

# Bristol Housing First: key learning





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Key learning:

## Executive summary

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### Housing First in Bristol

Housing First is an evidence-based, cost effective approach for those with the most complex needs. The programme *'ends homelessness for 70-90% of people'* and *'leads to improvements in health and wellbeing and reduces ineffective contact with costly public services'* (1). Housing First provides non-conditional access to housing and an offer of permanent, person-centred support.

Housing First contributes to the range of housing provision offered in Bristol, providing a unique, stable route out of homelessness for some individuals who have been homeless for many years. The model can be used for a range of priority groups including homeless individuals who face multiple disadvantage; prison leavers; and people with serious mental health needs.

### What is this report?

This report highlights learning from Bristol Housing First through the experiences of staff and including the perspectives of clients. It gives an overview of the benefits, the importance of maintaining high fidelity to the Housing First model (2) and examines challenges to implementation. The local context is explored further in an evaluation report produced by the University of the West of England.

### Who are our clients?

The Bristol Housing First team has worked with 40 clients to date. The team works with people who face severe and multiple disadvantage and have usually been homeless for five years or more.

Due to the nature of clients' lives it is hard to provide accurate, verified information on clients' circumstances prior to joining Housing First. Data about historic housing situations is available for 14 of the 40 clients and show that:

Clients had been homeless for between  
**4 and 20 years\***  
 prior to joining Housing First  
*\*no fixed abode, rough sleeping, in prison or direct access hostels*

There is also strong anecdotal evidence from staff and other professionals across the system. Staff report that some Housing First clients have:

**"...been on the street for 30 years or more."**

As some clients *"have had no tenancies for 20-30 years"*, it is an enormous achievement for individuals to remain in stable housing for 12 months.

**75%**  
 of clients have been  
**housed through the  
 project so far**

**100%**  
 of clients were experiencing a  
**complexity of disadvantages**  
 when they started with Housing First  
*involving at least two areas including homelessness, mental health  
 needs, contact with the criminal justice system or substance misuse.*

**55%**  
 of clients have been  
**housed for over  
 12 months**



**75%**  
of clients were  
**facing multiple disadvantages  
across all areas**  
when they started with Housing First  
*homelessness, mental health, contact with the criminal*

Notes: Statistics in this report are based on the total number of clients (40) who have been recruited over the length of the programme. There are currently (April 2021) 31 clients involved with Bristol Housing First, of which 97% (30) are housed within the programme. For a breakdown of client housing situations at the start of their journeys with Housing First, see appendix 1. Reasons for clients withdrawing from Housing First are shown in appendix 2.

## What have we learned?

Our key learning has been grouped under five headings:

### 1. Person-centred support

**Relationships:** For people who are isolated, relationships are the way out: *“relationships start one person at a time”*.

**Time:** Allow clients and workers to have unstructured time to build a relationship.

**New connections:** Don't ask clients to develop too many new relationships at once.

**Choice:** Offer clients the right amount of choice and *“break it down into individual bits of decision-making”*.

**“I got introduced to Michael at Housing First.**

**Michael's a quiet guy but he is patient, and he wouldn't accept failure.**

**Eventually he got me in my flat.”**

*– Housing First client*

**“I got housed much faster than expected. I feel like I had some choice. I feel safer now.”**

*– Housing First client*

### 2. Housing provision and client matching

**Housing provider strategic support:** ensure housing providers can commit adequate staff time and resources.

**Consistent, regular housing offers:** reliable offers of housing are essential to keep clients engaged.

**Appropriate referrals:** ensure referral agencies fully understand the context and role of Housing First.

**Effective timing:** work with clients at a point when they can understand and engage with the offer.

**Specific client groups:** ensure the needs of various client groups are considered. Notable groups that have emerged during Bristol Housing First include:

- **Women:** encourage services to refer women clients to Housing First. Be aware of the particular challenges for women in engaging with offers or support.
- **Autism:** people with an autism spectrum condition could particularly benefit from the Housing First model.
- **Prison leavers:** Housing First can be effective in helping to break cycles of short sentencing and prison recall for people who have had criminal justice involvement.



### 3. Team culture

**Staff recruitment:** recruit skilled and experienced individuals who share the values, ethos, and principles of the Housing First approach.

**Staff retention:** ensure staff are adequately valued and supported in their roles.

**Diverse, specialist staff team:** consider having roles which hold specialisms. Consider recruiting other healthcare professionals (eg occupational therapists) into the team.

**Supervision and reflective practice:** essential for supporting and retaining staff and for providing person-centred, psychologically informed support to clients. Access to a team psychologist is invaluable.

**Housing First forums:** essential for creating a network of support, learning opportunities and for upholding fidelity to the Housing First model.

**“I wanted to sort everything out one step at a time, starting with my housing... do it in my order. You helped me with this. Now I can look at other things.”**

– *Housing First client*

**“The workers are great and know what they’re doing.**

**You need a certain way of thinking to understand and support someone who’s been through what we’ve been through... and a big heart. We can be hard work at times I know!”**

– *Housing First client*

### 4. Partnership work

**Strong cross-sector professional relationships:** result in better client outcomes.

**Formalise key professional relationships:** where possible, build Housing First liaison into job roles in services across the sector.

**Use My Team Around Me<sup>1</sup> approach in Housing First:** to ensure that the person’s needs are met and that their housing is a springboard to address all needs and open up opportunities.

**Sector-wide capacity:** professionals need time to take a trauma-informed, person-centred approach.

**Trauma-informed care training for housing provider workforce:** Staff can be supported to understand client experiences and work more effectively with Housing First clients. Through this, clients are more likely to be able to remain in their tenancies or continue to be housed in alternative appropriate accommodation.

**Appoint trauma-informed care champions within housing organisations:** to support integration of the approach, and to align with the current system-wide direction of travel.

### 5. Strategic considerations

**Long-term funding commitments:** essential if the project is to adhere to the evidence-based key principles of Housing First.

**Part of a portfolio of housing:** Housing First can be most effective when it is part of a wide, diverse provision of housing options.

**Share learning:** to ensure that the resource of Housing First is used most effectively.

**Share data:** build relationships with agencies across the system so that client journeys can be tracked more effectively.

**Client voice:** consider ways in which the client voice can be accurately represented in service design and delivery.

**Learn from Golden Key COVID-19 response:** learning from this may be useful in the future development of Bristol Housing First.

**“We went through the hostel system over and over... being around other drinkers and users was hard work... we finally feel happy and safe for the first time.”**

– *Housing First client*

<sup>1</sup> *My Team Around Me: for further information refer to Box 1, p.16 of the main report*



## Bristol Housing First

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Golden Key launched the Bristol Housing First pilot in 2018 in partnership with Bristol City Council, Second Step, LiveWest and other local housing providers<sup>1</sup>. The pilot provides homes to people who struggle to follow traditional homelessness pathways. Individuals are given rapid access to self-contained housing rather than having to prove that they are “tenancy ready”. Once housed, they are provided with intense wrap-around support to enable them to manage and sustain their tenancy.

This report explores the experiences of the Bristol Housing First team and shares key learning from the project.

## Background

Housing First is an evidence-based, internationally implemented model based on **seven key principles** (3):

1. People have a right to a home
2. Flexible support is provided for as long as it is needed
3. Housing and support are separated
4. Individuals have choice and control
5. An active engagement approach is used
6. The service is based on people’s strengths, goals and aspirations
7. A harm reduction approach is used

Research shows that projects which adhere more closely to these principles are most effective at supporting individuals (2).

## Introduction

The Bristol pilot aims to hold high fidelity to the Housing First model. The team works with people who face severe and multiple disadvantage and who have been homeless for five years or more. Staff have small caseloads (a maximum of seven clients per worker) and prioritise relationship-building and partnership working.

Bristol Housing First shares resources, expertise and culture with Golden Key’s service coordinator team (SCT). The SCT holds a wealth of knowledge about working with clients who face multiple disadvantage, gained through a reflective learning environment. The working culture is centred around trauma-informed care, psychologically informed environments (4) and a mentalisation-based approach. Bristol’s Housing First team shares this ethos and approach.

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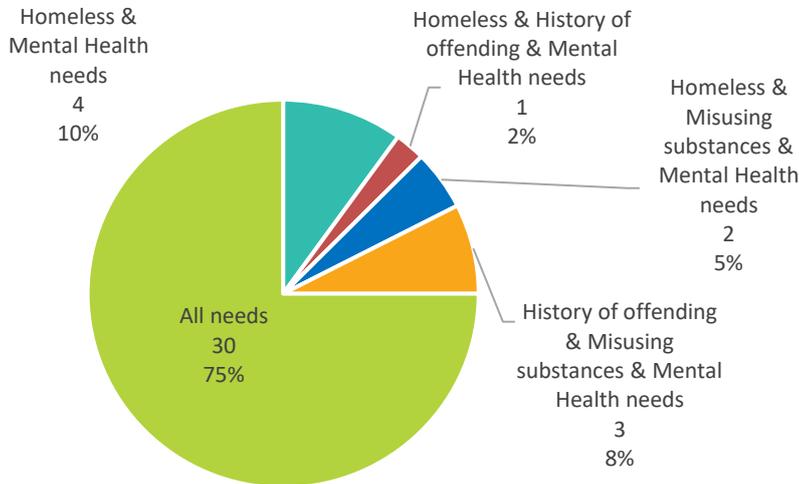
<sup>1</sup> Curo Housing Association, Solon South West Housing Association, Sovereign Housing, Abri, United Communities.



## Client cohort

All 40 Bristol Housing First clients face multiple disadvantages.<sup>2</sup> The following illustrations highlight this and some of the wider demographics of the Bristol cohort to date.

Fig. 1: multiple disadvantages within Bristol Housing First client population

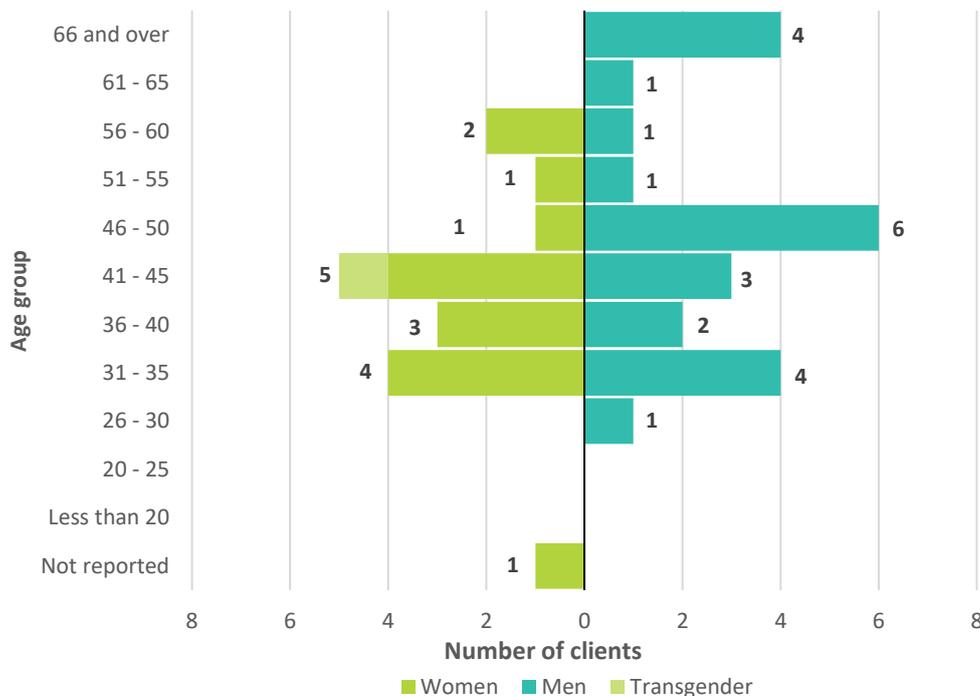


Source: Golden Key based on Bristol Housing First data recorded in the INFORM system.

Notes: "All needs" recorded in the INFORM system are homelessness, with a history of offending, mental health needs and substance misuse.

- Three quarters (75%, 30) of clients experienced four types of needs at the start of engagement with the project – homelessness, a history of offending, substance misuse and mental health needs.

Fig.2: Gender and age groups of Bristol Housing First clients



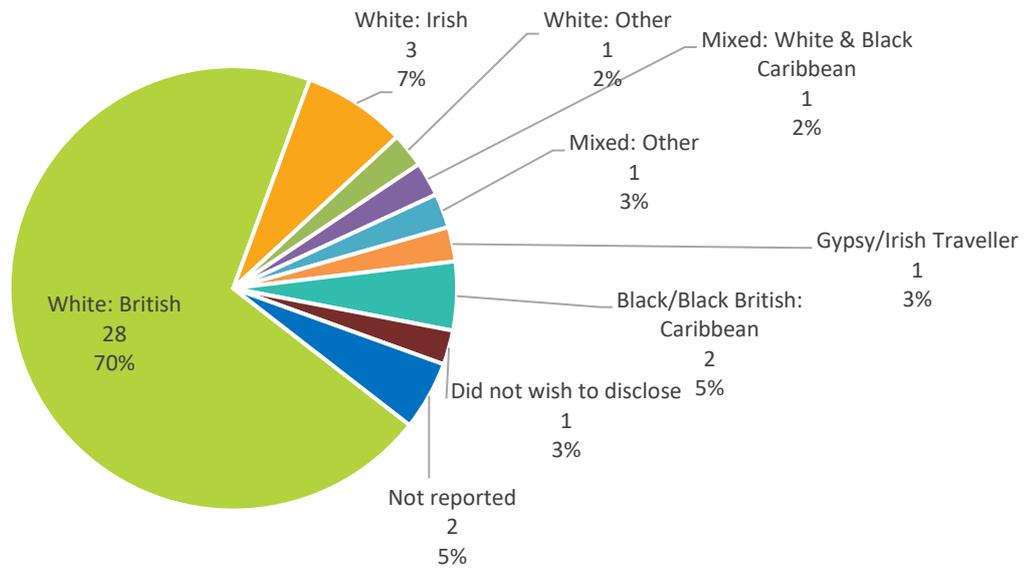
Source: Golden Key based on Bristol Housing First data recorded in the INFORM system.

Notes: The chart shows data of 40 clients: 58% identified as men and 42% as women. The transgender client identified as a transgender woman.

<sup>2</sup> Golden Key client data as of 26 April 2021



Fig. 3: Ethnic group of clients supported by Bristol Housing First



Source: Golden Key based on Bristol Housing First data recorded in the INFORM system.

The demographic profile of the Housing First cohort reflects the approach taken to building the caseload. The team decided to only take referrals from homelessness outreach teams and, within that group, to identify and support those most in need. Additional factors (e.g. gender, ethnicity) were not taken into consideration.

## Sources

This report has been compiled from internal documents and interviews with staff and demonstrates learning across the areas of Housing First principles. Information was drawn from:

1. Housing First learning log
2. Housing First Bristol model: keys to success
3. System change activity logs and reports
4. Interviews with staff



## Areas of key learning

A thematic analysis of the sources was conducted and key learning from the programme has been grouped into the following themes, which will be discussed in more detail below:

1. Person-centred support
2. Housing provision and client matching
3. Team culture
4. Partnership work
5. Strategic considerations

“

It's just that initial love.

These are traumatised, rejected, and abandoned by society, by their parents and schools and because of that they've rejected and abandoned themselves, broken people.

Most services don't want to work with them, and most services say to us 'you're not going to be able to do anything'.

”

**Housing First support worker**



## 1. Person-centred support

Bristol Housing First works with clients who are often rejected by society and find it difficult or impossible to access services or support. Many clients have a complex history of trauma which impacts their ability to develop relationships, so it can take a long time to engage with workers and build trust. Housing First has provided time for staff and clients to “develop a shared language” without pressures of deadlines or specific goals. Staff appreciate having time to be compassionate: *“I’ve found a new way of being professional but more human.”*

Building these effective relationships with clients has been essential. The team’s trauma-informed approach has included weekly formulations and meetings, which give staff opportunity to share information and work together to support clients. However, many clients find it hard to tolerate multiple relationships, so each individual has a named key worker. The team has learned that it is better when clients are not expected to make too many new relationships at once with other professionals.

Consistent, flexible support, tailored to each client’s needs, is essential in building relationships. This person-centred approach provides opportunity for clients to feel valued, and team members have observed unexpected benefits: clients cancel appointments less once they realise that the worker is consistent and reliable.

Housing First staff learned from the experiences of Golden Key’s COVID-19 emergency support accommodation. The emergency accommodation team observed that sometimes there was a crisis in a client’s life which led to loss of tenancy. Approaching these situations as support opportunities rather than taking punitive action resulted in better client outcomes. This is reflected in the national Housing First fidelity guidance (2) which states that *‘loss of housing should be expected and planned for. It should be considered as an opportunity for learning rather than failure.’*

Linking to

### Housing First Key Principle 4: Individuals have choice and control

Ensuring clients have choice and control is integral to the Housing First approach. This includes making sure they are involved in every step of the journey – including the process of setting up a home.

Bristol staff *“had a rule within the team that when you moved in you would have a bed and a fridge and curtains on your first day and food. So that it didn’t feel like you were squatting or moving into an institutional building.”* It was important that the home was co-created and that clients felt a sense of ownership from the outset.

The team has learned effective ways to offer choice:

**“when you’ve had nothing, being offered a lot of things just seems like a barrier, it seems overwhelming.”**

Drawing on learning from local autism experts, the team broke down decisions into smaller choices which clients could address one at a time.

### 1.1 Key learning points

- **Relationships:** For people who are isolated, relationships are the way out: *“relationships start one person at a time”*.
- **Time:** Allow clients and workers unstructured time to build a relationship.
- **New connections:** Don’t ask clients to develop too many new relationships at once.
- **Choice:** Offer clients the right amount of choice and *“break it down into individual bits of decision-making”*.

### 1.2 CASE STUDY: the importance of trusted relationships

*Relationships can make the difference for someone in being able to engage with support in a crisis situation:*

*One Housing First client was “experiencing psychosis and not really knowing what was going on... the police were very helpful, the mental health teams were very helpful, because it could have gone the other way, he could have been seen to have committed a crime, and be a danger to the public, but actually it’s been seen that he’s ill and that he’s going to take some actions around that to help him feel better and he’s been given resources to do that.”*

*In this situation, the client was able to access support because “of him knowing and trusting a doctor, agreeing to take anti-psychotics... But I think most importantly his positive relationship with Michael [Housing First*



worker] - to be able to say to Michael 'I'm not well' and have Michael follow that journey and Michael say: 'Ok, the police are gonna come and check on you and it's gonna be ok and we're gonna still support you. But this is serious, and you need to take this seriously....'

"It's about the relationships and trust with key people and having someone alongside you while you're meeting new scary people, I suppose, because meeting strangers when you're experiencing delusions is frightening."

### 1.3 CASE STUDY: trauma-informed - a worker's perspective

"They've been left out...the underbelly of society, a lot of them. Suffered heinous child abuse, abuse from schools...and then it just rolls on. Prisons, have kids, kids get taken away, just more cement and more stuff on top of what they already feel. Just broken. And the trauma is just so deep and so strong that all they can really do is medicate because they don't know what else to do. But they don't even realise it's substance abuse and trauma.

"Now a lot of people say 'Send them to therapy, send them to rehab, get them to get to the root of the trauma'. Well that's all well and good and we can do that. But...quite often it really is just little steps like giving them somewhere to live. They are worthy to have a nice place to live with nice things in it. Even though all that stuff has gone on. Even though they might be just as much abusers just as much as being abused.

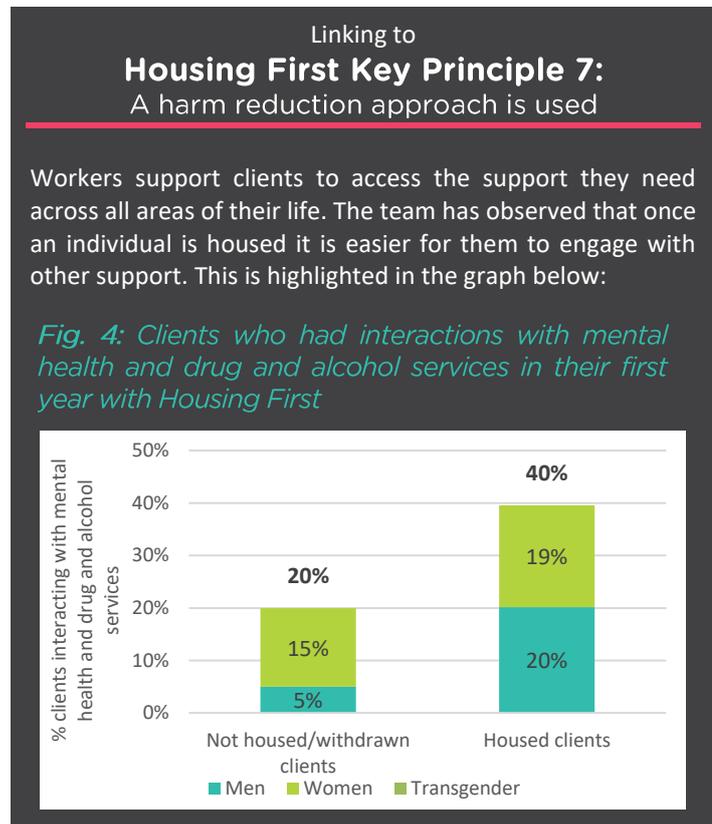
"If there's no love nowhere, they're never gonna be loved. Someone's gotta do something. And love's not about fluffy love, it's an action."

### 1.4 CASE STUDY: a housing provider's perspective

"One of the most powerful conversations I had with someone really early on in Housing First with someone [in a housing association], with a really senior manager, he said to me:

'I was thinking about [Housing First] and I wasn't really sure, and I thought about the cost, and I suddenly remembered that I worked for a housing association and that there's a social element of what I do and I wanted to remind myself of that. I came here because I wanted to offer people housing. That's why I'm in this role. And even though I'm far more senior than when I started, I need to remind myself that that's why I'm here. I'm here to give people opportunities and housing is crucial to that.'

"I was really touched by that, and I think it's something to remind ourselves. It's not just a way of saving money or getting people off the streets. One of the Housing First principles is that housing is a human right. I think that's the key thing. That's one of the things that drives me. It's not just about the cash, it's not just about the savings, it's about people having some respect and some dignity and some opportunity."





## 2. Housing provision and client matching

It is essential to match clients with appropriate housing. The team’s ability to do this depended on multiple factors, including:

- provision of appropriate housing stock (location, size, timing)
- capacity of housing provider staff
- suitable referrals
- appropriate matching of clients/housing
- considerations of different client groups

The size of each housing organisation affected consistency of provision: small housing providers had limited housing stock, competing priorities for that stock, and less time to prioritise Housing First. Larger organisations sometimes had internal communications challenges which slowed their ability to be nimble and responsive: *“If the organisation is too big it almost feels like it’s too sprawling and complicated and if it’s too small, they just don’t have capacity.”*

Linking to  
**Housing First Key Principle 1:**  
People have a right to a home

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Principle 1 runs through the centre of the Bristol Housing First team’s work. The support workers believe passionately in people’s right to a home, and the impact that stable housing can have on people’s lives:

**“We’re allowing people to have their natural right to be housed, to have a nice house, a homely house... it’s safe, it’s clean, the lot. And then they’re a success. Because they feel people care.”**

Housing First workers observed: *“[it was] a resource and a commitment issue...someone I knew who was really committed to what we did but just didn’t have enough time to keep on top of it every time, and then would get in a panic and give us loads of flats, often which weren’t appropriate, and give us nothing for months after that.”*

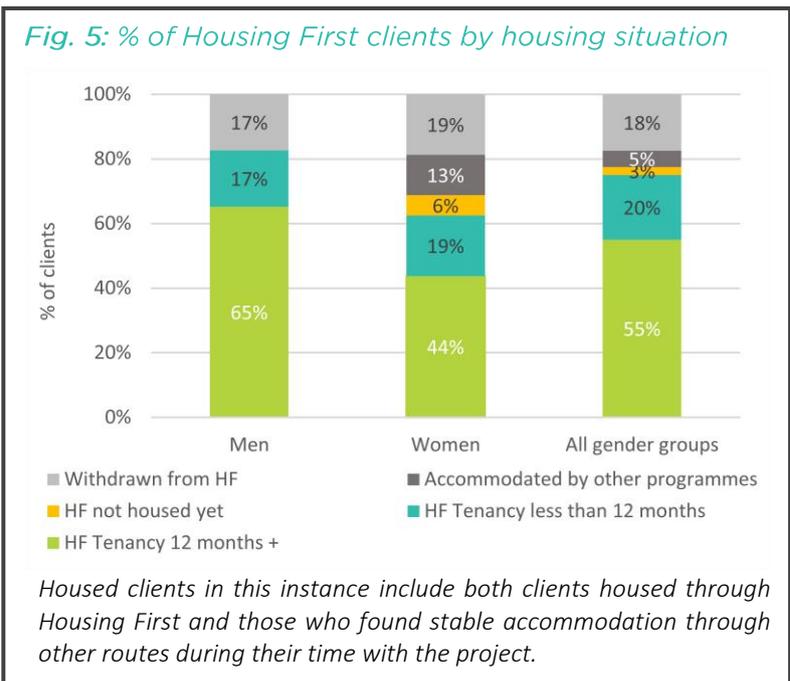
Because of these issues, housing provision sometimes felt reactive and not planned. If successful matches are to be made and sustained, it is important that housing providers are able to commit strategic support.

Initially Housing First was viewed as a *“safety net for people where they don’t have any other*

*housing options”*, but the team learned that this approach is not useful. It has been more effective to work with individuals at a point when they are able to engage with the offer. The team aims to work with clients whose *“mental and physical health issues weren’t so significant that it would be negligent to leave them in the flat by themselves”*.

The team needed to receive suitable referrals if they were to work with appropriate clients at the right time. This means that referral agencies need a good understanding of the programme and its expectations of clients. Having a joined-up approach across agencies supports this, and it takes time to get the placement right for both client and housing provider.

Despite these challenges, the team have housed most clients involved with the project. Over half of Housing First tenants have so far retained their tenancy for 12 months or more (Fig. 5). Of the clients who are not housed yet, around a fifth of these are due to custodial sentences, concerns around the individual’s ability to provide informed consent or poor mental health.





There were challenges observed by the team in relation to specific client groups. As illustrated in Fig. 5, women were often harder to house than men through the Housing First model.

The majority (67%) of women engaged with the project were housed as Housing First tenants, and 47% of these women have been Housing First tenants for 12 months or more. At the time of writing 13% of women are housed by different programmes or projects, being accommodated by adult social care services or are in temporary accommodation with Bristol City Council.

Staff observed that women often experienced more violence and exploitation: *"Most of them have been cuckooed<sup>3</sup> at least once. Many times, in very dramatic ways. So, you know, someone coming in [to their Housing First flat] with an offensive weapon - like a machete, typically, potentially a firearm..."*

There were also challenges arising from women who were still actively sex working: *"It is really dangerous, and it is natural for them to want to bring people back",* and it is *"such an immersive, risky, problematic lifestyle that it was very hard for the women to engage meaningfully with the flat offer, then the flat, and then our support... if you're still in that working kind of milieu, it's too much to give you, it's not a fair request"*.

Women are often expected to *"behave like victims"*, and there can be *"less tolerance for women who abuse drugs than there is for men who abuse drugs, and there's less tolerance for female violence than there is for male violence"*. This has been observed as a barrier to women generally in accessing wider services and support, and specifically as a barrier to being referred to the Housing First team.

In contrast to women's experiences, the Housing First team observed that clients who present with autistic traits have found the programme overwhelmingly effective. People on the autism spectrum *"typically are more likely to be rough sleeping than non-autistic people with the same life circumstances, because they struggle to understand the process of how to get housing, they struggle to understand their rights and they struggle to read other people's body language."*

The team found that *"Lots of the chaos that follows our other clients doesn't always follow our clients with autistic traits. [...] Once they've made a relationship with you and once you've got the tenancy goals and skills a habit then it's great. It's now a new life. Living in a flat with a tenancy. That's their new thing."* So far, the Housing First team has worked with three such clients: one client with an autism diagnosis and two clients with clear enough autistic traits that *"Bristol Autism Spectrum Service will offer an assessment if they are ever in the right place to engage with one"*. This is a higher prevalence of autism than in the general population and *"what's really interesting is how stable the tenancies are for those individuals"*.

Another group who can be well-supported by the Housing First model is clients who are leaving prison. One client in this situation said he was frustrated by *"not having anywhere to go when I left prison each time and no one doing anything about this. People talked a lot about my offending and where I couldn't go but not where I would actually live."* When asked why Housing First had helped, he said that it was because of: *"Having my own flat. I'm not going back to prison now I have my own home. Having peace of mind. Getting on with the rest of my life."*

## 2.1 Key learning points

- **Housing provider strategic support:** ensure providers can commit adequate staff time and resources.
- **Consistent, regular housing offers:** reliable offers of housing are essential to keep clients engaged.
- **Appropriate referrals:** ensure referral agencies fully understand the context and role of Housing First.
- **Effective timing:** work with clients at a point when they can understand and engage with the offer.
- **Specific client groups:** ensure the needs of various client groups are considered. Notable groups that have emerged during Bristol Housing First include:
  - **Women:** encourage services to refer women clients to Housing First. Be aware of the particular challenges for women in engaging with offers or support.
  - **Autism:** people with an autism spectrum condition could particularly benefit from the Housing First model.
  - **Prison leavers:** Housing First can be effective in helping to break cycles of short sentencing and prison recall for people who have had criminal justice involvement.

<sup>3</sup> Cuckooing: a practice where people take over an individual's home, using the property to facilitate exploitation



## 2.2 CASE STUDY: Effective housing provision

*Housing providers face challenges in their involvement with Housing First depending on their context and size. One organisation was able to provide the team with properties particularly effectively due to the commitment of staff and managers:*

*"They are now a really big organisation, but they put a huge amount of time and commitment into this, so it worked slightly differently. It was a huge problem - working with two already really busy people. But they really individually committed to it. And their senior managers also supported them - supported us and supported them - quite a lot, so we had a consistent message that 'this is really important to us, please give this your time'."*

*Consideration of Housing First was embedded into the organisation and, as a result, Housing First staff reported that work felt more planned.*

## 2.3 CASE STUDY: Client potential - a worker's perspective

*"I get excited a lot about possibilities. The thing I get most excited about is going to individuals who are outside society and judged by society and therefore judge themselves, and I go to them and I help bring them back into society as much as I can. And I get super-excited because society is meant to be for everyone, and we get to bring in this person who's no longer this outsider and then they get to contribute in their own way. And society's got better for it...."*

*"I think people think I'm doing it for them [but] part of me is like 'Yeah, but I'm also doing it for me' because I get to benefit from them - society doesn't benefit from people being outside it. It benefits from everyone being included and everyone having opportunities. And so yes, I get to go out and bring people in that people tell me will never be able to be part of society."*



### 3. Team culture

The Housing First team culture has developed from wider learning of the Golden Key programme and in particular the relationship with the Golden Key service coordinator team (SCT) (5).

The two staff teams have distinct roles: the SCT develops relationships with clients, coordinates services, and establishes partnerships to explore opportunities for system change. The Housing First team develops relationships with clients, matches individuals with appropriate accommodation, and provides support to help clients maintain their tenancies. There are many parallels, and one Housing First worker commented that *"The passion we have is the same. What we want is the same."*

SCT workers hold specialisms (eg. young people, criminal justice, physical health) and this has been an invaluable resource for Housing First workers: *"I feel supported by Golden Key... they give me time, they've all got time..."* Having access to this professional support, including supervision and reflective practice, has been essential: *"We are a small team, and we wouldn't have any of those things if we weren't linked to a bigger organisation".*

It has been important to make sure that Housing First is *"a positive place for people to work. Not only because it's difficult work, but to get a good calibre of person is hard because you're trying to get really experienced, really skilled support workers... and you're asking them to do pretty hard work. And when you're that skilled and you're that experienced then you typically have a lot of options... so you want to be attractive in order to get the right people."*

*Linking to*  
**Housing First Key Principle 2:**  
 Flexible support is provided for as long as it is needed

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**"What works is a flexible, person-centred, persistent approach. I think there's two things. Firstly around engagement with people upfront before the housing offer, and then once we've got them into the house."**

To ensure clients receive long-term consistent, flexible support, the team has processes for effectively sharing information. This means that, even if a client's key worker is not available, there is consistency of support.

**"The attitude is that a client is coordinated by one individual, but as a team we work with the clients and we share their successes and we share their failures as well and we bring in our expertise."**

*Linking to*  
**Housing First Key Principle 5:**  
 An active engagement approach is used

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Offering a practical, consistent and persistent approach to support provides a stable base from which clients can adjust to their new housing:

**"Always making sure - especially in the first few months - that their bills are sorted. Financially - making sure they've always got food, always got a phone, always got a top-up. Even if they blow their money..."**

**"We know they're gonna do that anyway at first. And then they stop doing it, it starts working. So they don't feel punished, they don't feel embarrassed, they don't feel the shame around it so much."**

Demonstrating from the outset - through actions as well as words - that there is an intention to provide consistent, reliable support:

**"It doesn't make a difference. It IS the difference."**

Weekly team meetings have supported staff, helping to avoid burnout and providing opportunities for sharing skills and experience. The team take a shared approach to risk and shared responsibility for decisions and clients. Alongside regular meetings, team members have been actively involved in the national Housing First practice forums.

The team is limited by its small size. Joint working is impractical in such a small team, and *"that's problematic... I think half my clients now can't be lone worked."*

Clinical supervision and reflective practice provide spaces to explore such challenges: supervision with the Golden Key psychologist *"is amazing"* and has provided psychological

expertise. Specific issues have been supported via supervision. For example, uncertainty around the long-term future of the project has caused anxiety amongst staff who wanted to keep this from impacting on their relationships with clients. Having a space to talk about this meant that clients had a better experience of their client-worker relationship.



Reflective practice groups helped staff to share their experiences. One team member observed: *“if I go regularly, it just helps with regulating emotions and putting things in perspective.”* Individuals appreciate that their team all *“understand it's an important part of the process of what we do...which is great, it's healthy.”*

Workers felt it was important to have a shared value system: supervision, reflective practice, team meetings and formulations all help to define this. Staff motivation is high because team members believe in the Housing First model: *“I am still really excited to be delivering this service because I know it works for some people...so that keeps me going.”*

### 3.1 Key learning points

- **Staff recruitment:** recruit skilled and experienced individuals who share the values, ethos, and principles of the Housing First approach.
- **Staff retention:** ensure staff are adequately valued and supported in their roles.
- **Diverse, specialist staff team:** consider having roles which hold specialisms. Consider recruiting other healthcare professionals (eg occupational therapists) into the team.
- **Supervision and reflective practice:** essential for supporting and retaining staff and for providing person-centred, psychologically informed support to clients. Access to a team psychologist is invaluable.
- **Housing First forums:** essential for creating a network of support, learning opportunities and for upholding fidelity to the Housing First model.

### 3.2 CASE STUDY: Team motivation

*“You work with people often who don't have anyone else, it is really relationally-based work, so there is an emotional demand on you, and with that comes all the pressures when things don't go well, and are you responsible? That's quite tough.”*

*“The best part of my job is when you say to someone 'I think we've found you a flat', and they look at you and often they just go 'fuck off', or 'I don't believe you'... I would put up with a lot of the other, more tough parts of my job, for that time when you say 'actually, we've found you a flat', and the person goes 'wow this is real, this is actually gonna happen, my life is gonna change'.”*

### 3.3 CASE STUDY: Importance of supervision and reflective practice

*“It's really important... I have clinical one-to-one supervision, I have clinical group supervision and I have reflective practice. It's important to my process, to everything I do. Especially how it affects me. And not just my clients. My family, my friends, everything. And vice versa - what's going on in my family, how does it affect my work?”*

### 3.4 CASE STUDY: Supervision provides clinical expertise

One staff member valued the expertise and extra insight provided by clinical supervision in helping to notice autistic traits in a client:

*“It was all through Michelle [clinical psychologist] going 'Could that person be autistic?' and I went 'No... well.. oh, yeah, actually.' This is someone who had been on the streets a long time and his behaviour which at times can seem a little bit bizarre because of the way he processes information and processes social interaction. It's always been seen as linked to alcohol misuse or homelessness or antisocial behaviour and actually he's just very, very bad at reading people.”*

*“If I hadn't gone 'Here is a client, my interaction with them is bizarre, I don't understand why' and her just going 'Oh, it could be this' and me going 'Oh, so it could' and then using that to change the way I work and then being like 'Yeah there we are'.”*

*“This also led on to this other client who I hope will have an assessment, I don't know if he'll have a diagnosis, and his difficulty - I just used this whole kind of way of supporting him as if he has autistic traits and that's been really helpful and he's kept his flat for over a year now.”*



## 4. Partnership work

Success has been achieved most effectively through collaborative, relational, and partnership-based approaches. *"I feel it is all about relationships. It's just like we work on with clients, it's the same with other professionals in the city. And with supporting each other."* (see Appendix 3: working with other agencies)

To build effective relationships with other services, the team has displayed a high level of professional empathy. Showing support for and considering the pressures faced by other professionals has helped to build these relationships. The team has found that it is useful to focus on common goals: *"The blame game doesn't work. Is there a problem? OK, there's a problem. Let's find out how we can turn it into a solution"*.

Relationships with housing workers tended to be more effective when there was more engagement from senior managers: *"LiveWest now are a really big organisation, but they put a huge amount of time and commitment into this. [The housing workers] were individually committed to [Housing First] and their senior managers also supported us and supported them quite a lot, so we had a consistent message: 'This is really important to us, please give this your time'."* Housing provision was less reactionary and more planned because Housing First was integrated into staff roles and capacity.

The team observed that positive professional relationships contribute to more effective partnerships, and this results in better client outcomes. Reflecting on a multi-disciplinary, cross-sector meeting, one worker commented: *"We got them all in together, and they all came: because we're building these relationships, actions happen. I have good relationships with the workers. 'You do that action, I'll do this.'. And do you know what, it was an amazing meeting. It was not prickly. They had their big bosses in the meeting... we're just support workers... and it was amazing. The communication - it was really good and healthy."*

Strong professional relationships between Housing First workers and other professionals have led to services engaging more in multi-disciplinary meetings. These relationships have had a positive impact on all agencies involved: *"That's the whole point, that's our goal, it's about relationship. [For example,] doctors and GPs, they're busy people, but you can see it actually makes their job easier [when we have positive working relationships]."*

The team are keen to take this MDT approach to the work, but they have been restricted because the wider system is not currently set up to work in this way. The My Team Around Me (MTAM) approach which is currently in development across the city will provide an opportunity to change this (see Box 1). Developing a way of working across the system that builds capacity for organisations to work more collaboratively will make a significant difference to the system's ability to transform individuals' lives.

One team observation which can inform the emerging MTAM approach is that over-reliance on key professional relationships may be a problem. This observation led to the question of how to formalise partnerships and connections: *"Once you have that relationship with that one person about Housing First, how [do] you actually embed that somehow into their role going forward or into the wider team, so if anything happens to them... how is that relationship continued?"*

### Box 1

#### Next steps in collaborative working:

#### My Team Around Me

The concept of having a named contact in organisations is currently being integrated into a larger piece of work within Bristol. The My Team Around Me (MTAM) project is developing from both the experiences of Bristol Housing First team and the wider learning of the Golden Key programme.

MTAM will be based on an integrated partnership approach - building on and extending multi-agency and multi-disciplinary team approaches to create bespoke, person-centred offers of support. This will be provided via the appointment of lead practitioner/coordinators and a virtual multi-disciplinary approach and will include a written commitment from agencies across the system.

It is intended that MTAM will support staff in services by providing protected time in their roles and the opportunity to share expertise and training so that organisations can better understand the needs and experiences of complex needs clients.



Various things have already helped to improve partnership working. For example: services have responded with more compassion and flexibility when they are provided with client information before appointments. Housing organisations who appoint a named contact for clients can also improve client outcomes and support.

Bristol Housing First team is aware of the perceptions of complex needs clients across the system. One team member said: *"Loads of people think like that in services: 'I wouldn't put them next door to me'... and I get it."* However, *"Lots of people in lots of different services want to house the clients that they call 'unhousable'. They are desperate to house those people and for those people to do well. It doesn't always look that way, but I assumed that I'd have a lot more of a battle"*.

Staff have found that, by modelling the things they want to see, people across the system respond in kind. *"It's a completely different frame of mind, in all ways. Whether it's about administration, the physical way we see our clients, our boundaries, our risks, everything. It's modelling a new way of working"*. And workers have observed that: *"It gives permission. Because they've seen what we're doing, and we are successful...it works... and they see that"*.

Bristol Housing First provided training in trauma-informed care (TIC) for housing provider staff. This had a positive impact on client outcomes and saw a reduction in evictions. Training attendees felt that it should be rolled out across the housing provider workforce and suggested that TIC champions should be appointed within housing organisation.

Housing First staff agreed: *"I'd like to roll out [TIC training] to healthcare, housing providers, as a wider idea - because it makes such a difference...because when people do understand that actually this person isn't choosing: they genuinely can't help it, they genuinely have no option other than to behave that way...I think that's really helpful."*

This training and shared learning will have the most impact when professionals have time and resources to work in a more person-centred way. Sharing this approach with others aligns with current system-wide aspirations to be trauma-informed and it can be built into the learning that will underpin the MTAM approach.

#### 4.1 Key learning points

- **Strong cross-sector professional relationships:** result in better client outcomes.
- **Formalise key professional relationships:** where possible, build Housing First liaison into job roles in services across the sector.
- **Use My Team Around Me Approach in Housing First:** to ensure that the person's needs are met and that their housing is a springboard to address all needs and open up opportunities.
- **Sector-wide capacity:** professionals need time to take a trauma-informed, person-centred approach.
- **TIC training for housing provider workforce:** Staff can be supported to understand client experiences and work more effectively with Housing First clients. Through this, clients are more likely to be able to remain in their tenancies or continue to be housed in alternative appropriate accommodation.
- **Appoint TIC champions within housing organisations:** to support the integration of the approach and to align with current system-wide direction of travel.

#### 4.2 CASE STUDY: Strong professional relationships

*"It is teaching me to work with clients in a more human basis and - all importantly in a way - other services and other professionals."*

*"The GP at Barton Hill surgery got one of her secretaries to ring me: 'Michael, she wants to organise a meeting, can we sort it out?'. We need A, B, C and D. First port of call me, always always, cos that's it, that's what we gotta do. And now we have a meeting with me, Abdi [Golden Key service coordinator], the new transition worker that's coming in, housing support officer from Bristol City Council, the GP, the shared care worker, and you know what, they'll all be here, they won't be not going."*

*"And I know that because I have those relationships. And through that [meeting] the doctor started having a relationship with [the other professionals]. And that works and then - it's positive isn't it. That's where the partnership is ...or we can go [the other way] and stay like that forever where no one talks to no one, because they're all after a bit of the pie."*



#### 4.3 CASE STUDY: Sharing team culture with the wider system

*"It's the same heart. And once the other services see how we are.... the more they see we how we work with the clients and the results they see, they're like, 'Wow'... the communication and friendship... professional, whatever you want to call it, with housing officers and social workers, changes - dynamic changes. And so the spirit, the heart spills out..."*

*"And I don't think it ends with their relationship with me at all. I think they've already got that in them. But because they work in a system where it's not allowed, they're not allowed to - but with me, and with other [HF staff] they can. It's more of a human caring relationship. "*

#### 4.4 CASE STUDY: Impact of TIC training for housing providers

*After housing provider staff completed trauma-informed care training they worked differently. Instead of responding to tenancy issues (such as anti-social behaviour) with rigid eviction processes, providers have been creative and supportive in managing these issues.*

*In one example: the housing provider was relocating a Housing First client to an alternative property where there were difficulties surrounding her anti-social behaviour. Instead of following eviction procedures, staff recognised the tenant's past trauma and sought different solutions. Housing provider staff spoke about their learning from Housing First's trauma-informed approach and the impact this had on their decision-making processes.*



## 5. Strategic considerations

Initially there was a perception that Housing First could be the solution for all clients perceived as the most difficult to house. However, *“Housing First is a specific thing... it’s really expensive, we have really small caseloads. You can’t house tens and tens of people because you’d bankrupt whoever was trying to fund it from a support perspective. So it needs to be a really joined-up approach with other agencies.”*

As mentioned above, referral agencies need a good understanding about the project. Wider than that, Housing First should be viewed as a resource to *“use strategically and not just as a safety net if you literally don’t know what else to do with a client.”*

*“The way we run the model - quite a principles-based, quite a pure, choice-based model - the way we do that is not a catch-all, it’s not the answer to every single person who needs to be housed. It works best as part of a portfolio of different housing options for different people in different places with different needs”.*

It is therefore important to share learning and to raise awareness of the opportunities and limitations of Housing First in Bristol. This can support and inform commissioning processes and help commissioners to reflect on how the resource could be used most effectively.

*“Without the structured support of Golden Key holding Housing First, the system might revert to previous ways of doing things and abandon the Housing First model and learning.”* Having the wider support of - and learning from - the Golden Key programme has helped the project to stay closely aligned to the Housing First principles and has been integral to the success of Bristol Housing First.

The team saw it as essential that the client’s voice was accurately represented in service design and delivery, although this is potentially difficult to achieve: *“The IF group [Independent Futures advisory group of people with lived experience (6)] were great but Housing First is quite a specific service. You’re talking about really long-term homeless people. Maybe those guys weren’t always reflected in the IF group...”*

There is an aspiration to share learning, but there is not currently enough quantitative data, so staff are keen to collect more robust data from across the system:

*“I wish I could go back in time and set up relationships with perhaps the hospital, with criminal justice, and say, ‘Hey, we’ve got these people, I don’t know how we’re going to do this, but can we get some data on this person, can we start recording data from this point forward?’ Because we know anecdotally that we housed one client who had been in prison 48 times. From the day we met him he had no further criminal justice formal involvement. But if I can’t back that up with data then it’s just an anecdote... we can’t evidence that from beforehand.”*

Gathering more client-specific data would help deepen understanding of the impact of Housing First on clients’ lives, which in turn could inform funding considerations for the project.

Data that is currently held by the team can be usefully used to explore the differences in client experience and patterns of behaviour both before and after clients are housed. To illustrate the case study above, fig. 6 shows the difference in contact that Bristol Housing First clients have with the criminal justice system once they are housed:

*Linking to*

**Housing First Key Principle 3:**  
Housing and support are separated

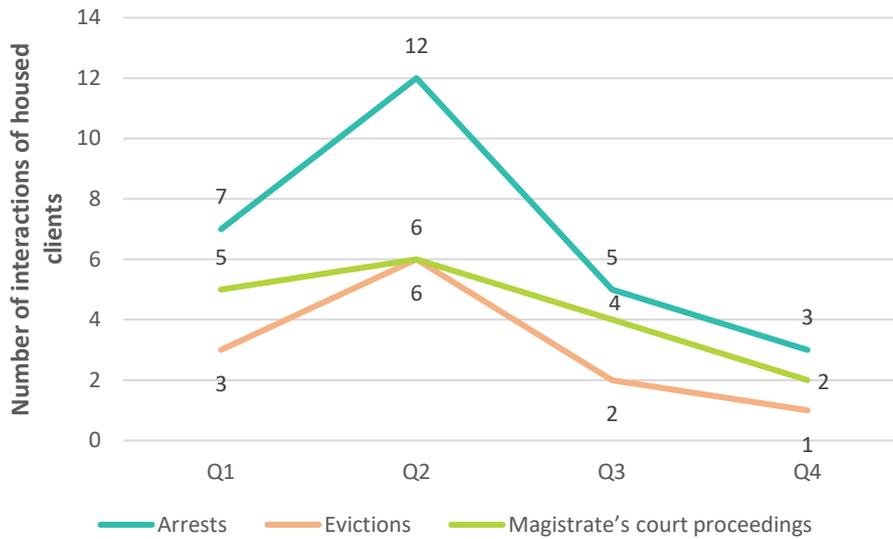
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Housing provision and support are offered separately. Relationships take time to develop and this needs to be built into project planning. Clients may not be able to engage with offers of housing until a relationship has developed – and this can take a long time:

**“If you’ve been on the street for 30 years as some of our clients have ... It’s not going to take a year to sort those guys’ needs out... it’s going to take about a year to get them to engage with the social care offer.”**



Fig.6: Number of arrests, evictions and magistrate’s court proceedings of housed clients in the first year of interaction with the Housing First.



Housing First needs to provide clients with longer-term commitments to be effective. Funding has a massive impact on the project’s ability to stay aligned with the evidence-based key principles of Housing First: *“What doesn't work is the fact that we are constrained to working with clients for one year - which goes against Housing First principles.”* The Bristol team has worked with clients across different phases of funding, and this has challenged the ability of the team to take a fully trauma-informed approach.

Linking to  
**Housing First Key Principle 6:**

Service is based on people’s strengths, goals and aspirations

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Small caseloads mean staff can take a more in-depth strengths-based approach. Workers have time to learn about individuals’ hopes and aspirations:

**“Housing First is different because we don’t just care about those individuals: we have the time to spend to understand them...”**

**“When you get to sit and talk to someone and listen to them, you get to hear how they view the world and how they view themselves.”**

As a consequence, clients feel heard and can be supported in a direction which is appropriate for them, focusing on their own goals for their future.

Therefore, long-term funding is essential to the success of the project, to the ability of Bristol Housing First to hold high fidelity to the key principles and to achieve positive client outcomes: *“I wouldn't start a project unless I knew we had longer-term funding. It's a longer-term model and we repeatedly got fairly short-term periods of funding. I would look for funding for at least two years now”.* A commitment of long-term funding is a national issue experienced across Housing First projects.

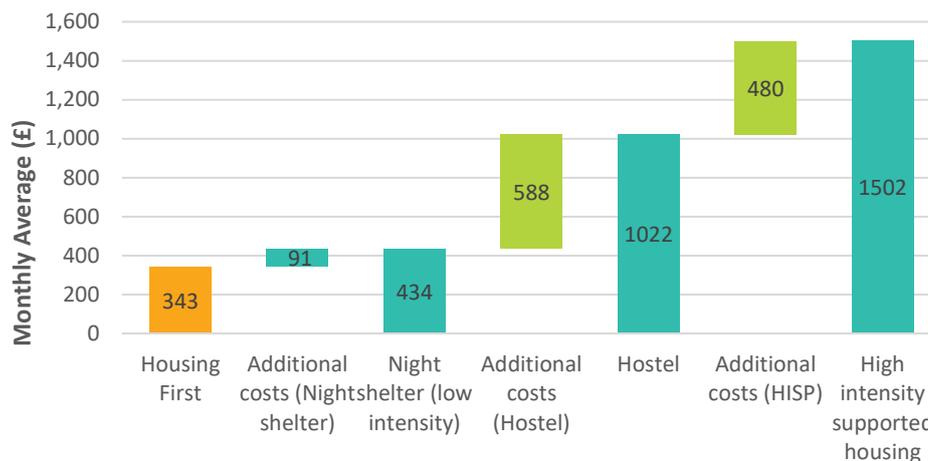
Support workers raised the idea of seeking funding for specific cohorts, eg: *“Can we look at funding for autistic people?”*. More evidence may be required if such specific funding is to be sought. It is clear that Housing First – at least initially - is not a cheap option. However, positive outcomes with some clients perceived as the most difficult to house demonstrate that this investment can save money and resources system-wide in the long-term.

The longer-term cost benefits of the programme have been demonstrated on a national level by Housing First England (see fig. 7). In their 2019 report (7), Pleace and Bretherton state that: *“While it can have lower operating costs than fixed-site services, Housing First is intended to end homelessness among people with high and complex*

*needs in a cost-effective way, not to reduce spending.”*. Housing First should be viewed as part of a portfolio of housing offers within the city for a specific cohort of long-term homeless, complex needs clients.



Fig.7: Average monthly cost of Housing First compared to other types of accommodation



Source: Golden Key based on Housing First England data. (7)

Notes: High intensity supported housing has high staff to service user ratio, 24/7 cover onsite, designed for people with high and complex needs.

## 5.1 Key learning points

- **Part of a portfolio of housing:** Housing First can be most effective when it is part of a wide, diverse provision of housing options.
- **Share learning:** to ensure that the resource of Housing First is used most effectively.
- **Share data:** build relationships with agencies across the system so that client journeys can be tracked more effectively.
- **Learn from Golden Key COVID-19 response:** learning from this may be useful in the future development of Bristol Housing First.
- **Long-term funding commitments:** this is essential if the project is to adhere to the evidence-based key principles of Housing First.
- **Client voice:** Consider ways in which the client voice can be accurately represented in service design and delivery.

## 5.2 CASE STUDY: using the resource of Housing First appropriately

*"I felt a lot of pressure at the start for us not to have any housing failures. And I wondered if we chased some people and some housing situations.... I thought, look, it doesn't work for everyone.*

*"If it isn't the right thing then let's just say it's not the right thing, let's close it down as neatly as possible, let's keep the person safe, make sure they've got somewhere to go to. Previously I would have seen this as a sort of defeat, but now I'm like it's actually acknowledging that it doesn't work for every single person. "*

## 5.3 CASE STUDY: a clear message across the city – the Bristol context

*Staff felt it was essential to convey a clear message about the role of Housing First in the city – in order to manage expectations and to encourage appropriate client referrals:*

*"We've been really lucky, particularly with the council. We've had some spectacular [housing-client matching] failures with the council. The council have been pretty pragmatic about that. But you could see how in a smaller city, if you were unlucky, you might burn through all your providers really fast if they all had really poor experiences and then weren't really sympathetic. There's something about having a clear message.*

*"One of the joys of it being a small city is that you only need one or two routes to disseminate quite a clear message to quite a wide group of people about what exactly we do and don't do. So I'd probably go back and revisit that now if I was doing it again and make it really clear - so you don't have everybody putting anyone they fancy forward. Or you don't have people chasing us saying 'What are you doing, aren't you supposed to be solving homelessness or something?'"*



## Summary / conclusion

Staff in services sometimes come to view particular clients - often those who are long-term rough sleepers with complex needs - as 'unhousable'. One Housing First worker observed: *"that's a word you use because you care deeply whether this person is housable or not, but you're really frustrated"*. Services are fatigued by seeing the same people go round the system. There is the potential for staff to think that *"Everything we offer to them they seem to refuse and are really angry towards me and I'm just trying to help. So I think they must be unhousable and unhelpable because my help's not working'."*

Housing First provides the opportunity for the system to take a different approach. This can be of direct benefit to some of these clients viewed as 'unhousable', and of indirect benefit to many more. Bristol Housing First has observed that the city is open to change, and that small things (eg individual professional relationships, trauma-informed training for housing staff) can grow and have a wide and lasting impact. There is potential for these small steps to evolve and transform the city's approach to housing provision, making it a more positive environment to work in and enabling more of our city's inhabitants to be housed in safe, appropriate accommodation.

*"I think it's an attitude. Systems are built up from practice, from opinions, from beliefs, from all sorts of things...a whole combination will make a system...from evidence, experience, whatever. But for me, it's an attitude. A system where people are allowed to be more involved in decision-making...it's the outlook and how we work with people. How do we come together and work with individual people who need help?"*

“

Maybe if we tried to listen to that person  
and we tried these other things then  
maybe that person could be helped.

”

*Housing First support worker*



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“ **When I got told about Housing First,  
I knew there was an end in sight.**

**It gave me hope.**

**When you have a home, it takes the  
worries out of the way, and you can  
move forward.**

**That’s all it is.**



*Housing First client*

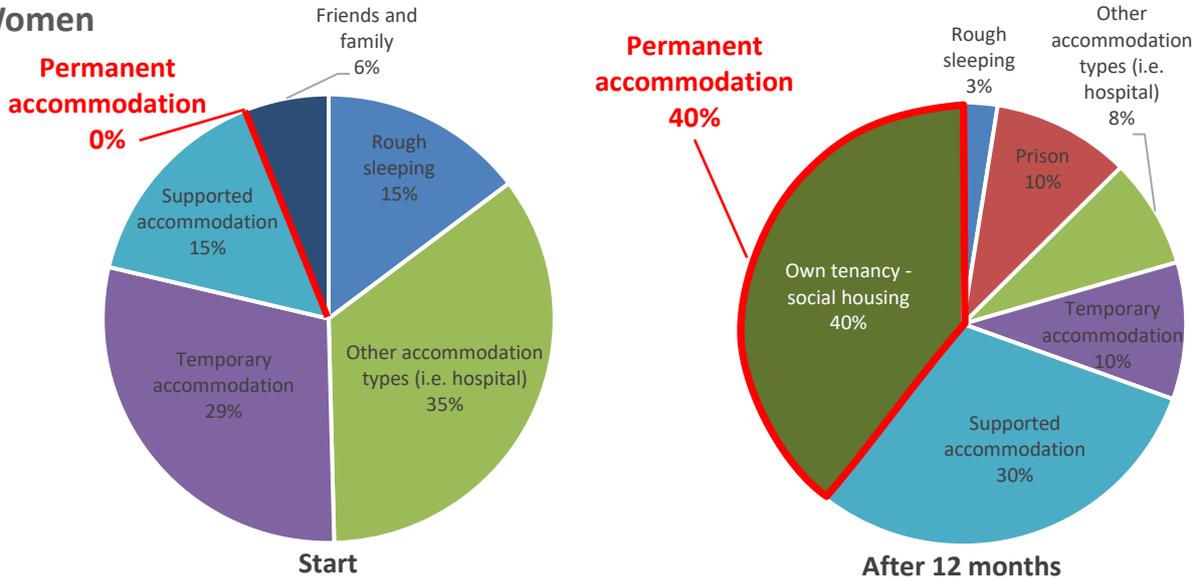


## Appendices

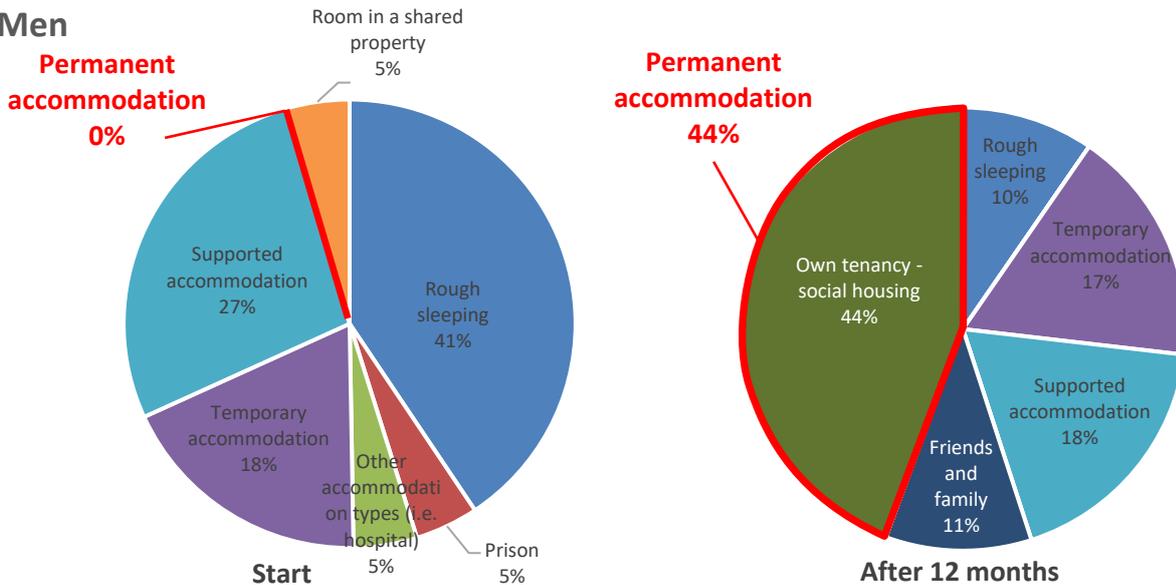
### Appendix 1: Client housing at the start and after 12 months

% of Housing First clients' time spent in different types of accommodation by gender

#### Women



#### Men



Source: Golden Key based on Bristol Housing First data recorded in the INFORM system.

Notes: The analysis captures the situation of the clients at the start of their interaction with Housing First (Q1) and after 12 months (Q5). These figures only include clients who have reported data in Q1 and Q5.

- At the beginning of the interaction with the project (first quarter), both men and women spent no time in permanent accommodation. Men spent the largest percentage of their time in rough sleeping (41%), while women spent the largest share of their time in other types of accommodation such as hospitals (35%).

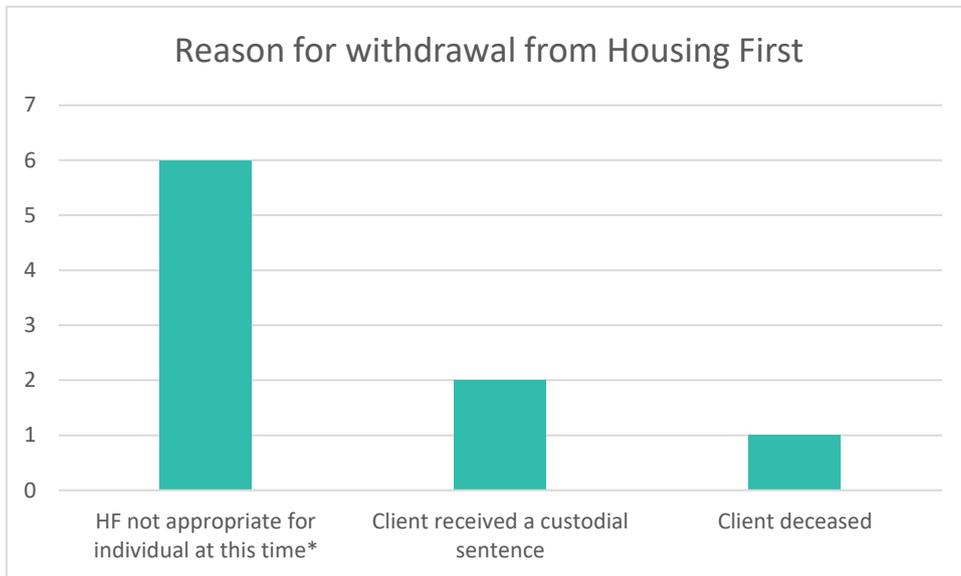
After 12 months, men spent 44% of their time in permanent housing, while women spent 40% of their time in this type of accommodation.

Men reduced the time spent rough sleeping from 41% to only 10% (the rest of men's time spent outside permanent accommodation was in temporary housing or supported accommodation). Women also reduced time either rough sleeping or staying with friends and family from 21% to 3%.



## Appendix 2: Reasons for withdrawal from Housing First

Of the 40 clients recruited into Bristol Housing First, 31 are still engaged and 9 have withdrawn from the programme, for the following reasons:



Source: Golden Key based on Bristol Housing First data recorded in the INFORM system.

Notes: \*Reasons included: concerns about informed consent/poor mental health, housed as a couple but relationship broke down, client chose to withdraw.



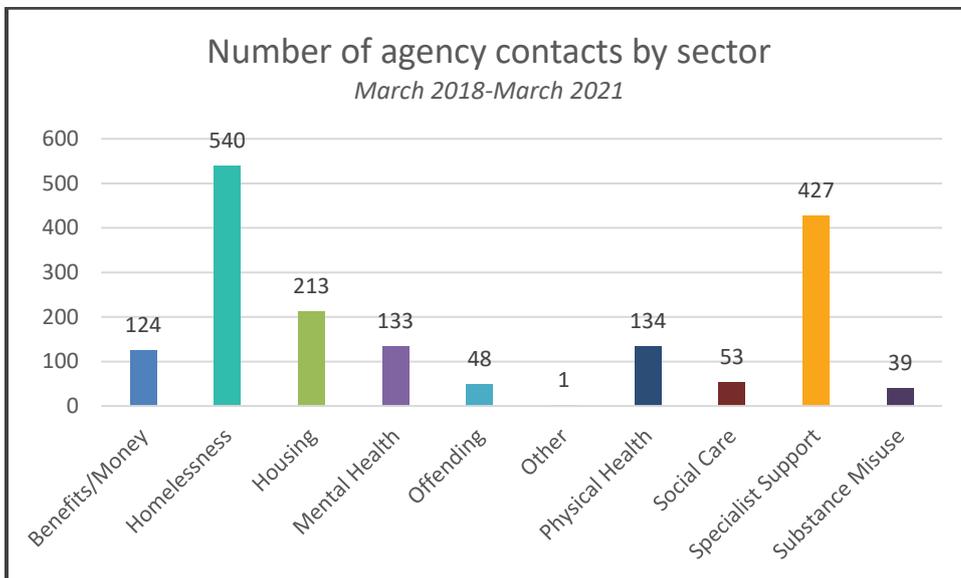
### Appendix 3: Working with other agencies

Working collaboratively and encouraging partnership approaches to client support has been at the heart of Bristol Housing First team’s approach. The team liaises with other organisations (either with clients or on clients’ behalf) on a regular basis:

In one three-month period, Bristol Housing First worked with

# 34

different organisations from across the city



Source: Golden Key based on Bristol Housing First data recorded in the INFORM system.

Since the beginning of the project there have been

# 1712 contacts

between the Bristol Housing First team and agencies across the city.

(March 2018 - March 2021)