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Crisis

Crisis Housing First in London and Newcastle: Final Evaluation

**Report by Imogen Blood, Nicholas Pleace, Shelly Dulson,
Anita Birchall, and Chloë Hands**

Summary Report
February 2025

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Crisis Housing First in London and Newcastle: Final Evaluation

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Summary Report
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Executive summary

1. Introduction

Crisis has advocated for wider adoption of Housing First over the past eight years; its two Housing First services in London (launched in November 2019) and Newcastle (in March 2021) were a significant step into operational delivery of the model, alongside existing Skylight services.

Whilst there have been small differences in implementation between the two services, the core features of Crisis’s Housing First Delivery Model are that it is not commissioned or delivered by a statutory agency or housing provider, and offers an intensive case management model, procuring housing for individuals. It is well-resourced, and teams include clinical psychology, peer input and a personalisation budget. Fidelity to the model is prioritised.

The independent evaluation ran from January 2021 to June 2023 in London and from August 2021 to December 2023 in Newcastle. Activities included: policy and paperwork review; analysis of case management data and case studies; interviews with members, coaches, managers and external professionals, some of which generated ‘stories of change’ which were reviewed by diverse panels using the Most Significant Change approach; fidelity and cost effectiveness assessments.

2. Referrals and profile of members

During the evaluation period, the London service supported a total of 43 members, and the Newcastle service supported 31 members; 13 cases in Newcastle, and 6 in London were closed. Newcastle closures are explained by higher numbers of long custodial sentences,

and an approach whereby some cases were closed by mutual agreement after an initial period of around 3 months’ engagement and assessment.

Referrals to both services came from a mix of sources, including Crisis Skylights (and in London, Crisis at Christmas), local authorities/ pandemic hotel accommodation, other accommodation and service providers, adult social care, and probation. Housing First nominees had to have a significant history of rough sleeping, unstable housing and/or homelessness; challenges with at least two additional support needs; and have been previously excluded/ likely to be excluded from other service options.

The services have supported a diverse group of people, with ethnic/ national diversity much greater in London. The level of members’ needs in both services has been high, in some cases, arguably, too high for the model.

3. Housing

Both Crisis Housing First services sought to access housing by advocating for individual members’ housing rights in statutory systems and/or by building relationships with social and/ or private landlords to identify suitable properties. This has been challenging, with demand for affordable 1-bed properties increasingly outstripping supply in both areas over the evaluation period.

In London, during the evaluation period, there were:

- 41 Home¹ tenancies, held by 32 members.
- A total of 43 members, so 74% accessed a ‘Home’ tenancy during the period.
- For those who obtained a tenancy, the average wait was 18 months.

Notably in London, there were also 39 ‘Suitable TA’² tenancies held by 21 (49% of) members; 3 of whom had been in such a tenancy for 12 months or more at the end of the evaluation period. Many people had multiple accommodation placements: for example, in London Housing First members changed accommodation an average of 6.5 times, with 4 members experiencing between 15 and 25 moves.

In Newcastle, during the evaluation period, there were:

- 22 Home tenancies, held by 19 members.
- A total of 31 members, so 61% accessed a ‘Home’ tenancy at some point.
- For those who obtained a tenancy, the average wait was 7 months.

Tenancy sustainment is viewed as a key measure of the success of a Housing First scheme; however, there are many grey areas as to how this concept is measured.

In London, at the end of the evaluation period:

- 22 members were in a Home tenancy (69% of those who obtained/ already had on joining a tenancy, and 51% of all members).
- If we exclude one death in tenancy from this, tenancy sustainment is 71%.
- 13 had been in their tenancies for 12 months or more (5 having had a ‘managed move’), rising to 17 if we include a consecutive period of suitable TA.

In Newcastle, at the end of the evaluation period:

- 8 members were in a Home tenancy (42% of those who obtained/ already had on joining a tenancy, and 26% of all members).
- If we exclude one death in tenancy and assume tenancy sustainment in the 3 cases where there was a positive decision to step down Housing First support, tenancy sustainment is 61%.

However, these figures do not represent the extent and success of the work carried out by Crisis Housing First to maintain engagement through often complex housing journeys, and by directly funding emergency hotel accommodation for people awaiting tenancies or managed moves caused by cuckooing.

By comparison, tenancy sustainment rates from comparator Housing First programmes range from 76% in Greater Manchester, to 88% in Scotland, and 91% in Wales.

For most members interviewed, getting their own place had been the most significant change from joining Housing First. Themes included: ownership and autonomy, security of tenure, importance of location, and a stable base to begin to address other issues. Some reported challenges with housing suitability, loneliness and managing a tenancy.

4. Housing First support

The evaluation team observed a fidelity ‘journey’ in both services and within Crisis as an organisation, with reflection and adaptation over time. Overall, there was evidence that the support provided by both services aligned with the Housing First principles, for example:

1 Defined as: renting from a housing association/ council, a private landlord, supported housing (longer term and/or specialist, suitable for needs), or other (e.g. longer term with family/ partner). NB this excludes ‘suitable temporary accommodation (TA)’ – see below

2 Suitable temporary accommodation (TA), which involves renting from either a housing association, council or private landlord.

- **Flexible and sufficiently intensive support:** Members valued the holistic and responsive nature of the support from their coaches. Analysis of Crisis's administrative data (2019 – 2023) shows that, on average, Housing First members received 11.2 hours of direct support from their coaches per month. There is a huge range of support intensity, by individuals and over time suggesting the service has been able to respond flexibly to fluctuating needs.
- **Active engagement:** From the outset, there has been a very clear understanding in both services that it is Crisis's responsibility to maintain engagement. There has been significant investment of worker time and other resources to build trusting relationships with people who have experienced trauma.
- **Choice and control:** The evaluation found that the principle of choice and control by members is well-embedded in both services, e.g., in advocating for members' choices in relation to housing and support, and through use of the personalisation budget to pay for things that matter to them.
- **Harm reduction and risk:** Risks for members are often very high, and balancing these with rights and responsibilities through a trauma-informed lens is a recurring theme for both services.
- **Person-centred approach:** There were many examples of coaches supporting members to do things that matter to them, and identify their own strengths, through transformative relationships.

Enablers of high-fidelity support included: caseloads of 3-5; with dedicated management; staff support and supervision; peer support; and consistency of staff teams. The following were sometimes barriers: inflexibility of wider services; internal policies (which needed revising); too wide a geographical spread (in London); recording and case management systems (which did not capture activity and outcomes effectively).

5. Access to wider services

Both HF services have worked extremely hard and with many examples of success to broker and sustain members' access to wider services, including health, substance use, criminal justice, DWP and housing during a period when these services have been overstretched. The impact on changing processes and systems was harder to detect at this stage of development.

The intensive case management role has included: supporting people to attend appointments; collating evidence of needs, mental capacity or risks; advocating for statutory assessments or diagnoses; initiating and representing the views of the person at multi-disciplinary meetings; raising safeguarding concerns; and supporting people during and on release from custodial sentences.

According to other professionals interviewed, the Housing First team improved the effectiveness of their own practice, by carrying out assertive outreach, building consistent relationships, sharing information, and facilitating members' attendance. Concerns were raised about statutory services retracting due to Crisis's support.

6. Cost effectiveness

Over half of staff resource in Crisis Housing First is used in one-to-one time with members, which aligns with the high-fidelity framework. Crisis Housing First salaries were set within Crisis's salary bands, and these are in the upper quartile for the sector.

The operating costs of the Crisis Housing First service were significantly higher than typical local authority commissioned Housing First services, which tend to be inadequately and insecurely funded. In the current financial context, this raises questions about how transferrable it is to the current local authority commissioning environment (as had been hoped in Newcastle) without further work on how it might sit within a wider commissioning framework.

The unit costs for Crisis Housing First broadly mirror those for the three Government funded pilots which supported 1,286 people over three years at a cost of £28m.

The current lack of accessible health and social care and affordable housing for people with multiple and compound needs limits the service's cost effectiveness.

7. Key messages from the evaluation

Needs and risks

Given the very high level of needs and risks in Housing First services, the sector should continue to build research and practice evidence about which groups Housing First interventions are most suitable for and address workforce issues within this.

Access to housing

The evaluation has highlighted the benefits of (ideally in-team) dedicated housing procurement resource and significant lead-in time in advance of launching a Housing First service to build relationships and negotiate the details of how partnerships will work in practice.

Given that Housing First services need to maintain engagement prior to an offer of a settled tenancy, a period of overlap should be factored i.e., where people are receiving both Housing First support and supported housing or temporary accommodation, this overlap should be included in modelling costs and available resources.

Geographical extent

There is learning from Crisis about the optimum geographical coverage for a Housing First service. A balance must be struck between optimising opportunities to meet people's housing preferences, versus a negative impact on service responsiveness, plus building additional multi-agency relationships over the geography.

Tenancy sustainment consensus

A regional or national conversation on the grey areas around a consistent and transparent approach to measuring tenancy sustainment would be of benefit to the sector.



1. Introduction

1.1. Crisis Housing First

Housing First is a system of support for people experiencing homelessness with high and complex needs which is designed to deliver a sustainable exit from homelessness, improve health and well-being and enable social integration. Housing First aims to house people in their own, settled homes as *quickly as possible* and provide the support they need to sustain an exit from homelessness. The model aims to remove conditions to accessing a tenancy, such as the requirement to access treatment or achieve abstinence or stability first.

Housing First has generally shown success when delivered with fidelity to the core ethos of the model, in summary: choice and control for service users, a strength-based rather than a 'deficit' based approach to support, active engagement, open-ended support, separation of (settled) housing and support, harm reduction and a housing-led approach centred on the view that housing is a human right.

Crisis has been a high-profile advocate for wider adoption of Housing First in Great Britain as part of a wider housing-led system over the past eight years³; the model was a key component of Crisis's Plan to End Homelessness⁴. The services in London and Newcastle represent a significant step into operational delivery of Housing First for Crisis, adding to their existing service delivery through the Skylight Centres and Crisis at Christmas. Crisis wanted to demonstrate that a high-fidelity model could be delivered in the current landscape and test out the level of resource required to do that; they also wanted

to share things that had not progressed as hoped, as well as good practice and successful outcomes.

Crisis Housing First in London

The London service was set up in November 2019, and was expanded during the COVID-19 pandemic, when 12 members and 4 coaches joined from the Intensive Case Management service, provided by Crisis to people in emergency hotels. The service aimed to work across London, unrestricted by local authority boundaries: by autumn 2023, it had grown to cover 16 boroughs and was planning a phased reduction to 6 boroughs to tighten its focus.

Crisis Housing First in Newcastle

The Newcastle Housing First service was one component of a [ten-year partnership between Newcastle City Council and Crisis](#), launched in June 2019 to end homelessness in the city. The service started taking referrals in March 2021. Crisis had hoped that, after funding the project for 3 years, the council would continue to commission the service as part of a transition to a more housing-led approach. However, the partnership was ended by mutual agreement in 2022, and Crisis instead committed to ongoing funding of Housing First.

³ See for example, Blood et al (2017) *Housing First Feasibility Study for the Liverpool City Region*. London: Crisis. and Crisis (2021) *Home for All. The case for scaling up Housing First in England*. London: Crisis

⁴ Crisis (2018) *Everybody In. How to end homelessness in Great Britain*. London: Crisis.

Crisis' Housing First Delivery Model

Housing First has been implemented with small differences in London and in Newcastle; the core features of Crisis's delivery model include:

- It is a **community based, support led model** (as opposed to one run by a housing provider or a statutory team such as health or social care).
- It is **not commissioned**, and therefore is not accountable via a contract with a local authority, or a grant from an external charitable trust.
- High priority is given to **fidelity** to the model and its principles.
- It is an **intensive case management model** (ICM), i.e., support workers aim to establish and maintain appropriate links to health, criminal justice, care, and other services, though the team has access to **support from a clinical psychologist**.
- **Housing is procured on an individual basis** – ideally general needs social housing.
- Teams include a **peer support worker**, and have a **distinct budget for personalised spend** to help people access emergency, essential and aspirational items.
- It is **well resourced**, with above-average staff salaries for the sector, a high ratio of dedicated managers to staff, and small caseloads (e.g., 3-5 per worker).
- It is **part of a wider offer to Crisis members** through Skylight Centres, with Housing First team offices based in these centres.

1.2. The evaluation

Keen to contribute to the UK Housing First evidence base, Crisis commissioned [Imogen Blood & Associates](#), in partnership with the Centre for Housing Policy, University of York to evaluate both services independently. This enabled comparative case studies illustrating the contextually relevant factors in running

a Housing First service in two different geographies, generating learning for Crisis and the wider sector. This report is for external audiences.

The evaluation considered the services' implementation, effectiveness (outcomes/ impact), cost effectiveness, and fidelity to the Housing First Principles⁵. A Theory of Change was co-produced with operational teams at the outset (and adjusted for the different contexts). The Theory of Change generated the thematic headings which structure this report and a series of statements against which evaluators assessed the evidence collected.

The evaluation period in London ran from January 2021 to June 2023 (extended to December 2023 for tenancy sustainment data) and in Newcastle from August 2021 to December 2023. The evaluation activities included:

- **Implementation:** review of policies, progress reports and other documents; interviews, group discussions and visits with Housing First teams and wider Crisis staff and managers; interviews and group discussions with external professionals, bringing operational and strategic perspectives.
- **Impact/effectiveness:** review of case management data and case studies; stories collected from members and external professionals, which were reviewed by diverse panels using the Most Significant Change (MSC) approach⁶.
- **Fidelity:** applying the recently published Housing First Fidelity Framework developed by the research team in 2019⁷, to assess practical steps to implement each principle in the UK context.
- **Cost effectiveness:** cost comparisons with other UK Housing First services, and alternative models; consideration of potential for cost offsets across systems.

⁵ Homeless Link (2017) *Housing First in England: the principles*, Homeless Link, London.

⁶ See IBA's microsite, the Story-based Evaluation & Research Alliance for details of MSC

⁷ Blood, I., Birchall, A. & Pleace, N. (2025) *Housing First Fidelity Framework*, Imogen Blood & Associates (with University of York): https://www.imogenblood.co.uk/_files/ugd/775f77_fc088dfcbbc147eea30ade4ed9152971.pdf

2. Referrals and profile of members

Both services manage new nominees to the project carefully. The referral process uses a succinct form and involves input from the referrer and other involved agencies, and a meeting with the potential member to ensure they understand and agree to the referral. Despite some differences between the services and changes over time, the broad criteria are that Housing First nominees should:

- Have a significant history of rough sleeping, unstable housing and/or homelessness.
- Have multiple and/or complex needs (e.g. challenges with at least two of: mental/ physical health, substance use, learning difficulties, offending, domestic abuse).
- Have been previously excluded/ likely to be excluded from other service options.

Over time, and in response to challenges accessing tenancies for members, both services have started to accept individuals who have an existing tenancy, which is unlikely to be sustained without the support that can be provided by a Housing First service.

Referrals to both services came from a mix of sources, including Crisis Skylights (and in London, Crisis at Christmas), local authorities/ pandemic hotel accommodation, other accommodation and service providers, adult social care, and probation. During periods in which referrals from statutory rough sleeper routes have been prioritised (in Newcastle during the partnership with the council, and

in London during Everyone In⁸), women were under-represented; outside of these periods, both services were able to reach women, whose homelessness is more likely to be hidden.

Approximately 40% of referrals to the London service and 60% of those to the Newcastle service were accepted. Where referrals were not accepted in London, this was most likely to be because others were in greater need, rather than because referral criteria were not met. This reflects findings of the evaluation of the Henry Smith Foundation's national Housing First funding programme⁹, suggesting that increased understanding of the Housing First model is reducing inappropriate referrals.

Members' experiences of referral illustrate:

- The diversity of routes into the service – from already being housed, to staying in a hostel, to rough sleeping – or being faced with the prospect of rough sleeping.
- The importance of prison release as an opportunity (often missed, or at least unplanned) to enter Housing First.
- The value of Crisis Housing First remaining open to word-of-mouth referrals, and those originally accessing via the Skylights or (in London only) Crisis at Christmas.
- The motivation for people to take up the offer – sometimes this is out of desperation at the lack of alternatives; sometimes people are 'sick of hostels'. The sense of wanting something better for yourself and to better yourself emerges as a theme.

⁸ See House of Commons Library (2021) *Coronavirus: Support for Rough Sleepers*

⁹ Bretherton, J., Pleace, N., Colliver, K., & Heap, C. J. (Accepted/In press). *The Henry Smith Charity Housing First Strategic Grant: Research into the Effectiveness of Seven Housing First Services*. University of York.



- The importance of really understanding the Housing First offer – and having the option to come back to it at a later stage if now is not the right time for you.

During the evaluation period, the London service supported a total of 43 members, and the Newcastle service supported 31 members.

The level of members' needs in both services has been high, in some cases arguably too high for the model – a point which has been evidenced by some members moving on to registered care settings or specialist mental health supported housing or needing this level of care and support but not being able to access it. According to the case management system, 79% of Newcastle members and 86% of London members have three or more support needs, with women more likely than men to have seven or more support needs.

This complexity has resulted in high numbers of safeguarding concerns raised, prison sentences, incidents of cuckooing, members sectioned under the Mental Health Act and deaths in service (three members passed away during the evaluation period; around

half a dozen more Housing First members are reported to have died on either side of this period). This reflects the findings of the evaluation team's national research which found that death was the most frequent reason for Housing Support to end¹⁰.

Overall, the services have supported a diverse group of people:

- As expected, ethnic diversity is greater in London (where 1 in 4 members are from black or ethnic minority backgrounds) than Newcastle (where just 6% are).
- 10 different nationalities were represented in the London cohort, where all the Newcastle members were British/ English. 10% of the London members have EU/EEA citizenship and 4% have exceptional leave to remain.
- Almost two and a half times as many men have been supported than women in Newcastle and one and a half times as many in London.
- The Newcastle cohort was slightly younger overall with 32% of members aged under 35, compared to 14% in London.

- 11% of the London members and 3% of the Newcastle members identified themselves as LGBTQ+.

During the evaluation period, 13 cases in Newcastle, and 6 in London were closed. The numbers may be higher in Newcastle because of that service's approach to active engagement and assessment for around three months at the start of a relationship with a member – with some cases being closed by mutual agreement following that period. A further 5 cases in Newcastle were closed because the member received a custodial sentence, which was either for a long period, or during which the member decided to withdraw consent. Other closures were the result of members moving away to another area or choosing to step down their support. Both services showed high persistence in their engagement, and decisions to close were not taken lightly.

¹⁰ Blood, Birchall & Pleace (2021) *Reducing, changing or ending Housing First support*. Homeless Link: https://homelesslink-1b54.kxcdn.com/media/documents/Reducing_changing_or_ending_Housing_First_support_2021_full_report.pdf

3. Housing



3.1. Context and procurement

Access to housing is a key issue for Housing First in England, especially within the current housing crisis. This is mitigated to an extent in models delivered by or in partnership with landlords¹¹, though these may offer limited housing choice and less separation between housing and support. Both Crisis Housing First services sought to access housing by advocating for individual members' housing rights in statutory systems and/or by building relationships with social and/ or private landlords to identify suitable properties. This has been challenging in London and Newcastle, with demand for affordable 1-bed properties far outstripping supply in both areas. Both services operate in a context in which access to housing is conditional – based on statutory homelessness duties, housing allocation policies, affordability assessments and discretionary decision-making by landlords, which tends to be risk averse or, particularly in the private sector, even discriminatory.

London is facing a particularly acute housing crisis. At the end of 2023, rough sleeping in the capital reached a 10-year high¹² and there were more than 7 times as many households in temporary accommodation in London than in the rest of England ([DLUHC 2023](#)). In February 2023, advertised private sector rents were almost 20 per cent higher than in March 2020 ([London Councils 2023](#)), yet one in six privately rented homes in London do not meet the Decent Homes Standard ([Centre for London 2023](#)). During the evaluation period, there was no single housing, homelessness or rough sleeping strategy for London or London-wide system for accessing social housing.

Initially, a small specialist team worked across the Housing First and Skylight services to procure properties for members in London, though over time the HF service took on this role. Through tenacity, the service reported successes in both advocating for individual members' statutory housing rights and building Service Level Agreements with several Registered Providers.

Historically, **Newcastle** has benefitted from relatively benign housing market conditions and a sizeable council housing stock. Crisis had assumed that its partnership with the council would enable a steady supply of social homes for Housing First members. However, a combination of factors – the impact of the pandemic, pressure on low cost housing from increasing demands from the Home Office, and shifts in the private rental market – have led to a significant reduction in available and affordable properties. In July 2024, the council's website¹³ showed that 4,538 people were on the housing register awaiting a 1-bedroom property; yet just 231 such properties were advertised between January and March 2024 (including all registered providers) – 5% of the total demand. Meanwhile average private rents increased 10.5% from February 2022 to 2023 according to the [Office for National Statistics](#). The Crisis HF team also felt that their members faced 'gatekeeping' by the social housing allocation panel.

The council's Arms Length Management Organisation (ALMO) was only willing to offer properties to Crisis Housing First either via a managing agent agreement (in which Crisis took over housing management responsibilities), or through use of Housing Benefit exemptions to provide a modest charge (approximately £20 per week) for Your Homes Newcastle to deliver intensive housing management. Crisis agreed to the latter of these options and the operational team reported this model to have worked well, since the additional funding has allowed for a nominated link housing officer to act as an intermediary with Crisis. This has enabled smooth access to mainstream housing services and provided some insurance for the landlord against additional repairs. This arrangement will be reviewed on a case-by-case basis if a member comes close to work, to ensure affordability of rent is not a barrier.

Newcastle HF benefitted from a dedicated housing procurement worker, and there was further success with some Registered

Providers who offered a small number of general needs properties. Several PRS tenancies were obtained in the early stages of the project, though these arrangements proved difficult to sustain for this client group, affordability barriers made it almost impossible to find new PRS tenancies within Local Housing Allowance rates. Larger private landlords offered to lease Crisis entire blocks of flats during the evaluation period; however, these would have been challenging to manage within HF principles.

Learning from both services suggests the need for more lead-in time and resource dedicated to building relationships and negotiating the details of how partnerships with landlords will work in practice in advance of launching a Housing First service. This echoes the findings of the evaluation commissioned by WMCA on its Housing First pilots¹⁴.

3.2. Housing outcomes

Obtaining a tenancy

The evaluation has applied Crisis's categorisation of accommodation status, used on its case management system and consistent with the Homelessness Monitor series¹⁵, i.e.:

- **Core homelessness:** rough sleeping, sofa-surfing, hostel, night shelter, sleeping in tents/ vehicles, etc, B&B/ hotel, or other temporary accommodation, in custody.
- **Wider homelessness:** suitable temporary accommodation (TA), which involves renting from either a housing association, council or private landlord.
- **Home:** renting from a housing association/ council, a private landlord, supported housing (longer term and/or specialist, suitable for needs), or other (e.g. longer term with family/ partner).

11 Bretherton, J., Pleace, N., Colliver, K., & Heap, C. J. (Accepted/In press). *The Henry Smith Charity Housing First Strategic Grant: Research into the Effectiveness of Seven Housing First Services*. University of York.

12 With 4,389 people found sleeping rough according to CHAIN data Table P1: No. of people seen rough sleeping in London, 2021-22 Q4 to 2023-24 Q3, CHAIN quarterly data tables, 2023-24, Q3, <https://data.london.gov.uk/dataset/chain-reports>

13 Accessed on 1 July 2024 from <https://www.newcastlehomes.org.uk/content/KeyHousingFacts>

14 See p.7 of WMCA/ Campbell Tickell (2021) Housing First Research Project

15 See: <https://www.crisis.org.uk/ending-homelessness/homelessness-knowledge-hub/homelessness-monitor/>

In London, during the evaluation period, there were:

- 41 Home tenancies, held by 32 members.
- A total of 43 members, so 74% accessed a 'Home' tenancy during the period.
- For those who obtained a tenancy, the average wait was 18 months.

In Newcastle, during the evaluation period, there were:

- 22 Home tenancies, held by 19 members.
- A total of 31 members, so 61% accessed a 'Home' tenancy at some point.
- For those who obtained a tenancy, the average wait was 7 months.

Whilst waiting for settled housing, both services have worked extremely hard to maintain engagement with members and support them to find a suitable temporary option and the right tenancy for them. This has involved partnership working with hostel workers or outreach teams, and significant resource to find and fund hotel places where suitable alternatives are not available and to prevent the need for members to sleep rough. There are many examples of coaches supporting people to turn down offers of accommodation that was not felt to be suitable. Many individuals have experienced multiple accommodation placements: for example, in London HF members changed accommodation an average of 6.5 times, with 4 members experiencing between 15 and 25 moves.

The use of 'suitable' temporary accommodation (i.e. rented from social or private landlords) for extended periods of time is particularly evident within the London context:

- **In London**, during the evaluation period, there were: 39 Suitable TA (Wider Homeless) tenancies, held by 21 (49% of) members; 3 of whom had been in such a tenancy for 12 months or more at the end of the evaluation period.
- **In Newcastle, during the evaluation period, there were:** 2 Suitable TA (Wider Homeless) tenancies, held by 2 (6% of all) members.

Crisis does not count suitable TA as a settled 'Home' tenancy.

Sustaining a tenancy

Tenancy sustainment is viewed as a key measure of the success of a Housing First scheme; however, there are many grey areas as to how this concept is defined and measured within the UK's increasingly challenging housing context. We append an explanation of the approach taken in this evaluation. Headline findings include:

London:

- 69% (n=22) of the 32 members who obtained/ joined the service with a Home tenancy were still in this (or had been moved to another Home tenancy) at the end of the evaluation period (this is equivalent to 51% of all members):
 - 13 of them had been in their tenancies for 12 months or more (5 of them had had a 'managed move', as defined in the appendix). However, a further 4 people achieved 12 months+ tenancy sustainment if we include the time spent in 'suitable TA' that they previously sustained for 6 months or more, and from which they moved directly into their settled tenancy, making the total 17.
 - 7 of them had been in their tenancies for 6 months or more.
 - 2 of them had not yet been in their tenancy for 6 months.
- To benchmark fairly with evaluations of national pilots (see below), if we exclude the one person whose tenancy ended due to death from the calculation (i.e., 22/(32-1)), this suggests **a tenancy sustainment figure of 71%.**

Newcastle:

- 42% (n=8) of the 19 people who obtained/ joined the service with a Home tenancy were still in a tenancy at the end of the evaluation period:
 - 5 of them had been in their tenancies for 12 months or more.

- 1 had been in their tenancy for 6 months or more.
- 2 of them had not yet been in their tenancy for 6 months.

- To benchmark, if we exclude the one tenancy which ended due to death and assume tenancy sustainment in the 3 cases where the case was closed (whilst the person was in a tenancy) due to a positive decision to step-down or transfer support, this suggests **a tenancy sustainment figure of 61% for benchmarking** ((8 + 3)/(19-1))

Given the average length of time taken to obtain tenancies, a longer evaluation period would be required to see these figures increase.

By comparison, national figures from Scottish Housing First suggest 88% tenancy sustainment¹⁶ and 91% from Wales¹⁷. MHCLG pilots have not published data in a comparable format: 738 tenancies were sustained at the end of the evaluation, but it is not clear what proportion of the 1286 people accepted onto the programme obtained a tenancy¹⁸. An article in Inside Housing, based on a Freedom of Information request suggests a rate of 76% for in the Greater Manchester HF pilot in early 2024¹⁹.

Whilst tenancy sustainment has traditionally been the primary measure of HF effectiveness, managed moves also demonstrate the 'stickability' of support and fidelity to the principle of separation between housing and support. It was clear from conversations with HF teams that, tenancies coming to an end were often not viewed as a 'failure' – perhaps because the tenancy was not suitable for the person, or because the process had been a learning opportunity for them.

There were also many examples of intensive support from the Housing First coaches to enable members to move out of high-risk situations. For example, one member let the coaches know that they were being cuckooed within a few months of the start of a settled tenancy. With advocacy from HF, the local authority agreed in principle to a managed transfer but it took a long time to find a suitable alternative. 6 different B&B/ hotel placements and 2 periods of 'suitable TA', each lasting a few months were provided alongside the existing tenancy. The member then went into custody and the service advocated for the transfer offer to remain open on their release, but it was not possible to effect this immediately on release. Since the member was still in B&B at the end of the evaluation period, we did not class this as a sustained tenancy, but the amount of work to advocate and maintain engagement throughout this housing journey was significant. In another similar cuckooing case where the member was successfully moved to a new settled tenancy within the evaluation period, we did class this as a sustained tenancy.

3.3. Impact and experiences

For most of the members interviewed, getting their own place had been the most significant change for them as a result of joining Housing First. Themes related to housing included:

- **A sense of ownership and autonomy:** people valued privacy, being able to lock their own front door, knowing who is coming through the front door, and having the freedom to 'do what I want how I want'. People particularly valued having their own outdoor space, and many described personalising their homes and gardens – access to personalised budgets from Crisis was a key enabler for this.

16 Scottish Government (2023) *Housing First Monitoring: Year 3 – 01 April to 30 September 2023*: https://www.gov.scot/publications/housing-first-monitoring-report-year-three-first-half/#_ftn4

17 Cymorth Cymru (2023) *Housing First Wales Tracker, February 2018 to September 2022*: <https://www.cymorthcymru.org.uk/wp-content/uploads/2023/10/HF-Wales-Tracker-Sep-2022.pdf>

18 DHLUC (2022) *Evaluation of the Housing First Pilots: Third Process Report*: https://assets.publishing.service.gov.uk/media/6311c6f88fa8f5578fbb84f5/Housing_First_Evaluation_Third_process_report.pdf

19 Riding, J. Five things we learned from the report on Housing First pilots, 31.04.24, *Inside Housing*, <https://www.insidehousing.co.uk/insight/five-things-we-learned-from-the-report-on-housing-first-pilots-84834>

“I’ve got my own little garden. My own private tree.”

Member, London

- **Security of tenure** impacted the extent to which members felt able to truly ‘settle’. Some in temporary tenancies felt they could not yet really make their flats ‘home’; one person described turning down over thirty private rented tenancies because they wanted their ‘own home’ (i.e., a social rented property).

“The only way I’m leaving here is in a box.”

Member, London

- **Location was key:** one person described turning down a property in an area which was ‘rough’; and was now very happy to have a property in a location close to the facilities and services they use.
- **A stable base:** several people spoke of the positive impact of their home on their mental health, substance use, offending and reconnection with estranged family.

“The main difference having the flat has made to me is staying out of jail”.

Member, Newcastle

“The most important thing to me is having a roof over my head because you have to have a roof over your head before you can get clean. It’s impossible to do other things without having a roof over your head first”.

Member, London

Several people described how they had been able to stop or significantly reduce their drug or alcohol use since moving into their own homes; some spoke about various future plans.

However, there are other member stories which highlight the fact that a ‘linear recovery’ is far from inevitable, that housing stability may be necessary but is not always sufficient, and that ongoing support is essential. Maintaining a tenancy can be extremely challenging for people with long histories of homelessness, institutional living, and trauma.

“Being in the flat brings back memories and makes me want people around me. I put people up and was nice to them and they’ve taken advantage, so I ended up sleeping rough to get away from them”.

Member, Newcastle

Not all properties were ideal; one member explained:

“When I moved in, it was all painted and looked really nice but now it’s full of mould and damp. I hate it”.

Member, London

As one external professional explained in a panel discussion: *“It is hard to do pure H1st in the housing system that we currently have”*. Not only does it take a long time to get a property allocated, but *“sometimes you have to encourage them to stay in properties they don’t like because they won’t get another one”*.

4. Housing First support

The evaluation has considered the extent to which Crisis HF differs from traditional, commissioned support services, where support tends to be time limited, attached to a housing offer, and offering relatively limited choice in terms of the type of support offered. Headline findings are presented under the relevant Housing First principles.

4.1. Flexible and sufficiently intensive support

Members valued the holistic and responsive nature of the support from their coaches. They told us they felt reassured by the fact that their coach would contact them regularly by phone or call them back straight away; in Newcastle, members told us they valued being able to drop-in to the Skylight in the city centre and see the Housing First team.

“I know if I call [HF coach], even if she’s in a meeting, she’ll text me straight back and call after the meeting. She’s always there at the end of the phone”.

Member, London

“My support worker does all sorts for me. He takes me to appointments and to places like the pictures and things like that”.

Member, Newcastle

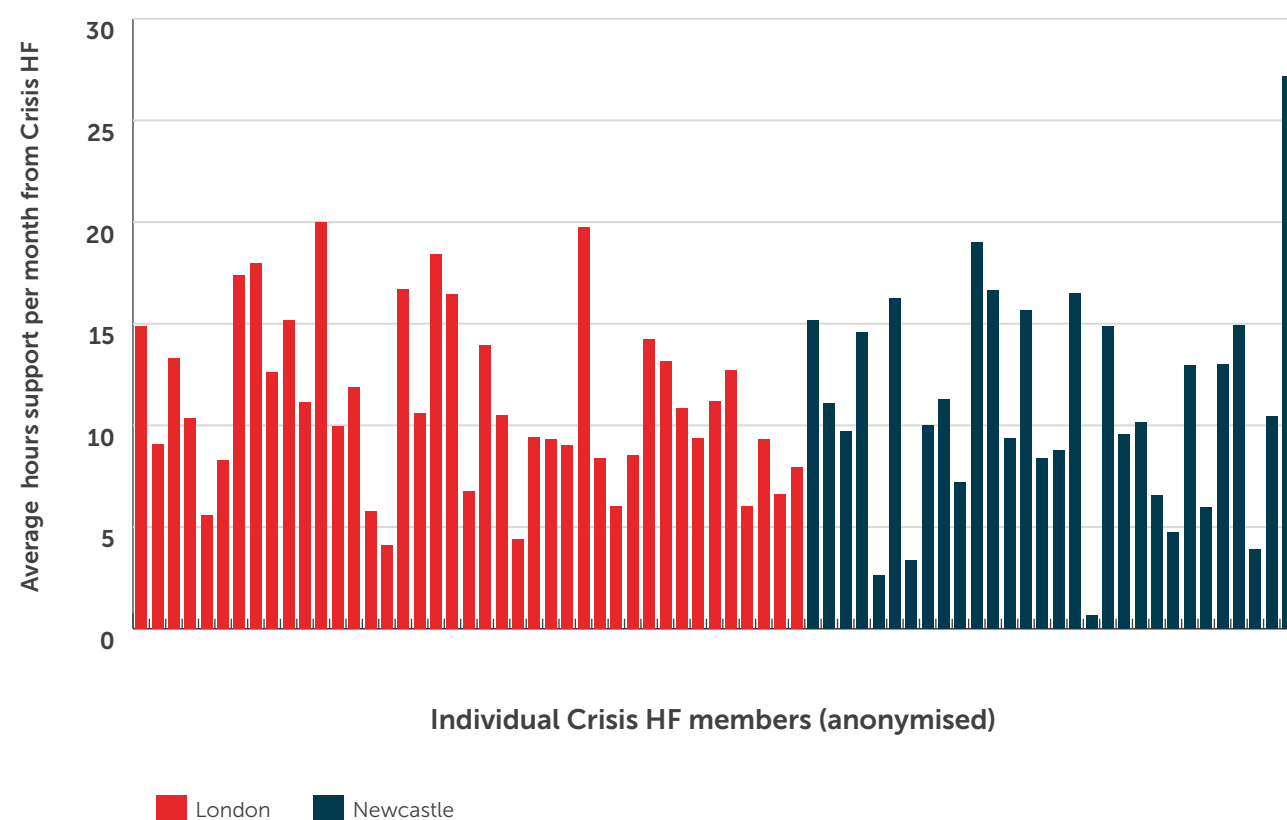
Analysis of Crisis’s administrative data (2019 – 2023) shows that, on average, Housing First members received 11.2 hours of direct support from their coaches per month. There was some variation by service (11.5 hours in London; 11 in Newcastle) and over time; with the general trend being that, as caseloads increased, the average amount of support each member received tapered, reflecting trends in national research findings²⁰. In addition to this, an average of 7.3 hours in London and 6.4 hours in Newcastle was being spent on each member monthly in liaison with other agencies and social and private landlords. Administrative data suggests that around 54% of staff time was spent in face-to-face contact with members.

48% of members who had been using Crisis Housing First for 24 months or more were using half or less of the support time they had received during their first month, as were 54% of those who had been with the services one to two years. However, this is clearly not true of everyone receiving the service.

There is a huge range of support intensity, by individuals and over time, reminding us that resettlement can be fragile and suggesting that the Crisis service has been able to respond to fluctuating needs flexibly. The following graphic illustrates this variation by showing the average support hours received by individuals.

20 Pleace, N. and Bretherton, J. (2019) *The cost effectiveness of Housing First in England London*: Homeless Link

Figure 1: Average hours spent on individual members each month



Source: Crisis Administrative Data (2019-2023, covering 73 HF Members). Figures are rounded.

4.2. Active engagement

From the outset, there has been a very clear understanding in both services that it is Crisis’s responsibility to maintain engagement, and there has been significant investment of worker time and other resources to make this happen. This has, for example, included giving people phones so they can be contacted, and outreaching – sometime daily - to find people on the streets or support them in hostels. The stories and case studies highlight how long it can take to build trusting relationships with people who have experienced trauma and how intensively coaches have worked to achieve this.

As both services have matured, there has been evidence of reflection, adaptation, and increased confidence in decisions about how best to target engagement resources for each

person, and across the service. For example, at the end of the evaluation period, the Newcastle team leader reflected that:

“The team is now able to admit that for those who are not engaging, we can be more honest about whether now is the right time – the person may come back round when the time is right for them and now they understand what the offer is”.

Team leader, Newcastle

4.3. Choice and control

The evaluation found that the principle of choice and control by members is well-embedded in both HF services. For example, we identified examples of:

- Coaches facilitating and advocating for members’ choices, including in relation to housing choice.
- Members being able to choose whether, when and how they received support from the service.
- Members being supported to use their personalisation budget to buy things that matter most to them, e.g. to personalise their homes or enable hobbies.

However, there are practice dilemmas in relation to the parameters of choice and control. As one participant of the London Most Significant Change panel commented:

“We don’t talk enough about the fact that it isn’t just a case of the person says what they want, and they get it

– even in Housing First, life isn’t like that, and it’s much more nuanced, it’s a two-way relationship”.

London MSC panel member

4.4. Harm reduction and risk

Balancing risks, rights and responsibilities is a recurring theme throughout the HF cases and paperwork. Both services are working with complex mental capacity issues arising from the inter-play between co-occurring mental health and substance use, often accompanied by acquired brain injury or learning disability. Risks for members are often very high – both from self and from others - and both services have raised multiple safeguarding concerns as a result. There has been some progress in relation to identifying and reducing gender-based risks by both services over the course of the evaluation.

The evaluation identified many examples of good practice in this area from both services, including a good safeguarding policy (Newcastle) and evidence of a review which

considered harm reduction in relation to personalisation budget spending (London). Where people continue to use drugs or drink, or experience lapses, it is generally clear from the language used by both services, that this is seen through a trauma-informed lens and recognised as a coping strategy. At the Newcastle Most Significant Change panel, professionals reflected on the risks arising when people continue to experience considerable distress once re-housed; and how drug and alcohol services' focus on 'recovery' can exclude those continuing to use.

“Do we need more intensive Housing First, or some form of specialist supported accommodation?”

Newcastle MSC panel

4.5. Person-centred approach

Members' stories and case studies contained many examples of the HF services enabling members to do things that matter to them, such as go to a show or visit the place where they grew up. It was evident from case notes and member interviews that coaches can identify members' strengths:

“It's like they [Crisis] believed in me you know what I mean, they sort of... 'this person, we think he can do' you know what I mean”.

Member, London

It was also clear from some members' stories that the quality of the relationships they had developed with their coaches and peer support workers were transformative. For example:

“I am more respectful of what the team supporting me say – I've realised that if you treat people with respect, they treat you with respect.....”

Member, Newcastle

“I feel I can trust the people and that makes a massive difference to how things were before”.

Member, London

4.6. Enablers and barriers to delivery of high-fidelity support

The evaluation identified the following enablers and barriers:

- **Caseload size, peer support workers and consistency of staff teams:** these enable intensity and flexibility of support, and relationship-building.
- **Staff support and supervision** (including reflective practice and ad hoc support from a clinical psychologist), is key to delivering high quality support which balances risks, rights and responsibilities, whilst also promoting workers' wellbeing.
- **Geography and transport:** the flexibility of the support offer in London was somewhat limited by the service's geographical spread and travel times; a point to which the service has responded with plans to reduce and delineate the catchment area over time.
- **Inflexibility of other services** sometimes limited the impact of HF advocacy.
- **Policies:** there were sometimes tensions between existing organisational policies and processes and the Housing First model. Over time, some policies and procedures have been adapted or newly developed by or for the Housing First service, e.g. working in people's homes, information

sharing with the police, financial procedures (to enable flexible use of the personalisation budget), safeguarding and incident reporting.

- **Recording:** although there were some excellent examples of strengths-based and reflective case recording, recording styles sometimes slipped into more procedural, task-focused or deficit-based language. However, this did appear to improve over the course of the evaluation.
- **Case management system:** staff felt frustrated that the system (which pre-dated the service) does not capture 'softer outcomes' or the role which coaches play in facilitating access to wider services. Operational and evaluation teams found it very difficult to track changes over time using the system, even in relation to key status changes such as case commencement or closure, accommodation or the local authority in which it is located.

5. Access to wider services

The evaluation sought evidence around wider systems' understanding of the HF model and its target cohort whereby collaboration, challenge and change in operational partnerships between the HF teams and mainstream services improve access for this cohort, provide better joint working and efficiency savings as well as better experiences from member perspectives on engaging with mainstream services.

It is clear from the data collected, that both HF services have worked extremely hard and with many examples of success to broker and sustain members' access to wider services, including health, substance use, criminal justice, DWP and housing.

Their Intensive Case Management role has included:

- Helping people to attend appointments so they remember and feel prepared to attend, get to the appointment, and can understand and remember what was said during the appointment.
- Collating evidence of care, health (including mental health) or housing needs, and of mental capacity or safeguarding risks to advocate for members' needs to be met.
- Advocating for Care Act assessments, diagnoses (e.g. Learning Disability), housing offers, to keep cases open, etc.
- Initiating, organising and attending multi-disciplinary team (MDT) meetings, and acting as an intermediary between the MDT and the person, supporting them at the meeting or advocating for and checking their preferences and feeding these into meetings.
- Raising safeguarding concerns, or escalating cases where risks are high.
- Supporting people during custodial sentences and coordinating support on release.

The Newcastle Housing First service has developed good partnership working with various agencies, especially with Newcastle Treatment & Recovery Services - an integrated team comprising nurses, social workers, recovery co coordinators and Consultant Psychiatrists. Good relationships have also been forged with GP surgeries, probation, the Newcastle City Council Rough Sleeper team, and the community policing team. The evaluators engaged many of these partners during the final year of the evaluation, either as storytellers or panel members in the Most Significant Change activity. It has been more challenging to engage external operational professionals in the evaluation in London. This is likely to reflect the pressure on services in London and is not helped by the number of boroughs which the Crisis Housing First service covers.

Feedback from external partners about how Crisis Housing First adds value to their work and to the individuals they jointly support highlighted how coaches:

- Have capacity to carry out assertive outreach, which was felt to be critical to engagement with this client group and which other services could rarely offer.
- Have time and resource to support people to attend appointments, which greatly increases the chances of people complying with medical treatment or court orders.
- Can work holistically, which is particularly important where people have multiple support needs, and can help to break negative cycles, e.g., offending.
- Provide consistent, relational support through periods of crisis and stability, unlike statutory services which tend to close cases and allocate them to different workers.

- Can support during custodial sentences and on release, where Prison Offender Managers tend to have high caseloads and cannot build ongoing relationships.
- Can (where members consent) share information, which meant that professionals could exchange concerns, or sightings of a person, and better coordinate their resources.
- Given their independence, can challenge local authorities, e.g., in relation to adult safeguarding, care assessments and homelessness decisions.

“Housing First can take time to engage – go with a client and get a coffee at McDonalds, where we are in back-to-back meetings”

Probation Officer

However, some stakeholders expressed concerns that Crisis may end up substituting for services which the council has a statutory duty to supply, especially given the severe pressures on statutory services and their inaccessibility to people with multiple and complex needs. Evaluators also heard examples of external services trying to push back on Crisis to manage behaviours they find hard to manage; one coach described feeling increasingly confident to challenge other services as well as support them:

“The engagement you build – can make you feel you’re responsible for everybody’s work. It’s important people stick to their remit”.

HF coach

Across both services, the evaluators heard many examples in which the HF team had succeeded in making other services more flexible in their approach to individual members; however, the impact on system change was harder to detect at this stage of service development. The constraints that other agencies are operating within means they are less willing and able to flex their criteria, so the HF team mainly relied on building relationships with individual practitioners to improve access for individual clients.

“Even if a service is ‘inflexible’ we know people who work there who aren’t”.

HF Manager



6. Cost effectiveness

Introduction

Housing First was not envisaged as a low-cost service model: the costs of the Canadian and French national pilots, for example, ran into hundreds of millions; even the English national pilots (which by comparison took an intensive case management approach which did not employ health and care professionals), there was a budget of £28 million²¹. Cost effectiveness and efficiency arguments that are advanced for Housing First in England by the current Government and its advocates are not posited on comparisons with other homelessness services or rapidly monetizable savings for other services, but on reducing the *lifetime* human and financial costs of recurrent and sustained homelessness.²²

Efficiencies may also be possible for local authorities and other homelessness service providers where Housing First is able to enable people ‘stuck’ or caught in a ‘revolving door’ using of hostels and supported housing to exit homelessness. Housing First is often a more *cost-effective* service for people experiencing homelessness who have high and complex needs. This does not mean that Housing First will necessarily allow for any overall reductions in public spending, but it can mean that similar levels of spending produce better outcomes.

Findings of our cost effectiveness analysis

Crisis Housing First is a high intensity service that devotes significant and focused worker time and effort to the needs of members. Over half of staff resource in Crisis Housing First is used in one-to-one time with members, which aligns with the high-fidelity framework.

Crisis Housing First salaries were set within Crisis’s salary bands, and these are in the upper quartile for the sector. Crisis (unlike most commissioned services) was able to pitch salaries at a level where the right staff were likely to be recruited and retained. This created some tensions with other HF services in both London and Newcastle, where other providers expressed concerns about the lack of equity and Crisis attracting some of their best staff.

Direct comparisons between Crisis Housing First and Housing First services working through local authority commissioning are problematic since the latter are now widely reported as being inadequately and insecurely funded and as operating in challenging contexts across most of England²³. This raises questions about how transferrable it is to the current local authority commissioning environment (as had been Crisis’s hope, certainly in Newcastle) without further work on how it might sit within a wider commissioning framework.

21 Aubry, T., Roebuck, M., Loubiere, S., Tinland, A., Nelson, G. and Latimer, E. (2021) A tale of two countries: a comparison of multi-site randomised controlled trials of Pathways housing first conducted in Canada and France. *European Journal of Homelessness* 15(3).

22 <https://www.centreforsocialjustice.org.uk/library/close-to-home-delivering-a-national-housing-first-programme-in-england>

23 Blood, I., Birchall, A., and Pleace, N. (2021) *Reducing, changing or ending Housing First support* London: Homeless Link/Housing First England.



The operating costs were much more than a local authority is likely to be able to afford in the current financial constraints.

However, the unit costs for Crisis Housing First appear to broadly mirror those for the three Government funded pilots which supported 1,286 people over three years at a cost of £28m.

English Housing First, including Crisis Housing First and the Government funded pilots in England, generally costs much less than very high-fidelity programmes in countries such as Canada and France, which directly employ a range of health and care professionals. These programmes tend to be funded by mental health or health budgets.

It is also problematic to compare the costs of Crisis Housing First with those of alternative interventions, such as supported housing or temporary accommodation:

- Housing First is inherently expensive relative to more basic homelessness services because it offers intensive case management, which is agile and co-productive within a low caseload model on an ongoing basis. Most activity is delivered outside of a fixed site setting and, in the case of London Housing First, across a large geographical area.
- As we have seen, Housing First has supported individuals to achieve tenancy sustainment outcomes, where homelessness still needs to be addressed at the end of a stay in temporary or short-term supported accommodation.
- There is huge variation in the costs of temporary or supported accommodation models. For example, in Newcastle, Crisis and Alma Economics (Alma Economics 2021²⁴) have estimated that the median cost of supported accommodation in Newcastle was £11.8K per unit per year (with variation from £4K to £40K); and the median cost of crisis/ temporary accommodation is £13.8K

per unit (varying from £8K to £25K). Costs are likely to have increased with inflation and will be significantly higher in London.

Conclusions

Housing First and similar models work best in contexts where there is excellent coordination with other services (health, mental health, addiction, criminal justice, social landlords, welfare systems) and a clearly defined, sufficient and accessible (social) housing supply alongside a framework that ensures all homelessness services are adequately financed on a sustainable basis.²⁵ Without this, Housing First is *likely* to be less effective overall, and hence less cost effective. It is inherently more *difficult* for Housing First to achieve very high cost effectiveness in under-served areas and high-demand housing markets, arguably now apparent in many parts of UK, than it is for Housing First working in the context of social protection policies that adequately address access to social housing and other services.

As the other sections of this report have shown, Crisis Housing First, adequately financed as it was, found that wider services often struggled to respond to members' needs effectively, and a context of inadequate social and affordable housing supply was a limitation for both services.

7. Conclusions

There were some challenges facing Crisis Housing First in both London and Newcastle as both services arrived in contexts in which Housing First was well established and multiple services were up and running, particularly in London. Both cities had been among the early adopters of Housing First with some of the first services to become operational as Housing First started to be introduced across the UK.²⁶ This meant that Crisis Housing First had to find a place in existing homelessness strategies and existing practices.

In terms of delivery, and the coaches' relationships with individuals, the journey towards being a consistently high-fidelity service could be seen clearly over the course of the evaluation period. The evaluation team observed a fidelity 'journey' in both services and within Crisis as an organisation.

In year 1 there was a focus on principles, and how to deliver them; it was clear from conversations with the teams and the paperwork reviewed that they were spending a lot of time discussing the principles and how to implement them. There was a sense that

securing accommodation quickly was critical to a high-fidelity service, and frustration and anxiety by teams where this was not possible.

In year 2, the teams had settled in to delivering HF support and were more confident about describing and demonstrating the principles; though we found that a more traditional service focus on tasks, risks and behaviour change had crept into some of the records. As services matured, it was clear that they were becoming more confident about when to actively engage and when to ease off because the time was not right for the person. Policies and processes to manage case closure, including when members received longer custodial sentences were developed. In year 2, the evaluation focused on the organisational context and impact, and here there was evidence of Crisis reflecting on how HF fitted into the organisation.

By year 3, some of the issues in year 2 were resolved; the language had largely reverted to being strengths based and framed from the perspective of the person. In year 3, the evaluation focused on trying to capture feedback about the service from external

24 Alma Economics (2021) *Expenditure on homelessness services in Newcastle* (Crisis/ Newcastle City Council)

24 Allen, M.; Benjaminsen, L.; O'Sullivan, E. and Pleace, N. (2020) *Ending Homelessness in Denmark, Finland and Ireland* Bristol: Policy Press.

26 Bretherton, J. and Pleace, N. (2015) *Housing First in England: An Evaluation of Nine Services* York: University of York.

operational professionals; whilst this was more challenging in London, we heard positive feedback in relation to partnership working for both services. However, influencing policies, processes, culture and level of resource in these wider systems is a much larger task which takes a different, more strategic focus, and can take years to change.

Coaches have worked tirelessly to achieve results for individual members and we heard many examples of the impact which this has had on members' lives:

“If it wasn’t for these I do not know where I’d be. Well I do know, I’d either be dead or on the streets or having to do things that I didn’t want to do...you know what I mean? I wouldn’t be here now. It’s saved my life. These guys are everything. They cared, they helped. No one’s ever cared like that”.

MSC story, London member

However, members' stories and case studies remind us that many people with lengthy histories of homelessness and trauma do not follow a linear 'recovery' model, even with stable housing and person-centred support. Some have serious physical health and care needs which may deteriorate over time, some are clear that they will continue using drugs; exploitation by others, mental health episodes, periods of imprisonment or overdose are all possible. 'Stickable' ongoing support is therefore critical; making the case that the current lack of continuity of care within public systems is ineffective in the long run for people with multiple and compound needs.

8. Key messages from the evaluation

Needs and risks

Given the very high level of needs and risks in Housing First services, the sector should continue to build research and practice evidence about which groups Housing First interventions are most suitable for, whether and where there are limitations to this, and which models are needed to manage higher level needs and risks.

Where Housing First is managing complex cases with high safeguarding risks and complex mental capacity issues, clinical supervision, ongoing workforce development and access to statutory social work input are critical.

There is a case for improved salaries across the Housing First sector, given the skills needed to manage cases of this complexity and the importance of staff retention to enable continuity of relationships as highlighted by this evaluation.

Access to housing

The evaluation has highlighted the benefits of (ideally in-team) dedicated housing procurement resource, both to build relationships with landlords and to promote the separation of housing and support which is part of a high-fidelity service.

Learning from both services suggests the need for significant lead-in time and resource in advance of launching a Housing First service to build relationships and negotiate the details of how partnerships with landlords will work in practice.

Given that Housing First services are increasingly finding themselves trying to maintain engagement prior to an offer of a settled tenancy and/or managing moves between tenancies, budgets for hotel/ temporary accommodation procurement should be built into new Housing First models wherever possible. A period of overlap where people are receiving both Housing First support and supported housing or temporary accommodation should be included when modelling costs.

Geographical extent

There is learning from Crisis about the optimum geographical coverage for a Housing First service: there are clear advantages to not being restricted to local authority boundaries so as to maximise the opportunities to meet people's housing preferences. However, if the geographical spread becomes too large, there is a negative impact on the responsiveness of the service, and the need to build multi-agency relationships across administrative boundaries.

Tenancy sustainment consensus

The evaluation encountered variation in the interpretation of tenancy sustainment. A regional or national conversation about some of the grey areas around a consistent and transparent approach would be of benefit.

9. Recommendations for Crisis

The evaluation has produced a full report focusing on findings and recommendations including a focus on:

- Working with very high levels of need and risks
- Working within the persistent challenges of accessing suitable housing in the UK context
- Effective case recording specific to Housing First
- Policy and strategic influence.

Appendix: Tenancy sustainment definitions and methods

Grey areas in relation to measuring tenancy sustainment in the Housing First literature include:

- Whether to include 'suitable temporary accommodation (e.g., where leased from a private or social landlord) – Crisis does not include this as a 'Home' tenancy.
- Where some people have had more than one Home tenancy, whether to measure the proportion of tenancies which were sustained or the number of people who sustained a tenancy. We have counted people, but the Scottish and Welsh national Housing First programmes report on tenancies.
- Under what circumstances a managed move between tenancies should be classed as a continuous tenancy. We have counted the following as a continuous tenancy:
 - Where a member moves from one 'Home' tenancy to another without a gap in dates;
 - Where a member moves from a 'Home' tenancy, has a period in temporary accommodation and then moves into another 'Home tenancy' within the evaluation period without a gap in dates; or
 - Where a member goes into custody, or spends a period in another setting but the Home tenancy runs in parallel and remains open for them on release/when they leave the other setting.

We have **not** classed as continuous tenancy situations where a Home tenancy has come to an end and the member has then moved into Core Homelessness, including:

- Periods of rough sleeping;
- Multiple moves between core homelessness settings, and this is not resolved (i.e. another Home tenancy is not secured) at the end of the evaluation period.
- How to account for the ending of Housing First support, e.g., due to death, relocation, stepping down of support or disengagement. Excluding people who died in tenancies from the denominator is standard in Scotland and Wales; in Wales, cases closed for positive reasons are assumed to have sustained. We have taken this approach in calculating the figures for benchmarking.

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