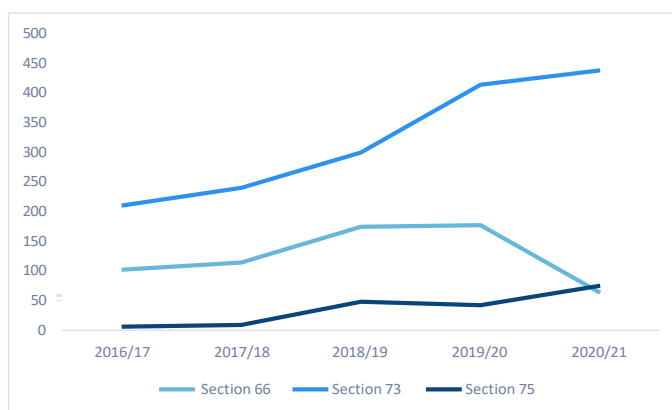


Figure 6 Number of Local Authority Assessment Outcomes by Duty – April 2016 to March 2021

Section 66, duty to prevent

The number of people assessed as subject to a duty to prevent homelessness (Section 66) and assisted, dropped from 176 in 2019/20 to 64 in 2020/21 – a reduction of more than half year-on-year. This is likely strongly connected to the impact of the Coronavirus Pandemic, including the eviction ban, which was in place until July 2021, the uplift to welfare and potentially fewer cases of family members or close relations being evicted.

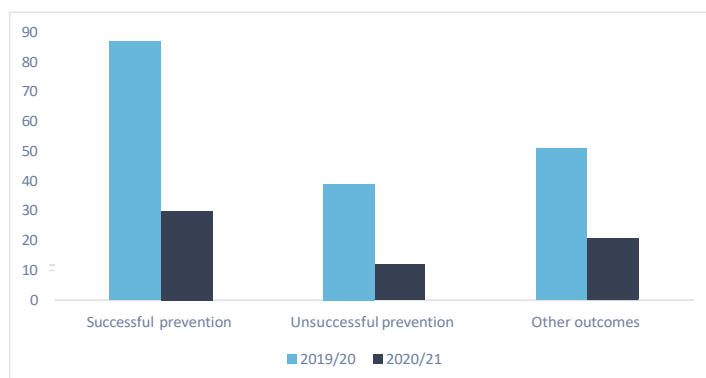


Figure 7: Outcomes for eligible applicants threatened with homelessness, prevention assistance provided (Section 66)

Homelessness outcomes for people subject to the duty to prevent remained broadly similar with 49% of cases being successfully prevented in 2019/20 compared with 47% in 2020/21. The rate of unsuccessful prevention dropped from 22% to 20% year-on-year with more people being able to remain at their current address for longer than 56 days or able to find suitable accommodation.

Both of these outcomes are classified as 'other outcomes' rather than 'successful prevention', which increased by 4% between 2019/20 and 2020/21.

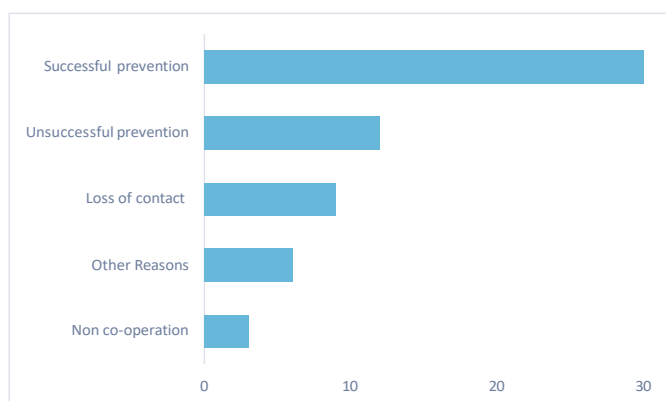


Figure 8 Homelessness outcomes for people subject to the Section 66 duty to prevent 2020-21. (Assistance refused and application withdrawn are not included as Stats Wales has marked the data as disclosive or not sufficiently robust for publication)

Female applicants represented a growing proportion of people threatened with homelessness where prevention assistance was provided (Section 66), growing from 55% of the total in 2019/20 to 67% of the total in 2020/21. In addition, people aged 25 and over accounted for the majority of Section 66 outcomes, consistently over 80% of the total. Similarly, single person households accounted for 81% of the total number of Section 66 outcomes.

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

In 2019/20 Merthyr Tydfil was the local authority with the highest rate of households assessed as homeless (under Section 73) in Wales at 166 cases per 10,000 households. The number of people being assessed as homeless and subject to duty to help secure grew marginally to 437 cases between 2019/20 and 2020/21.

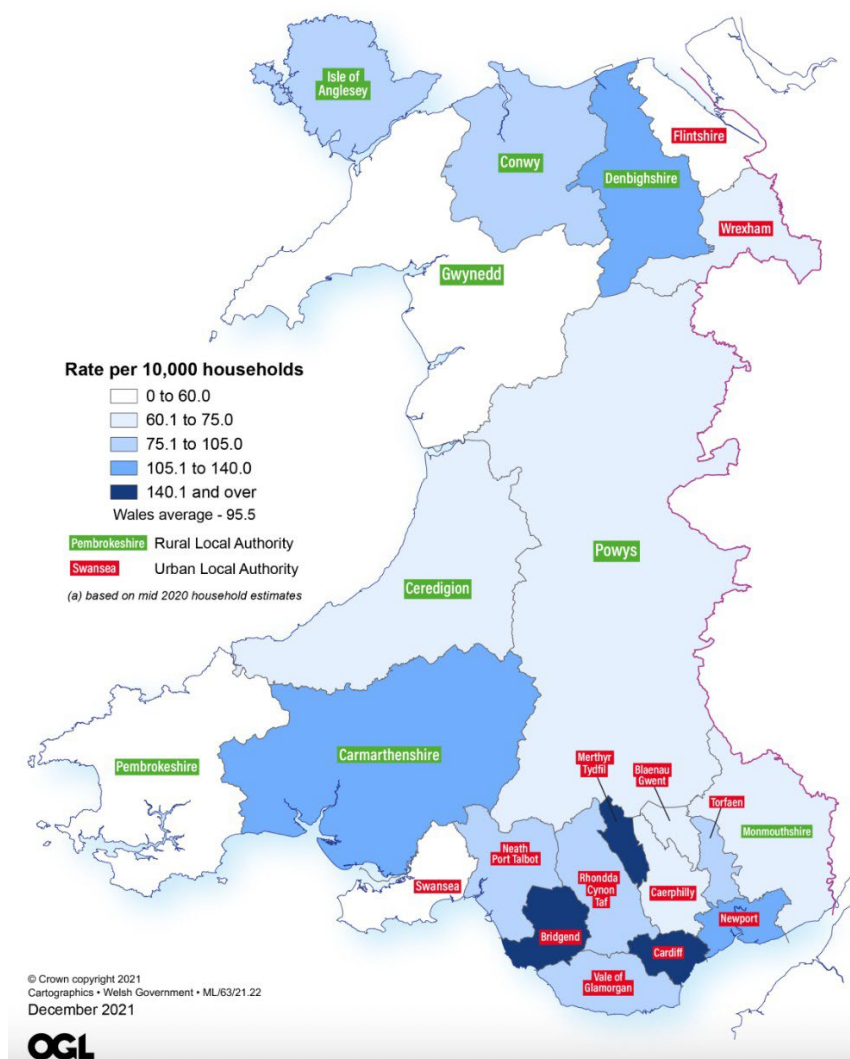


Figure 9 Rate per 10,000 of households assessed as homelessness (Section 73) during 2020/21 across Wales Source: Stats Wales - Homelessness in Wales 2020/21 (December 2021)

Outcomes following the provision of assistance to people subject to a duty to help secure, improved between 2019/20 and 2020/21 with the proportion of people being successfully relieved of homelessness growing from 29% to 32%. Unsuccessful relief dropped sharply year-on-year from

39% to 33% of total outcomes, which also reflects the improving homelessness outcomes from Section 73 cases.

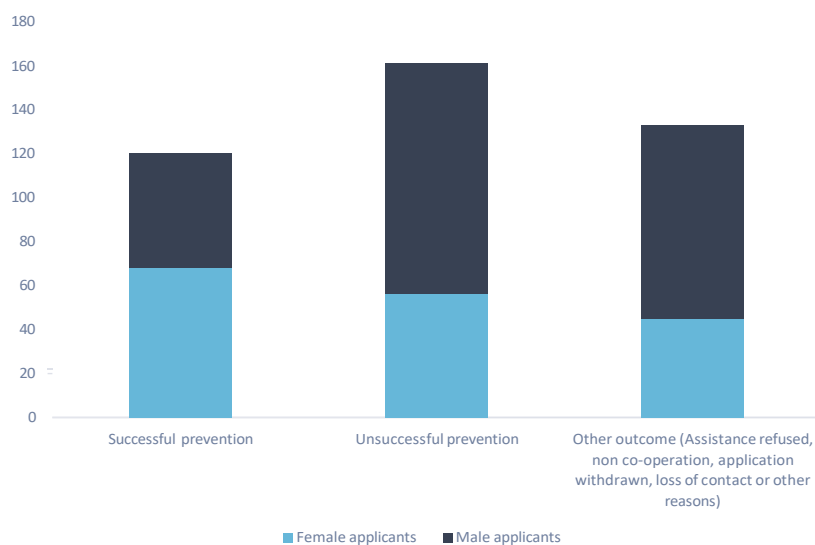


Figure 10: Outcome of eligible applicants, homeless, subject to duty to help to secure (Section 73) 2020-21

However, the Council has fewer successful outcomes when assistance is provided in cases where people are threatened with homelessness or owed to a duty to help secure accommodation for up to 56 days (section 73) than most local authorities. This is likely connected with the high levels of deprivation across many communities in the local authority which may lead to more cases in addition to an increasing number of complex cases, with more instances of co-occurring needs.

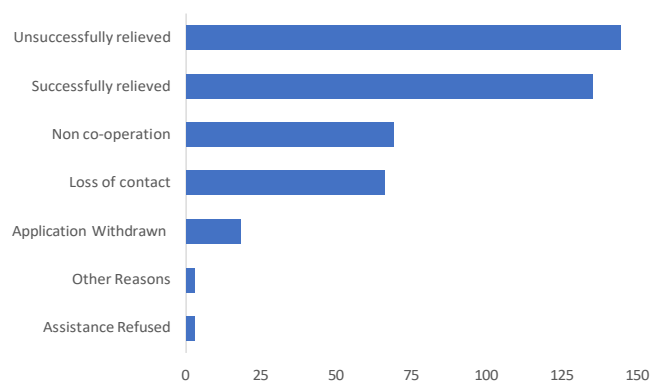


Figure 11 Number of Section 73 outcomes 2020/21

Male applicants comprise the majority of Section 73 cases at 66% of the total cases, an increase from 59% of the total in 2019/20. However male applicants make up only 53% of outcomes resulting in successful relief and are overrepresented in unsuccessful relief outcomes, this a pattern replicated in male applicants subject to final duty (Section 75).

Single person households represent the overwhelming majority of Section 73 cases in Merthyr at 95% of the total cases in 2020/21, which is an increase of more than 15% from 2019/20. This reflects the higher level of single person households subject to duty to relieve (either Section 73 or 75) compared to duty to prevent where they only comprise around 80% of cases.

Final Duty (Section 75)

A relatively low proportion of cases result in the triggering of final duty with outcomes from final duty representing 6% of the total outcomes in 2020/21. There was an increase of cases subject to final duty year-on-year, however the majority of people subject to final duty were still positively discharged in 2020/21 at 55% of the total outcomes.

The rate of cases subject to final duty which were positively discharged declined between 2019/20 and 2020/21 from 76% to 55% whilst the total number of cases increase. This may have been driven by more people progressing to final duty with increasingly complex support needs (which in turn may have been exacerbated the impacts of the pandemic) that reduced the likelihood of positive discharge remaining high.

Overview of presentation reason

The Housing Solutions Team record data on the reasons for people becoming homeless.

In reviewing the data for two years from 2019 to 2021 there were significant increases in:

- Relatives or friends no longer willing or able to accommodate, this increased from 50 to 91 individuals
- Prison leavers increased from 78 to 109.
- People in a homeless emergency or sleeping rough increased from 7 to 49.
- Clearly this can be attributed to the pandemic and 'Everyone In' policy from Welsh Government.

Impact of Covid19

The COVID-19 pandemic resulted in a considerable amount of people being placed into temporary accommodation since March 2020. The situation is unchanged with regards to the change in the Homeless Legislation meaning that all who present are in 'priority need' (also known as the 'All In' policy). Homelessness presentations in 20/21 increased by 78% on the previous year. 75% of presentations were from single people, creating intense pressure on the Council to provide accommodation and a heavy reliance on bed and breakfast accommodation. Many of the individuals needing emergency accommodation have multiple needs and need a wide range of services to assist them. They are also no longer able to afford private rented accommodation. The reasons for this are set out in the Private Rented Sector section below.

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

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

Accommodation

Summary

- There is a substantial need for one and two bed properties in the Borough. The highest need for these is in the Town, Dowlais, Gurnos, Cyfarthfa and Penydarren wards.
- Forty per cent of the demand for one bed accommodation comes from applicants under 35. This is putting pressure on the provision of one bed accommodation.
- 35 households (as at February 2022) are waiting for an adapted property, the Council will work in partnership with its partner RSLs to provide further accessible accommodation, as well fund adaptations through its Disabled Facilities Grant programme.
- The area has a significantly higher proportion of older housing stock than elsewhere in Wales, which manifests itself in a high rate of unfit, particularly amongst terraced housing. There is significant work being undertaken in decarbonising existing homes and bringing them up to WG standards. Furthermore, from October 2021 onwards all grant funded new build affordable homes will be built in accordance with Welsh Government's Development Quality Requirements 2021.
- The pandemic led to a significant increase in people needing Temporary Accommodation (TA) many with high levels of complex needs. The Council commissioned additional support services to provide housing related support in TA locally and out of Borough, supporting people to maintain these placements during the pandemic.
- There are serious financial implications for the Council in continuing to fund the current level of TA and support.
- The Private Rented Sector (PRS) has historically been a significant resource for housing people. However the pandemic has seen an exponential increase in demand and increasing rents being charged by private landlords. Local Housing Allowance (LHA) remains at the same level and so many people need to fund at least an additional £200 per month to fund current rents. This means for many people who are homeless private renting is no longer possible.
- The Council has in place a three year development programme in line with Welsh Government's Social Housing Grant Programme and is on course to deliver in excess of 150 units of affordable housing accommodation over the next three years, of which 104 are one bedroom accommodation. However demand will still outstrip supply.

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

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

Common Housing Register

Social Housing properties are allocated through a common housing policy which the four Registered Social Landlord (RSL) partners in the Borough are signed up to. Applicants wishing to join the housing register are asked to complete an online application form and are then banded according to their level of housing need. Our allocations policy contains three bands. The applicant will be awarded a band according to their need and assessed reasonable preference. Depending on the outcome an applicant will be awarded additional preference. The three bands are:

- Band 1 – High Priority. These are applicant who are owed a statutory award of reasonable preference but are awarded additional preference based on their urgent housing needs
- Band 2 – Medium Priority. These are applicants that are owed a statutory award of reasonable preference
- Band 3 – Low Priority. These are applicants who have been assessed as not being in the additional preference or reasonable preference group
- No priority band where an applicant is eligible to join the register but have been awarded no priority due to an outstanding debt or unacceptable behaviour

Properties are allocated according to the following order:

- Bedroom need
- Priority Band
- Waiting time in allocated band

Applicants are shortlisted on bedroom size first to enable them to bid for all properties no matter the number of bedrooms in the property. As such if an applicant with a two bed need bids for a three bed property it is ensured that a household with a three bed need is shortlisted first.

Band	Number	Proportion of Housing Register
One - High Priority	269	
Two – Medium Priority	584	
Three – Low Priority	1796	64%
No preference due to outstanding debt or unacceptable behaviour	146	5%

Table 3 Applicants to the Housing Register by priority band (Civica January 2022)

As shown in the table above the housing register is made up of individuals with varying housing

need. The main reasons why individuals in each band have been awarded their respective bands are as follows:

Band 1	Band 2	Band 3
Urgent Medical Needs	Overcrowded	
Severe DA	Medical Needs	Home-seekers facing the threat of eviction (No Court action)
S.75 Duty owed	Moving to be closer to support	
In TA ready for move on	Homeless Prevention	
Severe Overcrowding	RSL tenant downsizing due to affordability	
	Non engagement with support	
	Verified rough sleeper	
	PRS or O/O Financial Hardship	

Table 4 : Reasons for allocation of applicants to the housing register to each band (Civica January 2022)

There is a high proportion of applicants placed in band 3. The following graph shows the bedroom sizes needed in each band. Those applicants needing one bed 50+ accommodation have been separated out.

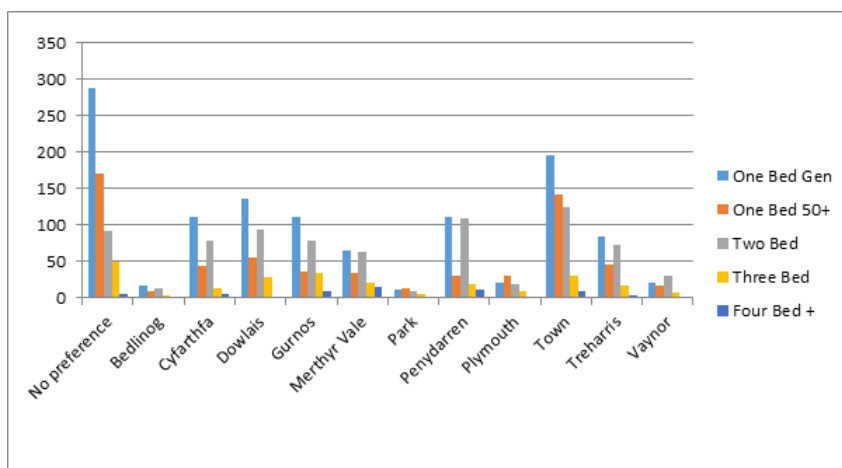


Figure 13 Bedroom need on the housing register by ward across MTCBC (May 2021)

The data on housing need has been analysed from the current housing applications system. It includes the breakdown of Housing Need by ward and includes a category titled 'No preference' - this category is used for applicants who have not specified a ward in the Borough in which they wish to reside.

There is a substantial need for one and two bed properties in the Borough. The highest need for these is in the Town, Dowlais, Gurnos, Cyfarthfa and Penydarren wards. The following graph shows the detail for single person accommodation within the Borough:

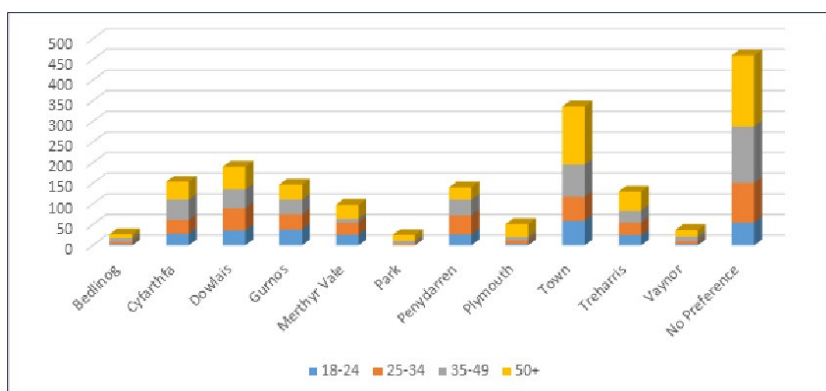


Figure 14: One bed housing need by ward in MTCBC May 2021

Forty per-cent of the demand for one bed accommodation comes from applicants under 35. This is putting pressure on the provision of one bed accommodation, as the majority of these applicants are in band 3 and unlikely to secure social housing unless they become homeless.

The single person accommodation need is highest in Cyfarthfa, Town, Treharris, Penydarren, Dowlais and Gurnos Wards. Developments in this area will need to have a 35% set aside for single person accommodation before any grant application is approved. However, there is an expectation that there is some single person accommodation provided on all new developments, irrespective of ward.

Accessible Housing

There is not a separate waiting list for this accommodation. It is allocated and advertised as part of the common housing register.

Adaptations are placed into high level Category A and low-level Category B. When a property has a category A adaptation applicants will be matched according to their need for the adaptation and then their bed need is looked at. This is to ensure the person who most needs that adaptation is able to secure an accommodation offer. As category A adaptations are often unable to be put into existing property the adapted housing need is assessed by considering these needs only.

There is a clear need for category A additional housing units that are full wheelchair accessible and provide a specialist bath.

	Full Wheelchair Access	Specialist Bath	Ceiling Hoist	Through Floor Lift
Housing Need	61	55	9	9

Table 5 Category A Housing Need – January 2022 (Civica)

The Council's Community Occupational Therapist team have a waiting list of 35 households (as at February 2022) who are waiting for an adapted property. There might be some crossover between this number and the data above taken from our Housing Register, however it is clear there is an ongoing need for accessible properties within the borough.

The Council will work in partnership with its partner RSLs to provide further accessible accommodation, as well fund adaptations through its Disabled Facilities Grant programme in both the private and affordable housing sector to ensure people can remain independent in their own home and maximise their independence.

Housing Stock / Tenure Profile

Due to reviews being delayed by the COVID-19 pandemic, the last Local Housing Market Assessment covered 2014-19. At that time there were 24,264 houses in the Borough. The area has a significantly higher proportion of older housing stock than elsewhere in Wales, which manifests itself in a high rate of unfitness, particularly amongst terraced housing. The dominant type of tenure was Owner Occupier, accounting for 65% of the market. Private renting accounted for 11% of the total market, and social housing 21%. The dominant house type in Merthyr Tydfil is terraced, accounting for 50% of the market. These also constitute a large percentage of first time buyer sales due to the availability and reduced prices of terraced properties.

The Local Authority transferred its housing stock to a new housing association – Merthyr Valleys Homes in 2009. This has resulted in four Registered Social landlords in the Borough with a total 5889 units of socially rented stock, at the end of 2021.

Housing Association	Housing Stock (no of units)
Merthyr Tydfil Housing Association	1162
Wales and West	478
Hafod	186
Total	5889

Table 6: Social Rented Housing Stock in Merthyr Tydfil by Housing Association

Given the age and profile of a significant proportion of RSL stock there is significant work being undertaken in decarbonising existing homes and bringing them up to standard as part of Welsh Government's Optimised RetroFit programme (ORP).

Furthermore, from October 2021 onwards all grant funded new build affordable homes will be built in accordance with Welsh Government's Development Quality Requirements 2021 (WQDR2021), which supports the decarbonisation agenda by ensuring new homes are built with the aspiration of being low, and where possible zero carbon.

Temporary accommodation

Changes made to homelessness legislation as a result of the Covid 19 pandemic, and eligibility for support has resulted in a significant increase in the amount of homelessness presentations since March 2020. Merthyr Tydfil CBC use the following types of accommodation as temporary

accommodation:

- Refuge Accommodation
- Hostels
- Flats owned by a registered social landlord/housing association
- Supported housing schemes
- Bed and Breakfast accommodation
- HMO's (shared accommodation)

Below is a breakdown of TA placements as at December 2021².

Accommodation type	Number of households
Supported Housing Hostels – garth villa and Chaplin's	20 (at full capacity)
Bed and breakfast placements	96
Shared accommodation HMO	9
Hillfort Court	6 (4 placements + 2 in emergency rooms)
Other supported accommodation: Garth Newydd Court and Flocks	12
Temporary Accommodation units – MVH and Hafod	14
Total number of placements	157

Table 7 breakdown of TA placements as at December 2021

To identify the needs of those residing in temporary accommodation the Council conducted a mapping exercise of 157 who were residing in temporary accommodation in December 2021.

From this 77 people were found to have high and intensive support needs, this represents just under half of the people residing in TA / or on the TA waiting list in December. These findings suggest a clear need to broaden the range of accommodation including Housing First and increased units of supported accommodation across the borough, as well as supporting the rapid rehousing agenda.

² Housing and HSG Highlight Report 10 February 2022

Level of Need	Number of Individuals	Proportion of people residing in TA December 2021
Medium	39	25%
High	38	24%
Intensive	39	25%

Table 8 Levels of need in TA December 2021

The Council commissioned additional support services to provide housing related support in TA locally and out of Borough, supporting people to maintain these placements during the pandemic. Because of another rise in presentations at that time the Housing Solutions Team began operating waiting lists in providing temporary accommodation, affecting ability to meet statutory duties.

Due to a lack of affordable single person accommodation in the Borough, move on accommodation is extremely limited and there is insufficient RSL stock available to meet the current demand. It is envisaged that many people will remain in B&B and other TA for quite some time until permanent accommodation can be sourced. In 2020/21, 58 units of single person accommodation became available across all 4 RSL's in Merthyr Tydfil. ³

Services are also seeing changes in service user expectations and behaviour, with an increased sense of entitlement to TA. Many seem to be deliberately breaking down supported accommodation placements in the hope of being offered alternative TA in B&B where there is likely to be less scrutiny compared to 24/7 supported accommodation projects. Hostel managers are reporting that service users are refusing to pay their personal contribution (between £10-12 per week) which forms part of the licence agreement, in the hope that they will be evicted, in the knowledge that the Council will have a legal duty to offer alternative accommodation. This, coupled with some of the voluntary outreach services being accessed (e.g. food parcels), has discouraged service users from wanting to budget and starting to save in preparation for their move on to permanent accommodation. ⁴

Finance Implications

There has been a significant exponential rise in costs due to TA requirements. Without direct action to find alternative sources of temporary accommodation, projections for 2021-22, based on current demand, plus security costs at three hotels reach £2,045,000.00. With core costs this totals: £2,398,000.00. There is a historical annual budget of £181K for core accommodation costs. The Council has applied to Welsh Government to approve our claim for all temporary accommodation to the value of £1,856,000.00 for 2022-23. However, if agreed it is unlikely that the Council will be able

³ Housing and HSG Highlight report for January 2021 to September 2021

⁴ Homelessness and Housing Update Scrutiny Report 16 November 2021

to access much (if any) of the £10 million Homelessness Prevention grant monies for 2022-23.

Private rented sector

The use of accommodation provided by private landlords has been a vital part of providing accommodation to prevent homelessness or to provide move on from temporary accommodation.

The pandemic has had a significant impact on the Council's ability to inspect homes to ensure they are in suitable condition. This is now being addressed but there is a backlog of inspections.

The Housing Act 2004 places a duty on local authorities in Wales to licence houses in multiple occupation (HMOs). This is known as mandatory licensing. Mandatory licensing of houses in multiple occupation is a scheme that applies across the UK. The scheme only applies to houses in multiple occupation that meet the following criteria:

- The houses in multiple occupation or any part of it comprises three storeys or more; and
- It is occupied by five or more persons; and
- It is occupied by person living in two or more single households, with a sharing of facilities.

There are currently two properties in Merthyr Tydfil which are eligible to be licenced as a HMO but are no plans to implement more in the near future. This has been challenging for a number of reasons including; the speed of the housing market and ability to purchase suitable properties, the suitability of HMO's to the local community and the extent of the community consultation required. The Council has established a partnership with D2PropCo to consider the suitability and options around specific properties and since September 2020, twenty-seven potential properties have been considered for suitability as an HMO, none of which have proceeded to development.

Affordability

The Local Housing Allowance (LHA) provides housing benefit entitlement for tenants renting private-sector accommodation in Wales, paid to those who need it to rent a safe place to live. In 2016, the government announced a complete freeze on LHA rates which has meant that many households have struggled to make up the shortfall between their rent and Local Housing Allowance. Research carried out by Crisis⁵ indicates that this isn't just an issue for Merthyr Tydfil. Underinvestment in LHA rates means that in 82% of areas in Wales, just one-fifth or less of the private rented sector is affordable within the rates to single people, couples or small families.

The cost of private renting is changing rapidly, out of pace with nationally verified information. However, indicative local rents were found on [home.co.uk](https://www.home.co.uk) which summarises the advertised rents for homes to let, calculated daily from the rental properties found by the Home.co.uk Property

⁵ Cover the Costs: How Gaps in Local Housing Allowance are impacting Homelessness May 2019

Search Engine. This is compared with current rates of Local Housing Allowance

Property Size	LHA 2021 22	Average Rent ⁶
One Bed	£335 pcm	£543 pcm
Two Bed	£375 pcm	£610 pcm
Three Bed	£425 pcm	£765 pcm
Four Bed	£650 pcm	None available

Table 9: Average rents per calendar month (pcm) in Merthyr Tydfil compared to LHA allowances

If you are in employment in Merthyr Tydfil renting in the private market sector is rapidly becoming less affordable. However, the private rented sector is unaffordable if the household is reliant on Housing Benefit or Universal Credit to pay their rent.

In order to make better use of this sector the Council have recently appointed a Private Rented Sector Officer to work with the sector to make this type of housing available as a viable and sustainable housing option to those on our Housing Register. The role involves:

- establishing working relationships with landlords in the borough and breaking down the barriers and misconceptions that exist when working with homeless clientele.
- supporting both landlord and tenants by ensuring support is provided to both parties to support the sustainability of tenancies.
- Explore the potential to participate in WG leasing scheme which would involve the LA taking on property management responsibilities. This scheme will see properties leased by a local authority to help prevent and relieve homelessness. Additionally, tenants housed will be provided with a high-level of support to help maintain their tenancy. The Scheme is intended to benefit tenants, property owners and local authorities.

Empty Homes

At present, the Local Authority has 1004 empty properties within the borough. Of these, 591 have been empty for over six months and are classified as long-term vacant properties. This number fluctuates on a daily basis, but never more than plus / minus 50 per year, so the figure reported is a good measure.

As part of our increased strategic housing function to forge stronger links internally for collaborative working with MTCBC colleagues across a range of departments in addressing our corporate housing need, initial conversations have taken place in identifying empty properties where environmental

⁶ https://www.home.co.uk/for_rent/merthyr_tydfil/current_rents?location=merthyr_tydfil

health may be looking at potential enforced sales, or be in contact with private owners who wish to sell. With these properties, we are looking to liaise on potential for purchase by RSLs to refurb and re let to social tenants to help increase units of accommodation.

To support with this we are working closely with Planning to identify any Section 106 monies available, as well as any grant funding through the SHG Programme (including Recycled Capital Grant (RCG)) which can be utilised to assist in purchase and refurb of properties that in the main, require significant work or even demolition and complete rebuild.

Considerations are also being discussed around the potential of working with private landlords as part of a potential WG leasing scheme which would involve the LA taking on property management responsibilities.

The Council are considering areas / properties which are currently derelict, neglected and / or in need of significant repair across the borough for conversion into affordable housing/walk up 1 bed flats/houses.

Gypsy and Travellers

The 2018 Gypsy Traveller Accommodation Assessment established that there is no need for additional pitches within Merthyr Tydfil over the next five years.

Planning and building

The Council has in place a three year development programme in line with Welsh Government's Social Housing Grant Programme and is on course to deliver in excess of 150 units of affordable housing accommodation over the next three years, of which 104 are one bedroom accommodation - these units consist of developments that are currently 'live on-site' and those that are yet to start but are scheduled to be completed by March 2024. The Council expect to start developments towards the end of 2022/23 and during 2023/4 which will deliver a further 130 units affordable housing, ready for occupancy after 2023/4

In recent years, our existing partner RSL capacity has grown and further RSLs are now coming forward to support our accelerated development programme, this brings with it an increased development capacity as well as reinvigorated strategic developments to support our corporate need.

Housing support grant services

Summary

- The primary need for people being referred for housing related support in 20/21 were:
 - Homelessness prevention
 - Mental health
 - Domestic abuse
 - Offending history
 - Single people 25 54
 - Young people 16 24
- Mental health was the highest incidence in secondary needs.

This section considers the needs of people whose primary presentation is something other than homelessness, although the reality is that people present with multiple needs, and identifying a primary need can be challenging. Housing Support Grant typically funds support activities via

- Supported Accommodation
- Floating Support

The table below lists the types of support that are available.

Project	Provider	Capacity
Private Rented Sector Access Project	MTCBC 1 x staff	Role
Rapid Re-housing		
*Please note: Total Housing First units = 12 (4 of which are funded via HSG)		
Housing First (Verified)	Salvation Army	*4
Emergency Supported Temporary Accommodation	Cornerstone	Drop in service
Street Smarts Project	Pobl	Role
Assertive Outreach	MTCBC	Role
RSW Compliance	MTCBC	RSW compliance and promotion
Floating Support		
Domestic Abuse	Bawso FS	35

Project	Provider	Capacity
	C&R Target Hardening FS	Equipment
	DV Male Perpetrator Programme (Regional) NEW	Regional project offering training and counselling
Learning Disabilities	Drive	28
Mental Health	Platfform (Complex Needs)	12
	Regional Specialist Health and Housing	15
	Platfform (Endeavour)	25
	Platfform (Asset Coach) PILOT PROJECT	25
	Platfform (Recovery Links)	8
	Platfform (Dispersed)	12
	DRIVE(Taff Vale Court	2
	Platfform (Floating Support)	30
	Care & Repair - Dementia	38
	MIND (Resilience)	31
	Hafal - Social Navigator	24
Substance Dependence	Pobl	19
	Regional Specialist Health and Housing	15
Ex Offenders	Cornerstone FS	63
Young People	Llamau (YP F/S including Flooks)	29
Older People	Hafod	50
Generic	Citizens Advice Merthyr Covid Support	40
	Citizens Advice Merthyr FS	135
	MTHA	19
	Salvation Army (Tenancy Rescue)	8
	MVH	70
	MTCBC (Tenancy ready)	Training
Temporary Supported Accommodation		
Young People	Llamau Garth Newman court	8
	Pobl Chaplins	10
Generic	Pobl Garth Villas	10

Project	Provider	Capacity
	Marsh House 10 Bed	10
	NLC Low level YP	5
TBC	Complex Needs 24 hr Project 5 bed	5
VAWDASV		
Womens Refuge Provision	Llamau	
Other (dispersed units)	Llamau	2
Target Hardening equipment	Care & Repair	30

Table 10 HSG funded services as at February 2022

Referrals for Housing Support Grant Funded Services

This section summarises the referrals for supported accommodation and floating support for 2020-21. Tables below 11-13 show the lead, secondary and tertiary needs received for the period 1st April 2020 to 31st March 2021 in which 706 people/households made a request to the Local Authority for housing related support. These show their lead-need and service users may have listed a secondary and tertiary support need also. It is also worth noting that although only 11 people listed substance misuse as their lead-need on a referral form, the vast majority of those seeking supported accommodation disclosed some dependency on substances either on assessment or during support sessions. The stigma and reluctance to disclose a dependency on substances or indeed alcohol may result in the figures not fully reflecting the needs of those accessing support.

Lead Need.	Total
General floating support to Prevent Homelessness	158
People with Mental Health Problems	114
Women experiencing Domestic Abuse	88
Single People 25-54 With Support Needs Not Included Elsewhere in this list	72
Young People with support needs (16-24)	55
Single Parent Families with support needs	31
Physical Disability/ and or sensory Disability	26
People with Criminal Offending History	69
People over (55+) with support needs	35
People with Substance Misuse (Drugs)	11

Young People who are Care Leavers	10

Table 11 Lead need of people accessing HSG funded services 2020-21⁷

Secondary Needs	Total
General floating support To Prevent Homelessness	73
People with Mental Health Problems	132
Women experiencing Domestic Abuse	11
Single People 25-54 With Support Needs Not Included Elsewhere In This List	18
Young People with support needs (16-24)	28
Single Parent Families with support needs	33
Physical Disability/ and or sensory Disability	36
People with Criminal Offending History	44
People over (55+) with support needs	22
People with Substance Misuse (Drugs)	52
People with Learning Disability/Difficulties	12
Young People who are Care Leavers	1
People with Substance Misuse (Alcohol)	37
People with Chronic Illness (including HIV/AIDS)	10
Men experiencing Domestic Abuse	1
People With Developmental Disorders. i.e. Autism	3
People with Refugee status	0
Total	513

Table 12 Secondary need of referral 2020-21

Tertiary Need.	Total
General floating support To Prevent Homelessness	3

⁷ MTCBC Housing Support Grant Local Delivery Plan 2021-2022

Women experiencing Domestic Abuse	1
Single People 25-54 With Support Needs Not Included Elsewhere In This List	4
Young People with support needs (16-24)	0
Single Parent Families with support needs	4
Physical Disability/ and or sensory Disability	3
People with Criminal Offending History	3
People over (55+) with support needs	1
People with Substance Misuse (Drugs)	6
People with Learning Disability/Difficulties	0
Young People who are Care Leavers	0
People With Substance Misuse (Alcohol)	6
People with Chronic Illness (including HIV/Aids)	1
Men experiencing Domestic Abuse	0
People With Developmental Disorders. i.e. Autism	0

Table 13 Tertiary need of referral 2020-21

Insights into the most significant housing support needs

This section brings together the data on needs from the Population Assessment, referral data and stakeholder feedback for each area of need identified within the assessment that coincides with the needs of homeless people and people supported by the HSG.

The Social Services and Well-being (SSWB) (Wales) Act 2014 brings together all parts of care and support services and the ways in which they are delivered. The Act placed a 'duty' on Merthyr Tydfil County Borough Council along with Rhondda Cynon Taf County Borough and Cwm Taf University Health Board and their partners to jointly carry out an assessment of the care and support needs of the population. The population assessment was published in 2017 and is currently being undertaken again in line with the statutory cycle, for the whole Cwm Taf Morgannwg area.

Mental Health

Summary

- Merthyr Tydfil has amongst the highest reported incidences of substance misuse, mental illness and poor well being in Wales
- The Council has a significant number of referrals for HSG services from people with mental health needs and has previously seen a year on year increase in HSG mental health referrals however, it is anticipated that this will rise significantly in the aftermath of the COVID 19 pandemic
- There are significant unmet housing needs for adults with mental health issues. Housing problems are frequently given as a reason for a person being admitted or re admitted to inpatient mental health care. People with mental illness are far more likely to live in rented accommodation and their mental ill health is often given as a major reason for tenancy breakdown.
- Stakeholders highlighted the increased levels of complexity and risk in support services since the pandemic.
- Where several agencies are involved, information sharing arrangements between partners is essential to optimise the care for individuals. Data collection across agencies could be improved, and aligned with agreed national frameworks to better inform future service planning.

The Population Assessment highlights that Merthyr Tydfil and Cwm Taf more widely has the highest rates of mental illness and poor well-being in Wales. The challenging picture of adult mental health and well-being in Merthyr Tydfil is shown in the latest available data across a range of measures summarised in the table below.

Indicator	Merthyr Tydfil	Cwm Taf	Wales	What this means
Adults who reported binge drinking	24%	26%	24%	
Mental Component Summary Score (measure of well-being)	47.0	48.2	49.4	Cwm Taf has the lowest score for well-being in Wales
Adults who reported being treated for a mental illness	18%	16%	14%	Cwm Taf is the highest in Wales
Suicide rate/100,000 population 2014		14.1	10.7 - 14.1	Cwm Taf is the highest in Wales

Figure 12 Range of measures of mental wellbeing 2017 (Sources: Welsh Health Survey/ Welsh Government Data Unit/ NCISHP report)

There are significant unmet housing needs for adults with mental health issues. Housing problems are frequently given as a reason for a person being admitted or re-admitted to inpatient mental health care. People with mental illness are far more likely to live in rented accommodation and their mental ill-health is often given as a major reason for tenancy breakdown. They may be offered accommodation in areas that are unsupportive e.g. in areas with known drug problems/ antisocial behaviour, which affects their ability to maintain good mental health. Those with tenancies often face eviction unless appropriate tenancy support is incorporated with care plans. Providing wider community support such as housing, debt/employment advice, and social opportunities supports well-being and links with prudent healthcare principles and doing only what is needed.⁸

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

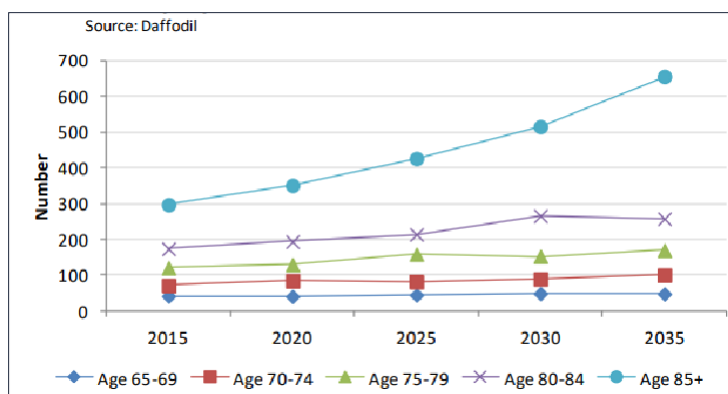


Figure 13 Population estimated to have dementia 2015-2035 Merthyr Tydfil

The Population Assessment highlighted how data was limited, or poorly and inconsistently collected. This makes assessment of need and service planning very difficult. The various agencies involved in providing care and support to someone with mental health problems all have their own systems of data collection, depending on their funding, accountability and governance requirements. However, it was often unclear how data was used to inform the provision of the services that people with mental health problems have identified – hence the gaps in preventative services.

It is clear therefore, that data collection across agencies should be improved, and aligned with agreed national frameworks to better inform future service planning.

Referrals to HSG services record primary, secondary and tertiary needs. Mental health was the second highest primary need and was also the highest incidence in secondary needs.

Merthyr Tydfil has amongst the highest reported incidences of substance misuse, mental illness and poor well-being in Wales. Substance misuse commonly co-occurs with mental health issues in people who are referred to HSG services. The Council has previously seen a year on year increase in HSG mental health referrals however, it is anticipated that this will rise significantly in the aftermath of the COVID-19 pandemic

Engagement with stakeholders raised a number of concerns regarding the mental health needs of service users:

- There are some people in hostel accommodation with mental health needs higher than the level of support that can be offered, Community Mental Health Teams are involved and assess risk as being higher than the service is designed to manage.
- Many providers use Psychologically Informed Environment principles to ensure they are addressing needs arising from Adverse Childhood Experiences. This needs to continue to be developed.

- Refugees continue to get referrals of people with high risk substance misuse and mental health issues
- There is a challenge in meeting the needs of people who do not meet eligibility criteria for health or social care services, but their needs are higher than HSG services are designed to meet.
- There are challenges with accessing mental health services both for those with high needs and those whose needs do not meet eligibility criteria.
- There has been more reporting of neighbour to neighbour issues as people are at home more. Frustrations are building and can lead to unpicking complex situations that need a partnership approach with health and other system partners.
- Strategic stakeholders highlighted the importance of better sharing of data and intelligence.
- The Regional Partnership Board needs to facilitate sharing of information and have clearer routes for stakeholders to contribute to regional working.

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

Primary care, where the majority of people with common mental health conditions are treated, often had little capacity to support those who present with mental health and substance misuse co-occurring conditions. Understanding the various and complex pathways into mental health services were confusing for both housing support staff and homeless people in CTMUHB - particularly with how GPs, Community Mental Health Teams (CMHT), Crisis Teams and specialist homelessness teams and medical professionals within hospital settings interfaced with each other.

The report recommended that an existing forum, or new group should be convened, to oversee the implementation of the strategic actions arising from the report.⁹

Substance Misuse

Summary

- The region has the highest numbers of people with substance misuse issues in comparison to the rest of Wales.

¹¹ A rapid Health Needs Assessment of people that are homeless within the Cwm Taf Morgannwg University Health Board footprint June 2020

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

The region has the highest rates of both drug misuse deaths and alcohol related deaths in Wales. Data from the Welsh National Database for Substance Misuse evidences the continued need for services across Cwm Taf, with approximately 3,000 referrals to substance misuse services received annually for the period April 2013 to March 2016.¹⁰

Substance misuse can affect people regardless of their age background or ethnic origin and can also lead to significant problems in people's lives. The Area Planning Board is responsible for delivering the Welsh Government Substance Misuse Strategy in the Merthyr Tydfil area.

Referrals to HSG services with Substance Misuse as the primary need are low, however stakeholder feedback indicates that it emerges as a need for a significant number of referrals once support commences.

Access to Substance Misuse Services

The Rapid Health Needs Assessment of people that were homeless within the Cwm Taf Morgannwg area¹¹ described that the Community Drug and Alcohol Team provides a service for people experiencing problems with substance misuse based on a harm reduction approach which includes working towards abstinence where appropriate; providing care programmes that are developed individually with each client. Individuals with significant drug and/or alcohol misuse can access the service where there is a related risk to themselves or others and there is evidence of a commitment to actively engage in the treatment programme and comply with required standard of conduct.

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

- Accessibility is not set up for the chaotic nature of these clients – when people reach the point of 'contemplation' (one of the earlier stages of the behaviour change cycle) there is a six-week waiting list to get into services
- Emotional support is needed to run alongside drug treatment services as part of the overall

¹⁰ Cwm Taf Population Assessment March 2017

¹¹ A rapid Health Needs Assessment of people that are homeless within the Cwm Taf Morgannwg University Health Board footprint June 2020

model of preparing people to be able to manage their own tenancies

- Appointments for homeless people need to be in the morning, as they can be more easily managed by the hostels at this point in the day - if they go off for the day, then they have found drugs, and far more challenging to support in engaging with services, or may not be accepted
- Offenders in the criminal justice system are able to get more direct access to treatment, for twelve months and then transfer to community substance misuse services.
- Access to Community Pharmacy for prescriptions is not a problem though in some areas it is a long walk from the hostels.
- Prescriptions have been adapted since Covid, with more rapid access to initial assessment, to give some people a greater number of days of drugs in one go, or to deliver the prescription to the hostel. In general, these changes were felt to have improved the system.

Stakeholder engagement undertaken for this report confirmed that it is challenging to engage NHS substance misuse services, particularly services like rehabilitation and detox. HSG providers described having to try to manage these issues through their support.

Co-occurring mental health and substance misuse problems

The term, 'dual diagnosis' usually refers to the co-occurrence of a mental illness alongside substance misuse. The relationship between mental illness and substance misuse is complex and can change over time. It can vary between people and evidence suggests that the number of people diagnosed in primary care with a dual diagnosis has increased in recent years, although there is a lack of national data on this.

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

- likely to experience more severe mental health problems
- be at increased risk of suicide
- experience unstable housing
- have financial difficulties
- be less likely to engage with treatment interventions
- are more likely to fall through the gap between services.¹²

Specialist Mental Health & Substance Misuse Housing Outreach Service

In a regional response to these issues, the Specialist Mental Health & Substance Misuse Housing Outreach Service is a specialist, multi-agency outreach service which spans across Bridgend, Merthyr

¹² Cwm Taf Population Assessment March 2017

Tydfil and RCT Local Authorities. The proposal to provide a regional specialist outreach service to individuals with complex needs who reside in homelessness hostels and Housing First Projects was initially funded by Phase 2 funding and will be funded by HSG on an ongoing basis.

Fifty five individuals referred to the Team across the region had quoted difficulties in engaging with substance misuse services, mental health services and health services.

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

Table 14: Specialist Mental Health & Substance Misuse Housing Outreach Service –referral reason as of Dec 2021 (Cwm Taf Morgannwg data)

The project will be fully evaluated in the near future, in the meantime the substance misuse needs of people accessing homelessness and HSG services provide a significant challenge, in particular early intervention to prevent homelessness.

Children and Young People

The Population Assessment showed Cwm Taf had a relatively young age profile with its 62,210 children making up 21 percent of the population (i.e. 1 in every 5 people living in Cwm Taf was under 18). The child population in Merthyr Tydfil had increased between 2005 and 2015 up by 1.4% over the period. Merthyr Tydfil was predicted to see small percentage increases in the number of children aged 0-17 who experience abuse and neglect.

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

Across Cwm Taf the overall population aged 0 to 24 had been declining since 2011, down from 90,442 to 89,772.

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

Estimates of the 2020 population aged 16 to 25 in Merthyr Tydfil was 6742 people.¹³

Young people aged between 16 and 25 make up a significant proportion of the people presenting to the councils as homelessness, often leaving home due to family breakdown.

¹³ Office of National Statistics 2022

They are also the group of people that receive the fifth highest number of referrals for HSG funded support.

All councils have recently been tasked by Welsh Government to examine their corporate parenting response in relation to care experienced children and young people (CYP) and their future accommodation needs. Specifically, it requests that the Council respond to the need for:

- An active identification process to ensure care experienced young people presenting as homeless can access all the support they are entitled to in cooperation with children's services.
- Multi-agency reviews to be undertaken to identify any gaps within the system or interventions that could have taken place to ensure future similar cases are prevented for care experienced young people presenting as homeless;
- Granting 'local connection' status for care experienced young people who are placed out-of-county, when moving on;
- Extending Personal Adviser support up to the age of 25.

Some areas of partnership working for continued development with Housing and Childrens Services are as follows:

- Corporate outcomes
 - Working with Social Care to further develop the Success, Stability and Transition Strategy to ensure it explicitly outlines plans for future accommodation needs for care experienced CYP
 - A learning and development plan to sit under the Success, Stability and Transition Strategy that ensures understanding at both a strategic and operational level.
- Commissioning
 - A coherent joint move-on framework under the Success, Stability and Transition strategy.
 - Ensure youth offending teams are involved in commissioning and planning short-term accommodation options for CYP being released
- Joint working
 - Continue with and enhance the Local Authority's proactive multi-agency panel that focuses on care experienced young people with more complex situations
- The experience for young people
 - Continue with joint assessment arrangements for young people presenting as homeless

- Draw together and further develop a proactive programme of prevention and early intervention for young people at risk of homelessness

Ex-offenders

Summary

- Ex offenders account for a significant proportion of presentations to the homelessness team, requiring suitable accommodation or placement in temporary accommodation and housing related support.
- There are multiple challenges in meeting ex offenders housing and support needs. There are currently two Housing First projects which meet some of this need, however neither of these are exclusively for ex offenders.
- There are multiple opportunities to review the pathway for offenders from prison to accommodation in the community.

Over the last two years, ex-offenders have consistently been amongst the highest number of presentations for the Council's homelessness team, requiring them to find suitable accommodation on people leaving prison. Merthyr Tydfil has a higher than national average of prison leavers. Due to the pandemic and the high risk of the virus spreading in shared accommodation (such as the secure estate), Welsh Government advised that those prisoners who were nearing the end of their sentences may be released early to reduce inmate numbers in UK prisons. Due to this increase in prison releases, floating support provision specifically for ex-offenders was increased. This specialist support has proved invaluable and an extra 16 units of support have been fully utilised since they were commissioned in September 2020.

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

The 'prisoner' journey (prison to probation to Local Authority) is unclear, current guidance is out of date and refers to a previous Probation structure that no longer exists. The Probation Service is working with Welsh Government to review the pathway and reflect Probation's move to a 'resettlement model'

Probation commission their own housing support services:

- Initial assessment of people in custody, categorises them by complexity (low/medium/high)
- The aim is to reduce the number of cases that the Local Authority needs to deal with
- Once 'Day One' services contracts finish probation commission services that align with LA services and current WG policy

Probation praised the responsiveness of MTCBC homelessness team but concern was raised around

the small number of ex-offenders who exhaust all housing support services (and accommodation types):

- Once all options are exhausted, no one necessarily takes responsibility
- There is a need to find housing solutions for people who are in this situation – although the solution is unclear
- Probation raised the need for a collaborative approach between probation, the LA accommodation team and other relevant teams – particularly around MAPPA process – opportunity for action learning again. Also – there is bound to be good practice we can share
- Any individual who raises particular concern within their risk assessment will be referred to local MAPPA (Multi-Agency Public Protection Arrangements). This is a multi-agency approach to the identification and management of high risk violent or sexual offenders. Housing and move-on options will be discussed at these meetings to prevent the person from becoming vulnerably housed or sleeping rough. These arrangements include:
- After leaving prison some people with serious or violent offences have intensive multi-agency arrangements put in place to enable collective management of their reintegration into the community.
- These are called Multiagency Public Protection Arrangements (MAPPA)¹⁵, and involve local police, probation and other local agencies working together to minimise the risk of re-offending and protection of the public.
- Criminal justice agencies such as police and probation are primary agencies, and work closely with other bodies in the field of employment, health, housing and social care who have a “duty to cooperate”.
- People with violent or sexual offences are broken into MAPPA categories, dependent of level of risk. This categorisation can have a major impact on the ability of MAPPA clients to access housing, as suitable premises are needed in the right areas.
- Concern was also raised during the stakeholder engagement around female ex-offenders who often have traumatic experiences that make TA with men unsuitable. Rejected referrals to Domestic Violence (DV) shelters due to people’s needs being too high and/or complex, reflects how challenging it currently is to find suitable accommodation and services for women in this situation.

Despite working more collaboratively, Probation feel that they need more information earlier (i.e. before the point of eviction) so they can play a more preventative role. Their top priorities were:

- A need for more single person accommodation.
- Prevent women having to share with men with DV histories which is currently happening
- TA quality and range has to be better.
- Better joint response around MAPPA – review lessons learnt and commit to more joint

approaches and action learning.

- How the impact of Regional Homelessness Task Force Meetings is being measured in relation to multi-agency responses.

Learning Disability

Summary

- Data capture on specific support and outcomes for learning disability need to be developed

The Population Assessment stated it is thought that there are about 5,500 people in Cwm Taf who have a learning disability and about 2,500 of these are children and young people, only a small number of these are using services in Merthyr Tydfil. About 140 children and young people have an Autistic Spectrum Disorder in Merthyr Tydfil (some of whom will also have a learning disability). Currently, the Council commissions floating support for 28 adults with a lead need of learning disability via HSG and no waiting list for this provision.

At the moment in Merthyr Tydfil, 87 children and young people are being supported by the Disabled Children's Team. However, professionals reported higher needs than this in the community, leading to a potential shortfall in services. People with a Learning Disability also want different services than have historically been provided, away from day services to playing an active part in their community.

Other challenges highlighted in the Population Assessment were:

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

Older People

Summary

- The proportion of the population that is over 65 will incrementally grow, and will need more support to stay within their own homes and when appropriate help to access and move to suitable age designated housing, and extra care.

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

Some key considerations in respect of the future accommodation and support needs of older people include:

- Falls in people over 75 are likely to increase by 50% by 2040.
- By 2040 Merthyr is likely to have an additional 1,308 (61% more) people aged 65+ with Dementia.
- By 2040 people there will be an increase of 34% of people aged 65 and over who will struggle with activities of daily living i.e. domestic tasks, self care.

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

A detailed approach to modelling the need for housing support has been made available by Housing LIN in the form of the Older Persons' Housing Toolkit. This provides a universal estimate of demand per thousand of the population aged 75+ from which it is possible to extrapolate and estimate future demand and likely shortfalls. The toolkit is no longer publicly updated; however, Housing LIN produced a report for the Welsh Government in 2020^[1] that provides supply data across all local authorities in Wales.

The table below summarises the additional accommodation required per category of housing types for Merthyr Tydfil County Borough.

	By 2025	By 2030	By 2035
Age designated housing for older people			
Age designated for rent			240
Age designated for sale	11	18	27
Extra Care Housing			
Extra Care for rent			85
Extra Care for sale	3	6	9
Care home beds			
Nursing Care beds			100
Residential care beds	0	0	0

Table 15 Future age designated accommodation needs of older people in Merthyr Tydfil.

It is evident that there is a need for more cross tenure age designated housing accommodation and nursing beds in the County Borough.

Physical Disability and Sensory Impairment

Summary

- Suitable accommodation options for disabled people to stay within their communities is needed both as adaptations and flexible new build

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

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

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

Carers

Summary

- HSG services need to ensure they are integrating the needs of carers into commissioning and delivering support

Nearly 13% of the population, some 7,427 people in the Borough were providing care to a family member, friend or neighbour. This is slightly higher than the all-Wales figure of 12% and higher than the England and Wales figure of 10%.

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

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

- Preventative support

Housing support needs to recognise that there are growing numbers of people acting as carers as the population ages, and contribute to avoiding people going into crisis. HSG services need to ensure they are integrating these objectives into commissioning and delivering support.

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

Summary

- HSG services and accommodation units are being continually developed to meet the needs of those presenting under VAWDASV.

Headline challenges found in the population assessment were:

- People need to be empowered to report incidents of violence and take up the services on offer. Many victims don't report the violence or abuse they are experiencing. Many people who do report incidents to the police or other agencies do not go on to take up the offer of support. The services provided often predominantly help those at the greatest risk and less support is available for others.
- Services need to meet the needs of all groups in our communities. The information we have on people who use our services suggests that we are not meeting the needs of some groups in our communities. For example, there are no services specifically provided for men. However, the Council commission two units of dispersed accommodation for those who cannot access female refuge provision and are seeking further funding to increase this over the coming years.
- Services need to work together to tackle the underlying problems that are leading to violence. Many people who access our services are experiencing a range of problems such as substance misuse or poor mental health and may be known to other services. These may be causing or contributing to the violence or abuse they are experiencing and should not be tackled in isolation.
- Services need to protect and support children in families where violence and abuse is happening. The information we have from our services tells us that children are present in most homes where we are supporting a victim of violence or abuse. Children who see or have experience of domestic abuse are more likely to experience problems in later life. We need to provide more services to directly support children where violence or domestic abuse is happening in their family or to them directly
- People who use our services should tell us what they need and how we can do better. The people who use our services do not routinely get involved in telling us what they want or how we should meet their needs. This means that services are designed by professionals who believe they know what people need without being informed by the people who will

ultimately use the service. We need to find a way to have a conversation with people that allows them to inform the way we are designing and delivering our services

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

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

Progress against the plan can be found at

<http://www.ourcwmtaf.wales/SharedFiles/Download.aspx?pageid=286&mid=613&fileid=1120>

Stakeholder Engagement

Summary

Stakeholders raised a range of issues:

- Concerns were raised re the lack of continuity from year on year funding agreements rather than longer term contracts. They also raised concerns about the level of administration required in monitoring activity that is time consuming and reduces opportunities for innovation and flexibility.
- Stakeholders wanted to do more prevention but currently feel they are in crisis management. Developing a one stop shop for early advice and support would assist this. Providers are seeing more people who have recently lost their jobs and homes.
- The Council's homelessness team were praised for the support they give to residents.
- Some described seeing changes in behaviour of tenants because they are aware the Council has a duty to find them accommodation. Tenancy breakdown is occurring more because of the perceived safety net of temporary accommodation.
- Many people referred to supported accommodation and floating support have higher needs and co occurring mental health and substance misuse issues. They often do not meet eligibility for NHS or Adult Social Care services and so HSG services are having to adapt to meet their needs.
- Many providers use Psychologically Informed Environment principles to ensure they are addressing needs arising from Adverse Childhood Experiences. This needs to continue to be developed.
- There were a number of examples of challenges accessing Community Mental Health Teams and intensive substance misuse services such as detox. and rehab.
- Finding accommodation for people leaving prison is a real challenge, temporary accommodation does not give the right support to prevent re offending, even with HSG floating support.
- There are considerable difficulties finding appropriate accommodation in Merthyr Tydfil for move on from temporary and supported accommodation.
- There is an overwhelming need for single person accommodation but the topography and nature of communities means there are a number of barriers to developing this accommodation in many areas. The pandemic has brought significant disruption to planned developments and construction firms.
- There needs to be better data and intelligence sharing between all parts of the system

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

- | | |
|--|---|
| <ul style="list-style-type: none"> • Estate MTCBC • Planning MTCBC • Homelessness Team MTCBC • Strategic Housing Team MTCBC • HSG Team MTCBC • Environmental Health MTCBC • Care & repair • Merthyr Tydfil Housing Association • Platform • Wales and West Housing • Cwm Taf Mind | <ul style="list-style-type: none"> • Womens Services • Citizens Advice • Hafod • Cornerstone • Gurnos Neighbourhood Learning Centre • Pobl • Merthyr Valley Homes • Strategic Housing Partnership members • Merthyr Tydfil CBC Regeneration, Planning, Asset Management, Environmental Health • Probation |
|--|---|

The outcome of this engagement has been analysed and summarised under the key themes identified below.

HSG Funding Arrangements

- Yearly funding agreements mean lack of security for services, staff and services users. Staff are less likely to remain in or apply for roles
- Service users are impacted by disruption and changes to staff
- Stakeholders felt anything would be an improvement, even a two year agreement.
- Strategic aim for 2-3 year agreement would be good to see.

Activity Monitoring

- Accounting for every hour and whether it is direct or indirect time can be challenging to manage and time consuming to record.
- It can exclude activities like promotion of the service and community engagement.
- It can mean leadership, strategic time and resources are not factored into funding, just frontline time.
- Other LAs have more flexible approaches to activity monitoring
- There was also questioning of the outcome framework and whether there were better ways of evidencing progress of people in supported accommodation.

Flexibility and Innovation

- Covid funding provided additional finances and required stakeholders to be more flexible and innovative in how they worked with clients.
- Prior to this the HSG requirements were quite rigid with allowable activities

- Concerns were raised about not taking the opportunity for reflective learning from Covid arrangements and update the model to give providers flexibility.

Prevention

- HSG services were felt to be in constant firefighting mode, focussing on crisis intervention with little input on prevention.
- Early access to mental health support was agreed a significant preventative need
- Some described seeing people on 'a merry go round' of temporary accommodation, supported accommodation and prison.
- Stakeholders were aware of preventative services such as CAB for carers but there isn't enough, with people still leaving school, prison, or hospital without budgeting and benefits advice.
- There are key changes in circumstances where an assessment and intervention could be triggered. It was raised that with more flexibility stakeholders could offer some of this by doing more promotion of HSG services and engagement in the community to capture people in need.
- Other areas have developed hubs such as one stop shops where it is regular, promoted locally and people can get support, help with form filling or signposting/referral to the right service.
- Stakeholders thought there might be church spaces in the area that might host something like that in Merthyr.

Access

- The increase in online provision has been helpful, in particular people accessing domestic abuse groups and support whilst maintaining anonymity.
- However in other areas, such as mental health, services lost track of people who did not engage, and whilst lockdown provided short term relief of anxiety about going out and interacting, it has postponed addressing issues and building confidence.

Move on from supported accommodation

- This was a significant issue with everyone agreeing there was not sufficient move on accommodation, resulting in people staying in supported schemes and becoming institutionalised.
- People are waiting months for move on from bed and breakfast accommodation.
- Merthyr was described as a tight knit semi-rural community where there is a high likelihood people will know people being moved into the community and the challenges they face.

- Stakeholders were aware of the challenges in purchasing and building new housing in the area and the challenges from the community.

Planning and developing new homes

- Communities in Merthyr Tydfil are very unique and need to be maintained, following the example of RSLs that have a place making charter. This needs strong partnerships between the community and organisations who share a sense of belonging, demonstrated by good consultation and respect of the area's heritage.
- The Planning Department needs to work more closely with elected members to ensure effective balance of the urgent housing crisis since COVID-19 vs the petitions of their constituents regarding new build proposals.
- One stakeholder suggested disconnecting elected members from planning during the housing crisis so that where planning permission was in place, developments could go ahead with less input from committees.
- The Council need to communicate the housing crisis more clearly – the public are not aware of the critical need for additional housing
- There is an overwhelming need for single person accommodation.
- Levels of planning permission are already in place so good to go when opportunities arise.
- Need to take a long term look at sites and get planning permission for 5 years before funding becomes available
- May be some easy win sites that could be mobilised quickly
- The pandemic has hampered inspections of empty properties but owners are reluctant to hand properties over to use.
- Challenges in geography of the Borough and labour shortages, capacity issues, costs increasing mean a perfect storm of not being able to afford or have enough suitable homes. Building needs a partnership approach to building housing with different options and modern, more efficient and environmentally friendly methods.
- The requirement to retrofit homes to make them more environmentally friendly is an even bigger challenge.

Lack of emergency accommodation

- It was described that where people have exhausted other options such as B&B, there are no day centres or night shelters that offer emergency accommodation.
- Stakeholders were aware of challenges finding accommodation for Housing First.
- However, people also mentioned a change in attitude now that the Council must find them accommodation. Some people are not engaging with support or tenancy conditions and

then are placed in temporary accommodation with fewer conditions.

- The budget for temporary accommodation needs to be used more effectively to look at innovative solutions with partners.

Changes to circumstances of people accessing services

- Services are seeing more people who have recently lost jobs and homes and have not accessed services before. They generally have large debts and /or finding it challenging to pay for both fuel and food.
- Increased flexibility in HSG allowing it to become involved sooner and be more preventative, would be helpful to meet their needs.

Homelessness prevention

- The homelessness support from the Council's team was praised. Support happens whilst people are on the waiting list looking at budgeting and tenancy management. People in Temporary Accommodation have good support from MTCBC. Stakeholders who worked across districts felt Merthyr was better than many neighbouring Boroughs.
- RSL stakeholders doing lots support tenants maintain their tenancy and work to prevent evictions.

All-in policy during pandemic

- Some described seeing changes in behaviour of tenants because they are aware the Council has a duty to find them accommodation. Tenancy breakdown is occurring more because of the perceived safety net of temporary accommodation.
- Psychologically Informed Environments were felt to be vital to ensuring the right support is given and the right response is made to what may present as antisocial behaviours.

High needs

- There are some people in hostel accommodation with mental health needs higher than the level of support that can be offered, Community Mental Health Teams are involved assessed risk is higher than the service is supposed to manage.
- Many providers use Psychologically Informed Environment principles to ensure they are addressing needs arising from Adverse Childhood Experiences. This needs to continue to be developed.
- Refuges continue to get lots of high-risk substance misuse and mental health
- An example was one person ready to detox but the NHS were taking a long time to get rehab. provision.

- More people are accessing help and so increasing numbers with high complexity. Covid may have prevented some people from seeking DA support and so more demand is anticipated
- There is a challenge in meeting the needs of people who do not meet eligibility for health or social care services, but their needs are higher than HSG services are designed to meet.
- Psychologically Informed Environments in supported accommodation were felt to be essential.

Housing First

- Some stakeholders felt Housing First worked well and needed to be promoted more.
- However, others felt there were not enough suitable properties and not everyone placed had high support needs.

Ex-offenders

- Finding accommodation for people leaving prison is a real challenge, temporary accommodation does not give the right support to prevent re-offending, even with HSG floating support.
- Some providers had a good relationship with probation and prisons but it was variable amongst others.

Health Input

- There are challenges with accessing mental health services both for those with high needs and those whose needs do not meet eligibility criteria.
- There were a number of examples of challenges accessing intensive substance misuse services such as detox. and rehab. One to one advice and support services are good but once they have exhausted what they can do it is challenging finding other help.
- More reporting of neighbour-to-neighbour issues as everyone at home more and frustrations are building and can lead to unpicking complex situations that need a partnership approach with health and other system partners.

Data sharing

- Strategic stakeholders highlighted the importance of better sharing of data and intelligence.
- The Regional Partnership Board needs to be better at sharing information and have clearer routes for stakeholders to contribute to regional working.
- Stakeholders felt it would be good to have a strategic forum with partners and start exploring data. This could look initially at those who are in unsuitable accommodation, sharing data between the Council and RSLs to generate a list of people that need to move and how the

housing stock could be used more effectively to meet the needs of those people already in the system.

Comments from the 2020 Regional Stakeholder Survey:

The Regional Housing Strategy Group conducted a survey of stakeholders in 2020. The findings included:

Llamau Merthyr Tenancy Support felt that there was a gap in services in Merthyr Tydfil for Suitable Supported Housing for persons with a high level of Mental Health Support Needs and suggested 3 monthly meetings with frontline service workers and stakeholders to discuss issues and share to information.

They suggested that some form of "respite" accommodation and support would be useful for those in temporary accommodation to allow mediation and other interventions to be put in place when required (as used in other local authorities). This change can be helpful to allow some breathing space for both the individual who is housed and either family or support providers.

Cwm Taf Morgannwg Mind felt there was a need for:

- better access to coordinated health, substance misuse and financial support pathways (wrap around support).
- Access to psychological support - to treat and respond to trauma and ACE.
- Making it a contract condition to work in partnership.
- Using the HSG forums to encourage partnership working across providers.
- A single point of access for coordinated responses to health, social care and financial support for all beneficiaries.

Pobl identified that people have been exposed to trauma / Adverse Childhood Experiences and the need for psychological therapies. They also stated that there is insufficient provision for Homeless individuals, accommodation and support plus links to other specialist services. (Assessment centre and emergency provision).

Health Stakeholders

An interview was carried with the Executive Director of Strategy and Transformation CTMUHB and a Consultant in Public Health from Cwm Taf Morgannwg University Health Board. The interview covered broadly how the CTMUHB was committed to improving its accessibility to homeless people. Specifically, the interview highlighted three broad areas for improving access.

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

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

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

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

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

A recent (2020) health needs assessment carried out in CTMUHB in respect of homeless people highlighted a clear interest in the health needs of homeless people in most service areas in CTMUHB, and the forays that some services have made into understanding and meeting the health needs of homeless people was encouraging. There is a need to ensure that the recommendations from the Health Needs Assessment are properly reviewed and implemented in CTMUHB in respect of homeless people by existing partnership forums (e.g., area planning boards) that cover:

- Mental health
- Substance Misuse
- Housing and homelessness

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

The current focus in the Health Board on a locality management model provides an opportunity for

each area to test its service model design to ensure that the needs of the most vulnerable in each community, including homeless people, have been addressed.

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

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

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

the context of re-commissioning of prison health services.

17. All organisations should consider how they can offer volunteering and other opportunities that are accessible for homeless people.
18. An opportunistic vaccination service should be introduced to serve the needs of the homeless population in CTMUEB. This should form part of the remit of the immunisation team, when human resources allow.
19. Women in the eligible age-groups for breast and cervical screening should be encouraged and supported to attend for screening.

Feedback from service users

Summary

- Accessing services for co-occurring mental health and substance misuse services is difficult without the right advocacy and support.
- Being near and having access to healthy long-term normal relationships such as family and friends.
- Having access to help that will help people reduce or eliminate a dependency on substance misuse.
- Having access to the right information, advice and support so that people can avoid
- People having access to suitable, more permanent accommodation when they need it.
- People emphasise the importance of achieving stability around their housing and building confidence during support to allow them to become more independent.
- People value the range of support available to address issues such as benefits, accommodation, debt, domestic violence, mental health support, substance misuse support and equipment to remain at home.
- People value consistency and dependability, emotional support as well as knowledge on rights and entitlements.
- People need help with advocating for themselves and building their confidence.
- Support staff are praised for engaging effectively with service users where other services had not been relationship-based or person-centred.
- Some people highlighted language barriers when working with other agencies.

Service users provided feedback through interviews with their support worker regarding how they feel about how they were previously or currently helped or how they feel they could be helped differently in the future. A range of services, including fixed and floating support, were represented, including: Bawso, Citizens Advice, Pobl, Llamau Tenancy Support, Cwm Taf Care and Repair, and the Housing First Project.

38 service users provided feedback, of which 12 were male and 26 were female. There was a wide age range among the service users who provided feedback, with the youngest being 20 years old and the oldest being 82 years old. The mean age of the service users was 46 years old.

The interview questions focused on:

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

Identifying the main reasons people needed help

Understandably, people had a range of reasons for the support, these included:

- Maintaining safety with equipment from Care & repair
- Support with living independently or after a crisis via Housing First
- Floating support for domestic violence issues at home
- Financial support from CAB, people feeling under pressure because of reduced income
- Support with benefits issues
- Support with mental health issues
- Support with substance misuse issues
- Support with issues with existing accommodation and challenges due to health conditions or vulnerability
- Issues with English not being their first language

What has helped them the most with their current situation

Generally people were very grateful for and positive about the support they received. They valued consistency and dependability in their workers.

Some people had recently been in crisis and described how they could not have engaged with other service such as mental health and substance misuse without the support they received. Signposting and support to get to other services was key.

Support workers helped people to plan and coordinate stressful activities and build confidence in doing them independently. Initially dealing with benefits, bills and housing were key priorities. People expressed how they hadn't had to do many of these things themselves before.

Emotional support was an important aspect of the support delivered.

Being able to contact the support worker if something was urgent or extremely stressful was valuable to many.

People valued support with appealing decisions or having support to advocate for themselves when they weren't getting what they were entitled to.

Access to interpreters was required for some people.

"Knowing that there is help available is very reassuring."

"I did not realise I was a victim of Domestic violence until I started having support, now I am working on what I have been through. I having learning difficulties so the support is very helpful for me as the

support worker does all that is needed and talks me through everything so I understand.”

“The support worker has been amazing with helping me complete the housing application, and other paperwork and then when I had a property she has helped me with what bills I will need to pay and get me grants for my house as I had nothing. The emotional support has been so good as I had no one to speak to.”

How they could achieve a good life that no longer relies on services

People had a range of aims such as:

- Remaining drug free
- Having suitable accommodation
- Being closer to friend and family support
- Having the support that builds skills and coping strategies
- Receiving the right entitlements
- Improving their English
- Building confidence

Some people identified they couldn't see themselves being able to manage without support, such as those with chronic conditions or life changing injuries.

“I would never cope with our services; I depend on the support provided and I would never manage due to my brain injury. Without my support worker, I would be in prison or back on the streets. I will always require intensive support from Housing First, it's going very well with my new support worker and understands my support needs. Keeps me on track with everything.”

“We are financially much more secure now, with my PIP increased, and ESA and CA reinstated. Having the new Motability car has made a huge difference. I feel safer in the car. My partner has had me out a few times now. We haven't gone far – just to Tesco. I couldn't go in and I made my partner park right at the back of the car park facing a wall, but I was able to sit in the car. I've also been down the road to my dad's house and sat in the car outside there. These are tiny steps but I wouldn't have done this if we didn't have the new car.”

“Better statutory services from day one. Failings have caused me to need to seek support/ rely on other services.”

The main barriers to overcoming homelessness or support needs

Again, there were a range of challenges and barriers:

- Negative impact of peer pressure.
- Workers need to learn how to engage to develop a professional relationship.
- Lack of housing in the Merthyr area
- Not knowing where to go for help
- Being unwell, physically or mentally
- Relying on partners who became abusive
- Being able to absorb and understand information
- Not understanding rights, entitlements, and the wider system

- Need for translation, spoken and sign language
- Not knowing who to talk to if there are problems

"We couldn't have done this ourselves. My mental health was so bad I could barely get out of bed a lot of the time. My partner was really stressed and didn't know what to do. We wouldn't have known what to say and people would have palmed us off. We didn't have a clue. We'd have given up. It was too much alone."

"Everything is just too complex to understand. It's hard enough to understand the advice that the adviser is giving you around benefits, let alone trying to figure it out yourself and make sure it's all correct and you haven't done anything wrong.

"Our Universal Credit was paid incorrectly for close to 2 years, we've missed out on around 12k in income during the two years, we weren't even aware of this until this was discovered by the adviser/support worker. It then took weeks to rectify and even CA needed to put in a complaint for this to be looked at."

"The main problem has been not knowing who to turn to or where to start dealing with my debt issues, I became overwhelmed and the letters were very intimidating to me. The only option I thought I had was going bankrupt but didn't like the idea of this option."

Outcomes

Summary

- HSG providers use the Welsh Government Outcomes Framework
- In the most recent full year of data, Managing Money was the outcome relevant to the most people. Managing money was also the outcome where people made the most positive progress,
- Managing accommodation and being mentally healthy made the most progress towards the support goals. But Promoting of Health and Well being was the support category where the least overall progress was made.
- Stakeholders and providers raised concerns that the outcomes they can record do not fully reflect the impact of their support, particularly people with high needs. Work is on going at Welsh Government on introducing a Single Outcome Frameworks across both grant streams, which has been delayed as a result of the pandemic.
- Understanding unmet needs is challenging given the limitations of understanding outcomes as described above.
- There was limited information for 20 21 on needs that could not be met, and only one referral to supported accommodation not being accepted.

Welsh Government Outcomes Framework

As part of the terms and conditions of the HSG grant, the Authority is required to complete the Welsh Government outcomes template to evidence the programme. The current measurement of support is based on the Welsh Government's Outcomes framework this has 4 main headings as follows:

Promoting Personal and Community Safety

Promoting Independence and Control

Promoting Economic Progress and Financial Control

Promoting Health and Well-being

Outcomes data

Reporting in Merthyr Tydfil switched from the calendar year (January – December) to the financial year (April – March) between 2020 and 2021. As a result there are returns covering January to December 2020 and a return covering January to March 2021. The outcomes data for 2019, 2020 and 2021 has been reviewed for this needs assessment

In 2020, there were 2,625 service users with a lead client support category, 998 with a secondary support category and 463 with a tertiary support category. Of the 2,625 service users with a lead support category in 2020, 539 were in fixed accommodation and 2,086 were in floating accommodation.

The most common lead support categories in 2020 were generic floating support to prevent homelessness (1,480 people), people with mental health issues (330 people) and women experiencing domestic abuse (168 people). These three most common support categories accounted for more than three quarters of the total service users with a lead support category.

Lead support categories in 2020 were reflective of those in 2019 where the most common lead support categories were generic floating support to prevent homelessness, people with mental health issues, and single people aged 25-54 with support needs not covered by other support categories.

However, these trends were not reflected in the first quarter of 2021, with the most common lead support categories being: people with mental health issues (55 people), people with substance misuse issues – drugs and volatile substances (31 people) and people with substance misuse issues – alcohol (22 people).

In 2020, managing money was the outcome relevant to 2,335 people, the most of any outcome, this was also the case in 2019 and in the first quarter of 2021. Managing money was also the outcome where people made the most positive progress, with 48% meeting the outcome and a further 46% having a positive outcome (although not meeting the support outcome). Similarly, in the first quarter of 2021, managing money was the outcome where people made the most positive progress, with the highest proportion of service users meeting the outcome.

Following managing money, managing accommodation and mentally healthy were the support outcome relevant to the most people – 1,178 and 945 service users respectively in 2020. In the first quarter of 2021, managing money, managing accommodation and mentally healthy were also the most common support outcomes.

The outcome relevant to the least service users was engagement in employment/voluntary work, relevant to only 173 service users in 2020 and 68 service users in the first quarter of 2021. In 2020, a third of service users met the outcome with a further 58% having a positive outcome without meeting the outcome itself.

People 55+ with support needs made the least progress across the majority of support outcomes of the lead support categories of more than 50 people. Those in receipt of generic floating support to prevent homelessness and women experiencing domestic abuse, had the largest proportion of people meeting support outcomes.

People with learning disabilities (as a lead client support category) tended to have the fewest people either meeting support outcomes or having positive outcomes, across all themes and the majority of support outcomes. However, it is worth noting that the Council doesn't necessarily expect improvement in outcomes for many of these specific services as much of the housing support is maintaining levels of independence and avoiding any further decline into residential care or other settings.

In 2020, managing money was the outcome relevant to 2,335 people, the most of any outcome, this was also the case in 2019 and in the first quarter of 2021. Managing money was also the outcome where people made the most positive progress, with 48% meeting the outcome and a further 46% having a positive outcome (although not meeting the support outcome). Similarly, in the first quarter of 2021, managing money was the outcome where people made the most positive progress, with the highest proportion of service users meeting the outcome.

The theme of Promoting of Health and Well-being contains the following support outcomes: physically healthy, mentally healthy and leading a healthy and active lifestyle. These support outcomes saw the fewest people meeting/having a positive outcome in 2019, 2020 and in the first quarter 2021.

Physically healthy was the support outcome with the largest proportion of people who had not yet shown a positive outcome (18%), followed by mentally healthy (15%) in 2020. Physically health and mentally healthy were also the with the largest proportion of people who had not yet shown a positive outcome in 2019, although this is not the case in the first quarter of 2021 with more service users having positive outcomes but not meeting the outcome. The data does not provide an obvious cause behind this trend, however, returns for the remainder of 2021/22 will show whether this trend has continued.

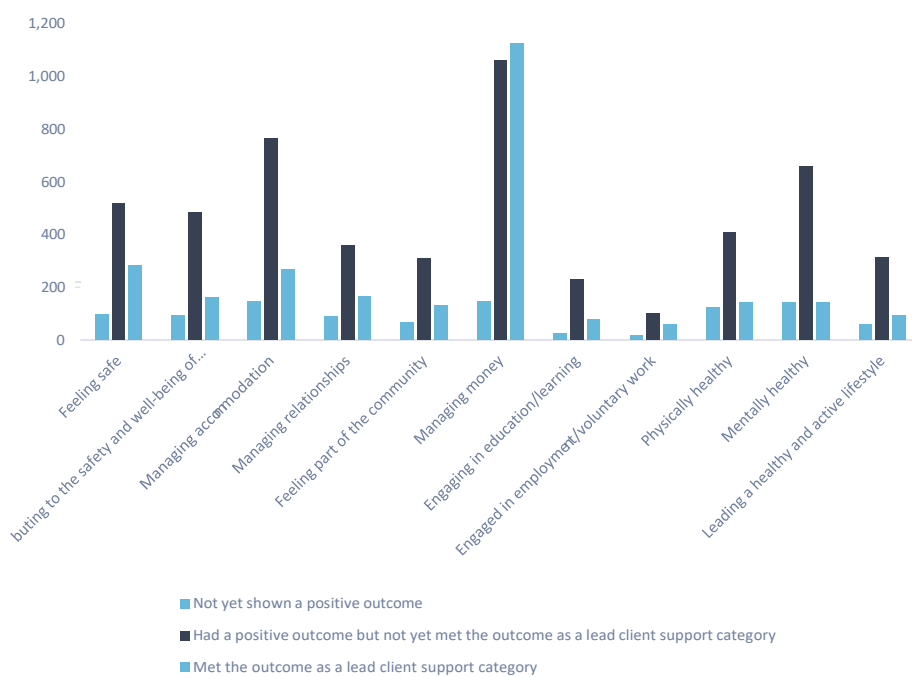


Figure 14: Service user outcome by support outcome

Support outcome	Not yet shown a positive outcome as a lead client support category	Had a positive outcome but not yet met the outcome as a lead client support category	Met the outcome as a lead client support category
Feeling safe		517	283
Contributing to the safety and well-being of themselves and others	93	483	162
Managing accommodation	144	765	269
Managing relationships	89	357	165
Feeling part of the community	66	311	133
Managing money	148	1,063	1,124
Engaging in educational learning	23	230	78
Engaging in employment/voluntary work	16	100	57
Physically healthy	122	410	142
Mentally healthy	143	660	142
Leading a healthy and active lifestyle	59	314	91

Table 16:

Support outcome	Not yet shown a positive outcome as a lead client support category	Had a positive outcome but not yet met the outcome as a lead client support category	Met the outcome as a lead client support category
Contributing to the safety and well-being of themselves and others	13	237	39
Managing accommodation	48	441	86
Managing relationships	3	197	45
Feeling part of the community	8	136	29
Managing money	421	18	164
Engaging in educational learning	3	100	15
Engaging in employment/voluntary work	0	52	16
Physically healthy	13	182	40
Mentally healthy	13	279	39
Leading a healthy and active lifestyle	4	141	27

Table 17

Stakeholders and providers raised concerns that the outcomes they can record do not fully reflect the impact of their support, particularly people with high needs. Work is on-going at Welsh Government on introducing a Single Outcome Frameworks across both grant streams, which has been delayed as a result of the pandemic. This comes with an expectation that departments will demonstrate that all projects are developed with integration and collaboration at the forefront, looking at co-commissioning where possible and integration amongst the grants to deliver the best outcomes for the service user in the most efficient way.

Appendix 1 Summary of policy & legislation

The evolving homelessness policy landscape has included:

- Publication in 2016 of 'Preventing Homelessness and Promoting Independence' – essentially a pathway to economic independence for young people through housing advice, options and homelessness prevention
- Introduction in 2016 of the 'When I'm Ready' arrangements under the Social Services and Wellbeing (Wales) Act (see below), which enabled young people in foster care to remain with their carers beyond the age of 18
- Publication in 2016 by Barnardos of the Care Leaver Accommodation and Support Framework aimed at supporting effective planning and provision of housing and support for young people and care leavers
- Introduction by Welsh Government of the 'Housing First' recovery-orientated approach to ending homelessness that centres on quickly moving people experiencing homelessness into independent and permanent housing and then providing additional support and services as needed.
- A renewed emphasis, in response to the Covid-19 pandemic on reducing street homelessness by providing temporary accommodation solutions, leading to publication by Welsh Government of Phase 2 planning guidance requiring local authorities and their partners to plan to ensure that all those brought into temporary accommodation are supported into long term accommodation, that the emphasis remains on prevention and keeping homelessness a rare, brief and non-repeated experience.
- Phase 3 planning guidance (2020) supporting the design and development of resilient, sustainable services for the future
- A series of focused campaigns including the End Youth Homelessness Cymru Campaign 2018, focusing on the needs of the LGBT+ community, supporting those with mental health issues and reducing links between homelessness and educational disengagement and the care system
- Significant additional investment by Welsh Government, notably £10m in 2019-20 to tackle youth homelessness through enhancing current provision and developing new services; and launch of a £4.8m innovation fund in 2019-20 supporting 26 projects across Wales to new and innovative approaches to housing support
- A report to Welsh Government from the Homelessness Action Group in 2020 providing a holistic policy perspective to ending homelessness
- A report to Welsh Government from the Homelessness Action Group in 2020 providing a holistic policy perspective to ending homelessness and the Government's response in the

form of a consultation document entitled 'Ending homelessness: A high-level action plan: 2021-2026', building on Phase 2 planning guidance.

- A requirement on Local Authorities to finalise a Rapid Rehousing Transition Plan by the end of September 2022.
 - Specific strategic commitments within Welsh Labour's Programme for Government (2021), as follows:
 - Fundamentally reform homelessness services to focus on prevention and rapid rehousing.
 - Building 20,000 new low carbon social homes for rent over the period 2021 to 2026.
 - Support co-operative housing, community-led initiatives, and community land trusts.
 - Develop a national scheme restricting rent to local housing allowance levels for families and young people who are homeless or are at risk homelessness.
 - Ensure Rent Smart Wales landlords respond quickly to complaints of racism and hate crime and offer anything appropriate support.

Further commitments within the Labour/ Plaid Cymru Cooperation Agreement (November 2021), as follows:

- Take immediate and radical action to address the proliferation of second homes and unaffordable housing, using the planning, property and taxation systems
- Establish Unnos, a national construction company, to support councils and social landlords to improve the supply of social and affordable housing.
- Publish a White Paper to include proposals for a right to adequate housing, the role a system of fair rents (rent control) could have in making the private rental market affordable for local people on local incomes and new approaches to making homes affordable.

End homelessness through reform of housing law, enacting the Renting Homes Act to give renters greater security and implementing the Homeless Action Group recommendations

- Renting Homes Wales Act (Wales 2016) changes, which strengthen the rights and protections of tenants in Wales
- The Wellbeing of Future Generations (Wales) Act 2015 which seeks to strengthen existing governance arrangements for improving the social, economic and cultural wellbeing of Wales to ensure that present needs are met without compromising the ability of future generations to meet their own needs.
- Social Services and Wellbeing (Wales) Act 2014 which makes provision for improving the well-being outcomes for people who need care and support, and carers who need support and co-ordination and partnership by public authorities with a view to improving the well-being of people. .
- Welsh Government Affordable Housing Review 2019 which was commissioned with the aim

of examining whether more can be done to increase the supply of affordable housing in Wales.

- Violence against Women, Domestic Abuse and Sexual Violence (Wales) Act 2015 which strengthens the public sector response in Wales to abuse and violence through improving arrangements to promote awareness of, and prevent, protect and support victims of gender-based violence, domestic abuse and sexual violence.
- Substance Misuse Delivery Plan: 2019 to 2022 (Wales) which sets out priority areas that include responding to co-occurring mental health problems which are common in substance misuse, ensuring strong partnership working with housing and homelessness services.
- Equality Act 2010 which provides protection for people discriminated against because they are perceived to have, or are associated with someone who has, a protected characteristic. Protection applies to the provision of services and public functions. In addition, a new Socio-Economic Duty was introduced in Wales in 2020 which requires public bodies, when making strategic decisions such as deciding priorities and setting objectives, to consider how their decisions might help reduce the inequalities associated with socio-economic disadvantage.