



NSW Homelessness Strategy

2018–2023

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A message from the Minister



I am delighted to present the NSW Government's Homelessness Strategy 2018–2023. Our goal is that by working together with our non-government organisation partners and across government we will create a system that is able to prevent and respond more effectively to homelessness. Only by creating an effective system that recognises the complex nature of homelessness and responds holistically can we help break the cycle of disadvantage and support people to live happier more secure lives.

The Strategy sets the direction for the next five years, focusing on prevention responses that address the root causes of homelessness, and early intervention responses that will reduce the longer term impact of homelessness.

Homelessness is not just a housing problem. Every person experiencing homelessness has a different story – the causes of homelessness are complex and play out in different ways. For some people, experiencing homelessness is an isolated event; other people will cycle in and out of homelessness, unable to find and sustain housing for more than a temporary period.

The NSW Homelessness Strategy delivers a framework for action that enables agencies and services to identify vulnerability early, help manage the risk factors that make a person vulnerable, and reduce the complexity of the service system. For the first time, we have established accountability across government so that all agencies – including Family and Community Services, Health, Education, and Justice – share responsibility for preventing homelessness.

The NSW Government's 2018/19 Budget commits more than \$1 billion to homelessness services over the next four years to support new and existing initiatives, with \$61 million of new funding over four years to implement the NSW Homelessness Strategy.

We recognise that the system – government, and the private and community sectors – must collaborate more effectively to ensure people in need receive personalised, holistic and responsive services. We are taking steps to make the service system more integrated, and we will put people at the centre of the system.

The Strategy follows an intensive consultation process across NSW with hundreds of participants from a range of agencies and organisations, people with lived experience of homelessness, and people from groups who are at increased risk of homelessness. The experiences, themes and messages we heard have been developed into the NSW Homelessness Strategy.

Together we can intervene early to prevent homelessness, reduce chronic homelessness, and break the cycle of disadvantage.

A handwritten signature in black ink, appearing to read 'Pru Goward'.

PRU GOWARD

Minister for Family and Community Services

Minister for Social Housing

Minister for the Prevention of Domestic Violence and Sexual Assault

A framework for preventing homelessness

Our vision

On Census night in 2016, more than 37,000 people in NSW were experiencing homelessness.¹ Having a safe and secure home – something that most people take for granted – is out of reach for too many.

The NSW Homelessness Strategy sets out the NSW Government's plan for a comprehensive approach to prevent and improve the way we respond to homelessness. It is a framework for action that will enable government agencies, the non-government sector, and the community to collaborate and act to reduce the impact of homelessness on individuals, and improve outcomes for people and families. For the first time, we have established clear accountability across government so that all agencies and mainstream services (such as Family and Community Services, Health, Justice, and Education) share responsibility for preventing homelessness and increasing access to services for people experiencing or at risk of homelessness.

Absolute growth in homelessness over the past decade has been significant. On Census night in 2016, over 37,000 people were homeless in NSW – nearly 10,236 people or 37 per cent more than 2011. The number of people seeking assistance from specialist homelessness services (SHS) has also continued to increase. Between 2013/14 and 2016/17 alone, the number of people assisted increased by 43 per cent, up to 74,216.² In addition to those assisted by SHS, almost 25,000 households were provided temporary accommodation in 2016/17.³

An effective response to homelessness means creating a system that is able to intervene early and put people at the centre. It means giving people choice and restoring dignity. It means doing more of what we know works while looking for new ways to prevent homelessness. It means being able to deliver effective interventions at scale.

The NSW Government's 2018/19 Budget commits more than \$1 billion for homelessness services over the next four years to support new and existing initiatives.

That includes \$61 million of new funding over the next four years to implement the Homelessness Strategy, with more assertive outreach services for rough sleepers, strengthened risk assessment to address the underlying complexity behind each person's homelessness and more support to maintain a tenancy.

The new funding over four years includes:

- \$20 million for homelessness social impact investment
- \$10.6 million for sustaining tenancies supports
- \$9.1 million for additional transitional accommodation
- \$6.9 million for co-located homeless-health services
- \$6.2 million to expand Staying Home Leaving Violence to five new sites
- \$4.7 million for universal risk screening and supports
- \$3.8 million for assertive outreach to support rough sleepers

In addition to this investment \$1.1 billion has been allocated by the NSW Government to deliver the Social and Affordable Housing Fund that is delivering 3,400 new social and affordable housing dwellings with support over the next 25 years. We are also investing in social housing and the Communities Plus renewal program.

By creating an effective system that recognises the complex nature of homelessness and responds holistically, we will help break the cycle of disadvantage and support people to live safer, more stable and happier lives. We will continue to build the evidence about what works in preventing and reducing homelessness. We will drive systemic change that helps keep people at the centre of the response, provides them with choice, and supports them to access the help they need as soon as they need it.

Our vision is that by working together we will:

- Build a mainstream service system that is able to intervene early to prevent homelessness and break disadvantage
- Increase access to supports, including housing, that prevent homelessness and re-entry into homelessness
- Create an integrated, person-centred service system

How we got here

In 2016, we released the *Foundations for Change Discussion Paper* and sought the views of people, groups and organisations across NSW about the changes we need to make to the way we respond to homelessness in NSW.

Through this comprehensive state-wide consultation process, we received 120 written submissions from members of the community, non-government organisations, stakeholder representative groups, advocacy groups, government agencies and legal services. We brought together 430 participants from government and non-government agencies in 15 district consultations, helping us to map and understand regional differences in the experience of demand for homelessness support and service provision.

We also asked independent specialists to speak confidentially and openly with people with a lived experience of homelessness. Through these interviews and small group consultations, we heard the stories of people who had left prison, who had left domestic and family violence, who were sleeping rough, Aboriginal people, older people, and young people from across NSW.

The experiences, themes and messages we heard have been developed into the NSW Homelessness Strategy.

The Strategy builds on learnings from the *NSW Homelessness Action Plan 2009-2014* and *Going Home Staying Home*. It continues the shift from predominantly crisis-driven responses to prevention responses that address the contributing causes of homelessness, and early intervention responses that reduce chronic homelessness.

Scope of the Strategy

This Strategy recognises that homelessness is not just a housing problem. A person's pathway into homelessness is driven by the intersection of structural drivers, risk factors, and protective factors.

- **Structural drivers:** The structural drivers for homelessness include housing affordability, labour market forces, a reliance on income support, and intergenerational poverty.
- **Risk factors:** Individual risk factors include unemployment, financial stress, family breakdown, domestic and family violence, trauma, mental health issues, drug or alcohol dependence, and a history of contact with state institutions.
- **Protective factors:** Protective factors include employment, financial security, involvement in school or community, healthy family relationships, and access to and integration of services.

The NSW Government is currently implementing a range of reforms that will help address the structural drivers of homelessness, such as *Future Directions for Social Housing in NSW*.

This Strategy builds on these reforms, providing a new approach to identifying people at risk of homelessness and putting effective supports in place to reduce that risk. The Strategy prioritises more effective responses and services for people who are experiencing homelessness. And, importantly, it emphasises people over process – helping to build a system that is integrated and coordinated so that the person is at the centre of the response.

We have established three focus areas for delivering our new approach to homelessness:

Focus 1: Prevention and early intervention

Focus 2: Better access to support and services

Focus 3: An integrated, person-centred system

What we are building on

Because of the complex intersections between the risks and drivers of homelessness and protective factors, an effective homelessness system depends on individual service systems working effectively alone as well as working effectively together to provide integrated supports.

In order for this Strategy to be effective, it depends on and links to other state and Commonwealth services and systems. Access to Commonwealth income supports (including Commonwealth Rental Assistance, family supports and crisis payments), funding through the National Disability Insurance Scheme, primary health networks and specialist supports, an effective social housing system, and early intervention family supports are all critical to ensuring that we can work together to prevent and respond to homelessness.

The NSW Government is pursuing an ambitious reform agenda to deliver better services, protect vulnerable people, and improve social and economic outcomes for the people of NSW.

Reforms in family and community services, social housing, education, justice and mental health aim to shift those systems to person-centred service delivery with a greater focus on outcomes. These new approaches enable more flexible responses to the different needs of people to help them live more positive lives, reduce the need for crisis support, and break the cycle of disadvantage.

By building on current reforms we can ensure homelessness is recognised in key policy areas across the NSW Government.

Housing and homelessness

Reforms to the social housing and homelessness systems aim to increase the supply of social and affordable housing in NSW, improve access to services, and provide a wider range of supports that prevent crisis.

Future Directions for Social Housing in NSW aims to increase the supply of social housing in NSW through innovative programs. The Social and Affordable Housing Fund will increase access to 2,200 additional social and affordable homes in its first phase, and 1,200 homes in its second phase. *Communities Plus* will deliver up to 23,000 new and replacement social housing dwellings, 500 affordable housing dwellings, and up to 40,000 private housing dwellings.

We are also delivering a range of products that assist people to gain tenancies in the private rental market. This includes bond loans, advance rent, arrears assistance, private rental brokerage and Rent Choice subsidies. Rent Choice is a time limited private rental subsidy for up to three years and facilitates access to support services, including training and employment opportunities, to build capacity for independent living. Rent Choice products include Rent Choice Start Safely, Rent Choice Youth and Rent Choice Veterans.

Staying Home Leaving Violence supports people experiencing domestic violence to stay safely in their own home and is available in 27 locations across NSW.

In 2018/19 the NSW Government will spend over \$200 million to provide generalised *Specialist Homelessness Services*, including accommodation and a range of supports for people experiencing or at risk of homelessness. This includes the *Domestic Violence Response Enhancement* which ensures that women and children escaping domestic and family violence can access emergency accommodation and/or support 24 hours a day, 7 days a week where geographically possible.

The Homelessness Outreach Support Team (HOST) aims to provide immediate access to housing assessment and a rapid rehousing response into social housing for all eligible people willing to work with the Department of Family and Community Services (FACS) and support services. HOST delivers homelessness intensive outreach and regular outreach patrols across the inner city of Sydney, in partnership with homelessness services, local Council, Health and Police. FACS works with homelessness support providers and Health to wrap post-crisis support around clients who have been housed and need more sustained support.

Through the Supported Transition Engagement Program (STEP) the NSW Government is investing \$22 million over four years to provide support to people sleeping rough. This includes \$20.3 million to deliver 120 housing and support packages in the inner city of Sydney and regional NSW, and around \$1.7 million for additional post-crisis supports for people housed through FACS-led outreach activity.

The Premier's Priority to reduce youth homelessness aims to increase the proportion of young people who successfully move from specialist homelessness services to long-term accommodation to more than 34 per cent by 2019.

The current results against the target are that 31.3 per cent of young people (1,711 of 5,462) who presented alone to a specialist homelessness service from unstable accommodation achieved stable long-term accommodation in 2016-17. The priority focuses on prevention, improving support and increasing housing options.

The NSW Government has committed \$10 million per year over four years to the Premier's Youth Initiative which is piloting a new approach to support vulnerable young people leaving out-of-home care. They will be provided with a combination of personal advice, mentoring, support and accommodation to help them transition to independence.

Rent Choice Youth is available in targeted locations through funding of about \$4 million a year to support these young people to find a place to rent, get a lease and maintain it – with subsidised rent for up to three years tapered to promote independence. It also supports young people to find study and job opportunities so they will be able to afford the rent on their own.

The Aboriginal Housing Office is currently developing the *Aboriginal Housing Strategy* that will deliver locally-informed, evidence-based housing solutions for Aboriginal people and communities, delivered by Aboriginal providers.

Justice

The Department of Justice is rolling out the *Strategy to Reduce Reoffending*, which includes a focus on increasing reintegration outcomes by identifying a person's needs upon their entry to prison, and immediately planning for their exit.

The *Civil Justice Strategy* will set out a blueprint for a range of reforms that are designed to help people resolve common legal problems before they escalate into court and tribunal proceedings. Key actions that relate to housing include additional investment in community legal centres, which help vulnerable members of our community with common legal problems including tenancy, debt and domestic violence.

The *Civil Justice Strategy* will also explore how technology can be better used to facilitate early engagement and resolution of disputes, including by strengthening the position of the NSW Government's free legal information website, LawAccess NSW.

Domestic and family violence

The *NSW Domestic and Family Violence Blueprint for Reform 2016-2021: Safer Lives for Women, Men and Children* increases the focus on the need for prevention and early intervention to reduce demand for crisis and recovery services, and address the causes and symptoms of domestic and family violence (DFV).

Mental Health

Living Well: A Strategic Plan for Mental Health in NSW was launched in 2014. It aims to improve the mental health and wellbeing of people in the community and ensure that people with moderate to severe mental illness are supported to remain well within communities and lead their own recovery.

Disability

The *National Disability Insurance Scheme* (NDIS) provides all Australians under the age of 65 who have a permanent and significant disability with the reasonable and necessary supports they need to enjoy an ordinary life. The NDIS provides an unprecedented opportunity for people with disability to live more independently in housing of their choice with the services they need.

Education

Through *Supported Students, Successful Students*, the Department of Education is providing funding to help schools support vulnerable young people to help them develop their character and wellbeing, and stay engaged with learning.

Children, young people and families

The NSW Government is committed to improving the lives of vulnerable children, young people and their families with better laws, policies, systems and practices.

The *Premier's Youth Initiative* is piloting a new approach that supports vulnerable young people leaving out-of-home care (OOHC). Young people are being provided with a combination of personal advice, education and employment mentoring, transitional accommodation support and long-term accommodation to help them transition to independence.

Targeted Earlier Intervention reform provides an opportunity to review the current system to maximise the reach and impact of services. It is consolidating six existing early intervention programs into a single cohesive service system to improve people's experience, so that families and communities with the greatest needs can access services that maximise positive outcomes.

Their Futures Matter – a new approach to child protection and wellbeing in NSW sets out a whole of government, long-term approach to improve life outcomes for vulnerable children and families. Services will be evidence-based and delivered to meet individual need, with investment aligned to long-term outcomes.

Understanding the prevalence and impact of homelessness

Homelessness has significant and lasting impacts on individuals and families. It is related to poor health, higher rates of mental illness, and future employment problems, as well as more frequent use of health, justice and welfare services.⁴

For some people, experiencing homelessness is an isolated event – it happens once for a short time. Other people will cycle in and out of homelessness, unable to find and sustain housing for more than a temporary period.⁵

Children and young people

Young people can be particularly vulnerable to the risk of homelessness and the ongoing impacts it can have on future opportunities. The number of people aged 24 years or younger accessing SHS increased by 37 per cent between 2013/14 and 2016/17, totalling more than 36,000 in 2016/17 and representing nearly half of all SHS clients.⁶ On Census night in 2016, young people made up almost 19 per cent of the NSW general population but 24 per cent of the homeless population.⁷

Ninety per cent of young people experiencing homelessness have witnessed violence in their home, 60 per cent have been in OOHC, and 50 per cent have a reported mental health issue.⁸

Young people leaving OOH who left school in Year 9 or 10 are 32 per cent more likely to access SHS compared to those who completed Year 12.⁹

Children who experience homelessness have increased risk of long-term poverty, homelessness in adulthood, unemployment, and chronic ill-health.¹⁰ They are less likely to finish school than their peers,¹¹ and more likely to need health support and have involvement with the justice system compared to a young employed person.¹² Early school leavers are two and a half times more likely to be unemployed, earn lower wages, have poorer health, or be involved in criminal activities.¹³

Women and children leaving domestic and family violence

Domestic and family violence (DFV) is a leading cause of homelessness among women and children, with one third of people accessing SHS reporting experiencing DFV.¹⁴ Aboriginal and Torres Strait Islander women are over-represented in this group. Despite only making up 3.3 per cent of the national population, one quarter of people in Australia accessing SHS due to DFV identify as Aboriginal and Torres Strait Islander.¹⁵

Older people

There is a growing trend for people to become homeless in later life for the first time, particularly amongst women.¹⁶ More than 15 per cent of people experiencing homelessness are over the age of 55 and this figure is increasing.¹⁷ Between 2013/14 and 2016/17, NSW saw 88 per cent growth in the number of women over the age of 55 years accessing homelessness services.¹⁸

Older people face increasing challenges such as low incomes, retirement with low superannuation, discrimination and health risks. They are especially vulnerable when they have complex circumstances such as mental health issues, financial stress, isolation or past experience of DFV.¹⁹ Women over 45 who experience homelessness are also more likely to remain homeless for a longer period of time.²⁰

People with mental health issues

The incidence of mental illness amongst the homeless population is significantly higher than the general population. In 2016/17, one third of people seeking assistance from SHS reported having a current mental health condition.²¹ The links between mental health issues, unstable housing and homelessness are significant, with estimates of between 50 and 80 per cent of homeless youth having some experience of mental illness.²²

People experiencing chronic homelessness or sleeping rough

The number of people who are sleeping rough who access SHS has been steadily increasing – between 2013/14 and 2016/17, this figure increased by 56 per cent to more than 5,500 people across NSW.²³ The trend of people sleeping rough in inner city Sydney has been increasing since 2013. In February 2017, 433 people were sleeping rough in inner city Sydney, compared with 274 in February 2013.²⁴ People who are sleeping rough exhibit high rates of health problems, mental disorder, trauma, cognitive impairment, suicide and other premature deaths.²⁵ Up to 60 per cent have complex physical, mental health and disability support needs. Almost two thirds of people who are sleeping rough who have a mental health issue also have issues with drug or alcohol abuse.²⁶

Aboriginal and Torres Strait Islander people

Aboriginal disadvantage and homelessness are closely linked, with homelessness increasing the social and economic disadvantage faced by Aboriginal and Torres Strait Islander people (hereafter Aboriginal). Housing is a key factor in the health and life expectancy gap between Aboriginal and non-Aboriginal Australians,²⁷ and a key mechanism for continued intergenerational disadvantage.²⁸

Despite making up less than 3 per cent of the NSW population, Aboriginal people make up almost 8 per cent of the NSW homeless population and almost 30 per cent of SHS users.²⁹ Across Australia, Indigenous Australians are 14 times more likely to become homeless than other Australians, and their homelessness situations are likely to be more severe.³⁰ Seven in 10 Aboriginal people who experience homelessness have a parent who experienced homelessness at some point.³¹

It is important to recognise the cultural and spiritual aspects of home for Aboriginal people, as homelessness may not be defined as a lack of accommodation. A person may not have conventional accommodation, however may have a sense of home, a sense of belonging to a place, and recognition and acceptance in that place. A category of spiritual homelessness is also acknowledged, in recognition that a person may experience separation from traditional land, or from family and kinship networks, or a crisis of cultural identity.³²

The NSW Homelessness Strategy will connect to the *Aboriginal Housing Strategy*, helping to build the system's understanding of cultural and spiritual aspects of homelessness and strengthen service responses.

LGBTIQ people

There is increasing evidence that lesbian, gay, bisexual, transgender, intersex, and queer or questioning (LGBTIQ) people are at higher risk of homelessness compared to the general population and may experience more significant consequences as a result. In 2014, the General Social Survey in Australia identified that more than one third of lesbian/gay people and more than 20 per cent of bisexual people had experienced homelessness, compared with less than 14 per cent of heterosexuals.³³ While the pathways to homelessness for LGBTIQ people are similar to that of other groups, the experience of family rejection and discrimination adds to the complexity of their experiences and can lead to chronic homelessness.³⁴

Culturally and linguistically diverse (CALD) people

People from CALD backgrounds may have increased vulnerability to homelessness due to additional barriers, such as limited proficiency in English, which can make prevention and early intervention difficult.³⁵ CALD women and children escaping family violence may experience additional barriers, such as difficulty finding accommodation that enables them to remain connected to family and community, or discrimination when trying to access accommodation, long term housing and other supports to resolve homelessness.³⁶

Young refugees are six times more likely to become homeless than other young people. The temporary, transitory, and often overcrowded nature of accommodation common to newly arrived migrants and refugees qualifies as many as 33 per cent as homeless at some point after arriving in Australia.³⁷

Regional and rural areas

For people living in regional and rural areas, it can be more difficult to escape homelessness because of limited housing options, education, and employment opportunities. Access to disability, health and other specialist services is constrained in some areas, and many services have difficulties recruiting and retaining staff. People needing to travel long distances for medical or court appointments may need to secure overnight accommodation without necessarily having the means to do so.

Access to SHS in regional and rural areas is growing faster than the rate for metropolitan areas of NSW, with 75 per cent growth of regional clients accessing SHS between 2013/14 and 2016/17.³⁸ Two in five people who access SHS are living outside of major cities.³⁹ Across Australia, the rate of people seeking SHS support with their children is higher in regional and rural areas, and service use in remote/very remote areas was 2.6 times higher than in major cities.⁴⁰ Around 40 per cent of people sleeping rough in NSW are outside major cities.⁴¹

Action Plan - Overview

FOCUS AREA 1

Intervening early and preventing crisis

Increase early identification of at-risk groups

Who will benefit? Building the evidence base, working with young people to address risk early, low income families, families and individuals in financial hardship, Aboriginal people, rural and regional areas

Support people to maintain tenancies and avoid entering the homelessness system

Who will benefit? Early intervention, low income families, families and individuals in financial hardship, older people, Aboriginal people, rural and regional areas

Prevent exits from government services into homelessness

Who will benefit? Improving transitions from government services

FOCUS AREA 2

Providing effective supports and responses

Strengthen Housing First in NSW to reduce rough sleeping and prevent chronic homelessness through flexible, tailored supports

Who will benefit? People who are sleeping rough, people with mental illness, people with high or complex needs, Aboriginal people, rural and regional areas

Provide targeted housing options to prevent homelessness or chronic homelessness for high risk groups

Who will benefit? Women and children leaving domestic and family violence, young people leaving OOH, low income families and individuals, older women, Aboriginal people, rural and regional areas

Provide choice and the right supports for people to address the issues putting them at risk of homelessness and to reduce repeat homelessness

Who will benefit? People who are sleeping rough, women and children leaving domestic and family violence, young people, older people, families and individuals in financial hardship, Aboriginal people, rural and regional areas

FOCUS AREA 3

Creating an integrated, person-centred service system

Improve accountability by agencies and services for homelessness outcomes in order to drive systemic change

Who will benefit? All groups, with a specific emphasis on people with high or complex needs

Increase service integration and collaboration to enhance person-centred responses

Who will benefit? All groups, with a specific emphasis on people with high or complex needs

Improve services by increasing trauma-informed care and culturally appropriate practice

Who will benefit? All groups, with a specific emphasis on Aboriginal people, people with high or complex needs, rural and regional areas with high or complex needs, rural and regional areas

The NSW Government will use mainstream services to maximise opportunities to identify people who are at risk early, particularly young people; support people to maintain their tenancies and ensure that people do not exit government services into homelessness. We will build the evidence on effective prevention and early intervention, exploring opportunities to use behavioural insights approaches and social impact investment to understand and evaluate effective intervention options.

What the evidence says

Early identification of risk is the key to more effective prevention

There are a number of critical points in a person's pathway to experiencing homelessness, and targeting supports at these points will help prevent people from experiencing homelessness.

Mainstream service systems, such as schools, are prime locations for identifying people at risk of homelessness, including young people. At one time or another, young people will access health services, participate in education up to some point, and may receive support from Centrelink. Mainstream services have a unique opportunity for population or broad-based screening for risk and early response for young people in particular, but also for families and individuals accessing preventative or general supports as well as specialist or acute services.

We know there has been an increase in severe overcrowding in NSW. The 2016 ABS data shows that the people living in severe overcrowding constitute 45 per cent of all homeless people in NSW. This is an emerging issue. We need to better understand overcrowding as a form of homelessness, understand the factors contributing to it, and explore ways to identify and link people to services.

Supporting at-risk tenancies can help prevent people reaching crisis point

Early intervention strategies can effectively work with people when tenancies become unstable. This applies to both tenancies in the private market and in social housing. In 2015/16 and 2016/17, 9 per cent (2,107) of social housing tenancies in NSW were terminated due to breach of tenancy agreement. Almost 30 per cent of these were Aboriginal tenancies.⁴² Rent arrears and a failure to pay other tenancy charges is one of the key drivers of failed tenancies, and is seen as the single most significant tenancy management issue facing social housing providers nationally.⁴³

In 2015/16, almost half of new social housing tenancies were for people who were either experiencing homelessness or at risk of homelessness.⁴⁴ This means a high proportion of social housing tenants have an increased risk of falling into homelessness if they lose their tenancies.

People who have experienced homelessness often need post-crisis support once they enter public housing and are at increased risk of exiting into homelessness if they don't receive it. More than half will exit their tenancies into homelessness within 12 months.⁴⁵ Of these, more than 15 per cent will exit into homelessness with three months, and almost 20 per cent within three to six months.⁴⁶ Post-crisis support has been shown to be highly effective in helping people sustain their public housing tenancies, with more than 85 per cent of public housing tenants maintaining their tenancies over 12 months when they received SHS assistance.⁴⁷

In private housing, real estate agents are often the first to know when a tenancy is at risk. Delayed rent, observations from property inspections, complaints from neighbours and strata, or contact from police, are some of the early signs a tenancy may be in trouble. Working with real estate agents provides an opportunity to identify tenants at risk of eviction early and link them with service providers and supports to help them maintain their tenancies.

Transition points are periods of instability for many people

Transition points and significant life events can be periods of instability or uncertainty, exposing people to a range of stressors and challenges that can lead to increased risk, particularly for vulnerable groups. For vulnerable people, transition points can act as a trigger which destabilises them. When combined with the presence of other risk factors (such as addiction or mental health issues), a vulnerable person experiencing a transition or significant life event may lack the resources, support or skills to handle it, leading to consequences that culminate in homelessness.⁴⁸

This includes people leaving government services, such as out-of-home care (OOHC), inpatient mental health units, or the justice system, who have been shown to be at increased risk of homelessness. The causes of homelessness among this group are complex and multifaceted, but include poor identification of risk factors, poor transition planning, a lack of coordination in responding to unmet support needs, and limited appropriate exit accommodation options.⁴⁹

Approximately half of the 15,000 people released from custody each year are released on remand at short notice with no pre-release assistance, and sometimes with no money, suitable clothes, medication or accommodation.⁵⁰ Research has identified that upon release many people are worse off than when they were incarcerated, with up to half experiencing at least one episode of homelessness in the first six months after release, and many others being in unstable or unsuitable housing.⁵¹

In Australia, almost 7,000 people leaving health or social care arrangements in 2015/16 required SHS support. Of these, almost 30 per cent were classified as homeless, with the majority (almost 60 per cent) living in short-term emergency accommodation.⁵² In 2016/17, more than 8,000 people exiting custodial settings in Australia required SHS support.⁵³ NSW prison reception data indicates that as many as 60 per cent of people in prison have come from primary or secondary homelessness,⁵⁴ and analysis of BOCSAR data indicates that in 2015/16 as many as one in 10 young people exiting juvenile justice custody accessed SHS.⁵⁵

Young people leaving OOHC are disproportionately at risk of homelessness, with 22 per cent using SHS in the same financial year as they exit. Aboriginal OOHC leavers are 43 per cent more likely to access SHS than non-Aboriginal OOHC leavers. Twenty-four per cent of people who left OOHC and have involvement with the criminal justice system require SHS in the first two years after exiting custody.⁵⁶

What we will do

ACTIONS	Responsible Agencies	Other Partners	Start Date
FOCUS 1: Prevention and early intervention			
<p>1.1 Increase early identification of at-risk groups</p> <p>We will build our understanding of the risk factors that make people the most vulnerable to homelessness, and make it easier for the mainstream service system to identify and link these people to services.</p> <p>Who will benefit: Young people, low income families, Aboriginal people, rural and regional areas.</p>			
<p>Expand the use of universal screening tools for homelessness and risk of homelessness in schools. Beginning with a pilot site in one or two districts, with expansion to other districts and services with a stable client base to be considered post-evaluation.</p> <ul style="list-style-type: none"> To respond early to young people and families at risk, we will build on the evidence of the Geelong Model that demonstrated all the young people who were identified through the survey for assessment and referral maintained school engagement and stable housing throughout the 12 month evaluation period.⁵⁷ It is anticipated that the initial sites will be in areas of high disadvantage, will incorporate lessons learnt from the pilots, and have an evaluation component to report on client outcomes and assess program delivery, prior to consideration of further expansion. 	FACS, Education, Health	Schools, TEI providers, SHS, GPs	Year 1 - Planning, procurement and establishment of the program. Year 2 - Pilot
<p>Commission an actuarial analysis of pathways into homelessness to inform investment in 2019/20 and onwards.</p> <ul style="list-style-type: none"> Experiencing homelessness is often the result of a long series of events and risk factors. This work will provide detail on early opportunities to intervene, and aim to develop a predictive model. Priority areas to include engagement with justice, mental health, OOHC, and alcohol and other drugs (AOD). This analysis will identify service usage, service engagement, and costs to government of individuals accessing homelessness services to identify service capacity, service gaps, and service collaboration opportunities. 	FACS, Health, Justice, Education, DFSI	-	Under way
<p>Identify opportunities to use social impact investment to complement the identified focus areas and actions under the Strategy.</p>	OSII, FACS	Private sector, NGOs	Aim for services to commence mid 2019

ACTIONS	Responsible Agencies	Other Partners	Start Date
<ul style="list-style-type: none"> Although the market for social impact investment is still relatively young, there are a number of case studies in Australia and internationally that have successfully brought together cross-sector collaborations to achieve a positive impact on the outcomes for and the lived experience of some of society's most disadvantaged citizens.⁵⁸ Research has identified opportunities for social impact investment to drive change in housing and homelessness through its focus on prevention and early intervention, as well as payment for outcomes (rather than activities and outputs). Social impact investment increases accountability for outcomes through measurement and increased transparency, and can incentivise greater coordination and integration of service delivery and housing solutions by designing investment to include both property provision and support services.⁵⁹ We will explore partnership opportunities across sectors to unlock new sources of capital; testing and scaling innovative approaches to addressing homelessness; and importantly, moving towards carefully measuring and paying for outcomes. 			
<p>Build our understanding of overcrowding as a form of homelessness, the factors leading to it, and explore ways to identify and link people to services.</p>	FACS	SHS, NGOs, private sector, community	Year 1 - conduct a Roundtable into overcrowding
<p>1.2 Support people to maintain their tenancies and avoid entering the homelessness system</p> <p>We will respond to early warning signs that peoples' tenancies may be at risk, and connect them to support and assistance that will help them remain in their homes.</p> <p>Who will benefit: All client groups.</p>			
<p>Increase early intervention tenancy supports through localised real estate engagement projects to help maintain tenancies in the private rental market.</p> <ul style="list-style-type: none"> We will explore options to enable FACS districts and SHS to expand relationships with and between real estate agencies, service providers and government agencies. The aim is to build resources, connections and active networks that can be used when a real estate agent identifies a tenant at risk of eviction so that people maintain their current tenancies. 	FACS	SHS, private real estate, community	Under way

ACTIONS	Responsible Agencies	Other Partners	Start Date
<ul style="list-style-type: none"> Findings from local projects that engage with real estate agents have been promising, with one project preventing up to 50 per cent of evictions through early identification of at-risk tenancies in the first two years of operation.⁶⁰ 			
<p>Support and encourage financial institutions, including telecommunications and energy companies, to offer information on a full suite of Commonwealth and state supports for their customers who are experiencing financial hardship.</p> <ul style="list-style-type: none"> Research has shown people who are severely or fully financially excluded are at higher risk of poor economic, social and health outcomes.⁶¹ FACS and other agencies will work to identify opportunities for the private sector to build on current financial hardship provisions and Financial Inclusion Action Plans to identify and support people in financial stress, including linking them to available Commonwealth and state supports. 	FACS, Justice	Private sector, community	Year 1
<p>Take action to sustain existing tenancies in social housing through local strategies to deliver intensive person-centred support and case management to address a range of complex needs such as mental health and alcohol and other drug issues.</p> <ul style="list-style-type: none"> The effectiveness of tenancy support programs has been consistently demonstrated with rates averaging between 80 and 90 per cent across a number of programs in Australia.⁶² In addition to preventing homelessness for those at imminent risk and reducing evictions, supporting people to sustain their existing tenancies has been shown to have a broad range of other factors, including reducing the number of children taken into care; reducing neighbourhood disputes; reducing rent arrears and debt; increasing labour market and educational participation; and increasing appropriate links to health and social services.⁶³ 	FACS	CHPs and SHS	<p>Years 1 and 2 - supports to existing social housing tenants</p> <p>Years 3 and 4 – supports to new social housing tenants</p>

ACTIONS	Responsible Agencies	Other Partners	Start Date
<p>1.3 Prevent exits from government services into homelessness</p> <p>We will develop and implement best practice models to increase the effectiveness of exit planning and prevent people exiting government services into homelessness.</p> <p>Who will benefit: Young people exiting out of home care, people exiting corrective services, exits from mental health and hospital settings, Aboriginal people, rural and regional areas.</p>			
<p>FACS, Justice and Health to use the Multi-agency Framework for Transition Planning to Prevent Homelessness to undertake a review of current exit planning policies and practices, and best practice in exit planning. Agencies to agree on a joint approach to preventing exits into homelessness, including developing new agency action plans demonstrating how agencies will reduce exits into homelessness.</p> <ul style="list-style-type: none"> • All agencies to complete Action Plans to identify policies, practices and reporting to ensure best practice exit planning, to include: <ul style="list-style-type: none"> - Current examples of best practice exit planning - Transition support model for clients with exit plans who require linking, coordination or cross-agency collaboration to transition into long-term accommodation. 	<p>FACS, Justice, Health</p>	<p>-</p>	<p>Under way</p>

The causes of homelessness are complex and involve a number of intersecting factors that play out in different ways from individual to individual. Provision of housing and support are two critical responses to homelessness, but people's needs differ widely.

The NSW Government is committed to developing a systemic response to homelessness that will ensure people experiencing homelessness, particularly vulnerable groups, will have access to housing and tailored, flexible support to meet their individual needs.

What the evidence says

Evidence of what works to help people out of homelessness shows that an effective response includes access to affordable housing and flexible, needs-based support. People's differing circumstances and needs – from young people at risk of homelessness to people experiencing chronic homelessness to people leaving domestic and family violence – influence the range of supports and housing options needed in the service system.

Housing First approaches can help prevent chronic homelessness

Housing First is an evidence-based way of responding to chronic homelessness and rough sleeping. Housing First means offering affordable housing to people experiencing homelessness as quickly as possible, removing potential barriers and providing the supports they need to avoid returning to homelessness for as long as supports are needed.

The evidence about Housing First approaches adopted in the US, UK, Canada, and in Europe all points in the same direction – 80-90 per cent of chronic rough sleepers remained housed after two years. Studies have also shown that Housing First reduces the use of crisis services and institutions, and improves people's health and social outcomes.⁶⁴

Housing First projects in NSW have demonstrated similar results:

- Almost 90 per cent of men experiencing chronic homelessness supported through Michael's Intensive Supported Housing Accord (MISHA) were still in housing two years later;⁶⁵
- More than 80 per cent of people experiencing chronic homelessness supported by the Platform 70 project sustained their tenancies;⁶⁶
- Almost 95 per cent of Common Ground Sydney residents sustained their tenancies for over 12 months. In this case, the average length of homelessness for residents was 13 years.⁶⁷

Assertive outreach and access to quality health care can help people who are sleeping rough transition to housing

People who are sleeping rough are disproportionately high users of the health system. For many, the challenge of finding food, shelter, clothing, and safety means health is not a priority, which, in turn, exacerbates disease, complicates treatment, and increases their mortality rate.⁶⁸

A recent study identified that mortality rates for young people who are sleeping rough are more than 10 times greater than the general population.⁶⁹ A study of 516 people who were sleeping rough in inner city Sydney found they had 1,007 visits to the emergency department, 376 periods of hospitalisation, and 527 trips in an ambulance in a six month period.⁷⁰

Assertive outreach and access to quality health care plays an important role in engaging with people who are sleeping rough, and can be a catalyst to help them engage with services and provide an exit

pathway out of homelessness.⁷¹ In this context, assertive outreach and access to health care services work to help people who are sleeping rough address health and other issues, such as mental health and/or substance use, that may be contributing to their circumstances.⁷²

Models in the USA, NSW and Queensland, including the Boston Health Care for the Homeless Program (BHCHP) and the St Vincent's program in Sydney, have been shown to deliver a range of positive outcomes for people who are sleeping rough. The St Vincent's approach encompasses Tierney House (a step-up/step-down model of health care in a home-like setting), assertive outreach, and exit or complex care coordinators.

Vulnerable young people can be supported to transition to independence

Effective housing and support models for young people, such as Youth Foyer programs, link stable accommodation with support to access education, training and work, shifting the focus from crisis-driven responses that can be overly focused on disadvantage.

Supports need to be person-centred

For women and children leaving domestic and family violence, programs supporting them to remain safely in their home or access alternative safe housing have been shown to be effective. Women and children leaving domestic and family violence need a range of services, including immediate crisis intervention and assistance to overcome the emotional and psychological impact of the trauma, as well as assistance to ensure their economic and housing stability. Research has emphasised the critical importance of tangible resources, in particular stable housing, for women during the post-separation period.⁷³

Specific trauma supports are also critical. Previous Australian studies have documented the high rates of exposure to traumatic events among people who experience homelessness; with between 91 and 100 per cent of people experiencing homelessness having experienced at least one major trauma in their lives compared with 57 per cent of the general Australian population who report one major traumatic event in their life.⁷⁴ One study identified that the majority had been exposed to trauma during their childhood, predominantly child abuse.⁷⁵

Alternate social housing options can better meet the needs of different groups

The experiences of older women who are homeless or at risk of homelessness are diverse. Many older women do not have complex needs, but face challenges that increase their risk of homelessness.

For groups with growing risk of homelessness, such as older women, there is a need to consider new housing options that will provide long-term, affordable accommodation. There is a high demand for single occupancy homes, which is a barrier for many people finding and sustaining long-term accommodation. At June 2016, almost 50 per cent of women on the housing waiting list in NSW needed a studio or one bedroom dwelling.⁷⁶

What we will do

ACTIONS	Responsible Agencies	Other Partners	Start Date
FOCUS 2: Increase access to supports, including housing, that prevent homelessness and re-entry into homelessness.			
<p>2.1 Expand Housing First in NSW to reduce rough sleeping and prevent chronic homelessness through flexible, tailored supports</p> <p>We will build on our current Housing First approach, bringing together housing providers, homelessness services, and psychosocial support providers so that people who are sleeping rough or at high risk of homelessness can access housing and the supports they need to sustain their tenancy.</p> <p>Who will benefit: People who are sleeping rough, people with mental illness, people at high risk of homelessness, regional areas, Aboriginal people.</p>			
<p>Continue to implement the Supported Transition and Engagement Program (STEP) to provide an additional 120 housing places for rough sleepers across NSW over the next four years, with wraparound support based on Housing First principles. This includes 90 places in the inner city, and a further 30 places in regional locations with high levels of primary and secondary homelessness. This initiative will be supported by 'Next STEP' providing over 70 packages for continuation of support and accommodation for people remaining in STEP properties who still require support at the end of the original program.</p>	FACS	SHS	Under way
<p>FACS will build on the success of the Housing Outreach and Support Team (HOST) in the inner city by implementing another HOST team in Parramatta to provide assertive outreach to rough sleepers, and support them to access accommodation and support.</p>	FACS	SHS, CHPs	Year 1
<p>2.2 Provide targeted housing options to prevent homelessness or chronic homelessness for high risk groups</p> <p>We will implement a range of tailored accommodation solutions to support other vulnerable groups, including women and children experiencing domestic and family violence, older women, and children and young people.</p> <p>Who will benefit: Women and children leaving domestic and family violence, older people, young people leaving out of home care, low income families and individuals, rural and regional areas, Aboriginal people.</p>			
<p>Increase core and cluster accommodation for families experiencing DFV, to be evaluated for expansion.</p> <ul style="list-style-type: none"> The core and cluster model is a set of individual units in a single location (cluster) together with office/workers' space and communal areas for residents (core), giving women and children greater privacy. In other jurisdictions, communal refuges with shared facilities are being replaced with core and cluster models which provide independent, private accommodation and on-site support.⁷⁷ 	FACS	SHS	Under way - first site established in Orange.

ACTIONS	Responsible Agencies	Other Partners	Start Date
<p>Implementation of Phase 1 of the Social and Affordable Fund is continuing with building work underway to deliver more homes under the first procurement phase.</p> <p>Implement Phase 2 of the Social and Affordable Housing Fund to target 1,200 social and affordable dwellings that are new to the sector with:</p> <ul style="list-style-type: none"> • At least 70% to be social housing and the balance to be affordable housing • A target of 30% of dwellings to be in regional NSW • Proposals targeting the general social housing population with a priority for proposals with older women as a target group. 	FACS	CHPs and partners	Phase 1 under way. Phase 2 to commence in second half of Year 1
<p>Deliver targeted social housing options for older women in four to five locations, to be evaluated for expansion.</p> <ul style="list-style-type: none"> • A study of single older women facing homelessness reflected that they were prepared to trade space for having an individual unit of their own. The overwhelming preference was to have their own home, and for that home to be permanent and safe so that they would not be homeless again and they could be supported as they aged.⁷⁸ • Affordable, permanent supportive housing models have the potential to prevent homelessness for at-risk older women.⁷⁹ • Smaller units will be trialled to accommodate growing demand for social and affordable housing for older women in financial hardship. 	FACS	CHPs	Services to commence from Year 2
<p>Provide access to education and accommodation for young people through a Youth Foyer social impact investment, to be evaluated for expansion.</p> <ul style="list-style-type: none"> • Foyers are designed for young people with the capacity to engage in education and training, but who are prevented from participating due to structural, institutional and/or personal barriers. • Youth Foyer models have been shown to be effective, with around 75 per cent of Foyer residents leaving with full-time work, or on their way to university.⁸⁰ Further robust evaluation of this model is needed to build on the positive outcomes reported by people who have been part of previous Youth Foyer programs. • One purpose-built Youth Foyer site located in central Sydney will be delivered, offering young OOHC leavers a safe and affordable place to live while they engage in education, training and employment. 	FACS, OSII	CHPs, NGOs	Construction commences in Year 1. Services to commence from Year 3 (2021)

ACTIONS	Responsible Agencies	Other Partners	Start Date
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2.3 Provide choice and the right supports for people to address the issues putting them at risk of homelessness and to reduce repeat homelessness

We will provide a range of tailored responses to the most vulnerable groups, including those experiencing domestic and family violence, children and young people, people who are sleeping rough, and people with alcohol and other drug issues.

Who will benefit: Women and children leaving domestic and family violence, children, older people, rough sleepers, people with disability, families and individuals in financial hardship, rural and regional areas, Aboriginal people.

<p>Increase options for women and children experiencing DFV to stay safe at home.</p> <ul style="list-style-type: none"> • <i>Staying Home Leaving Violence</i> aims to prevent homelessness by working with NSW Police to remove the perpetrator from the family home so that women and children can remain at home. • 90 per cent of people supported to stay in their home after experiencing domestic and family violence through the <i>Staying Home Leaving Violence</i> program were still in safe housing at the end of the evaluation period.⁸¹ • <i>Staying Home Leaving Violence</i> will be established in an additional five new sites (1,175 women and children per year). 	FACS	SHS	Year 1
<p>Improve health and housing outcomes for people experiencing homelessness by increasing their access to quality health care by building on current models delivered through St Vincent’s Hospital and the BHCHP.</p> <ul style="list-style-type: none"> • An evaluation of Tierney House demonstrated reduced reliance on the hospital system for people experiencing homelessness, including reduced likelihood of emergency presentation.⁸² • The Micah Project’s Integrated Healthcare and Supportive Housing model has delivered positive outcomes in the lives of people who are sleeping rough or experiencing chronic homelessness. In a recent survey of 75 participants, 50 per cent reported improvements in their mental health and around 60 per cent reported improvements in their physical health and satisfaction with life.⁸³ 	Health, LHDs, FACS	SHS	Services to commence in year 2

ACTIONS	Responsible Agencies	Other Partners	Start Date
<ul style="list-style-type: none"> The housing and primary health service will provide quality services, reduce health care costs, and improve the accommodation outcomes for people experiencing homelessness, particularly those who are sleeping rough. 			
<p>Expanding assertive outreach to people sleeping rough in areas of high need. This is a multi-agency response to engage with people who are sleeping rough in high need areas and build on the quality health care approach.</p> <ul style="list-style-type: none"> Two new sites in NSW, estimate of 115 clients per site (who may have multiple support periods over the course of a year). Based on Way2Home Model. 	FACS	NGOs Health, LHDs	Year 2
<p>Build on the successes of Supported Temporary Accommodation models and complete a Temporary Accommodation framework in order to ensure the appropriate support options are available for people requiring crisis accommodation to enable them to transition to long-term housing.</p>	FACS	SHS	Under way

In NSW, no one agency is responsible for delivering responses to homelessness. Services and supports are provided by a number of government agencies, non-government agencies, and community organisations. Often organisations and services remain disconnected, despite recognition of the importance of integration and attempts to promote integrated responses in policy and service delivery contexts.⁸⁴

The NSW Government is committed to making the service system more integrated and more accountable to the people it supports. We will put people at the centre of the system, so they get appropriate help when they need it.

What the evidence says

Service integration is a key part of a person-centred response

Many people experiencing homelessness have multiple needs, and it is common for them to need a range of supports beyond housing. In 2016/17, more than 74,000 people accessed SHS in NSW. Of these:

- More than 40 per cent reported having some type of health condition;
- 35 per cent had experienced domestic and family violence;
- 33 per cent reported having a current mental health condition;
- 12 per cent reported drug or alcohol misuse; and
- 4 per cent reported having a disability.⁸⁵

People who have experienced significant trauma typically present to multiple services over a long period of time, and research has shown that care is often disjointed with a lack of coordination between services, and poor referral pathways and follow-up protocols.⁸⁶ The lack of service integration can increase the risk of re-traumatisation and compounding problems as a result of unrecognised trauma,⁸⁷ and makes getting help more challenging.

In the consultations for the development of the NSW Homelessness Strategy, service users and providers described the mainstream service system as complex and difficult to navigate. People often have to approach a range of services and repeat their story many times to get the support they need. A lack of information sharing and service integration means that a person's condition and needs are often treated in isolation, resulting in poorer outcomes for the person.

Although there is limited robust evidence on the extent and effectiveness of integrated approaches to homelessness in Australia,⁸⁸ a number of key mechanisms that support integration have been identified, including dedicated coordination roles, case coordination initiatives, localised outreach programs, and formalised relationship mechanisms.⁸⁹

Quality systems and a focus on outcomes

A multi-site descriptive evaluation of trauma-informed services for homeless families in the US found that almost 90 per cent of participants had either remained in government-subsidised housing or moved to permanent housing 18 months after engaging with the program. However, programs have demonstrated improvements in people's daily functioning and a decrease in trauma and mental health symptoms, as well as in substance use.⁹⁰

Trauma-informed and culturally appropriate practice lead to better outcomes

Trauma is a common precursor to experiencing homelessness, with trauma exposure often escalating following the onset of homelessness.⁹¹ Studies exploring the relationship between trauma and homelessness have demonstrated the universality of trauma exposure among people experiencing homelessness, with one study identifying that all participants had experienced at least one traumatic event, but 97 per cent experienced more than four events. In the general community, only 4 per cent of people experience more than four events.⁹² In spite of this, research has shown that homelessness services may support trauma survivors without being aware of or addressing the impact of traumatic stress.⁹³

Although there are yet to be any rigorous quantitative studies exploring trauma-informed outcomes within homelessness service settings, there are early indications that trauma-informed care can have a positive effect on housing stability. Programs have also demonstrated improvements in people's daily functioning and a decrease in trauma and mental health symptoms, as well as substance use.⁹⁴

Aboriginal and Torres Strait Islander people are over-represented among people experiencing or at risk of homelessness and the rate is increasing. The Special Taskforce on Domestic and Family Violence in Queensland found that the effectiveness of services offered to Aboriginal people is often undermined by a failure to deliver services in a culturally appropriate manner.⁹⁵ The need for more culturally appropriate services was raised repeatedly during consultations for the development of the NSW Homelessness Strategy.

What we will do

ACTIONS	Responsible Agencies	Other Partners	Start Date
FOCUS 3: Create an integrated, person-centred service system			
<p>3.1 Improve accountability by agencies and services for homelessness outcomes in order to drive systemic change</p> <p>We will shift the focus from types of service to achievement of outcomes and implement new reporting mechanisms to encourage greater collaboration across the sector, and increase accountability and reporting by agencies and services.</p> <p>Who will benefit: All cohorts, with a primary focus on people with high or complex needs.</p>			
<p>Develop the Human Services Outcomes Framework (HSOF) application for homelessness, including introducing cross-agency requirements for reporting on homelessness outcomes.</p> <ul style="list-style-type: none"> The HSOF is a tool to support agencies and non-government organisations to embed outcomes measurement into human services planning, delivery and evaluation. The application of the HSOF to the NSW Homelessness Strategy will help focus collective effort on improving outcomes for people who use mainstream and specialist homelessness services. Best practice resources will be developed to build evidence-based practice models. Strategy evaluation plan to include development and dissemination of further resources for districts and services. 	FACS, Health, Justice, Education	SHS	Under way
<p>Develop a whole-of-system homelessness dashboard to improve transparency of funding and outcomes.</p> <ul style="list-style-type: none"> The dashboard will complement the HSOF, and improve understanding and reporting across the whole of the service system on investment in homelessness and outcomes achieved. 	FACS	-	Year 1
<p>Outcomes-based commissioning seeks to shift emphasis in the contracting environment from the services a provider will offer to the outcomes they achieve for their clients. It is driven by data and evidence about what works for whom, where and why. It places the outcomes being achieved for clients, at the centre of the contracting relationship. To support an outcomes-based approach, a new quality system will be implemented over the next 5 years.</p>	FACS	SHS	<p>Year 1 - develop outcomes framework; commence pilot</p> <p>Year 1 & 2 - consultation and planning with providers to inform new contracts in 2020</p>

ACTIONS	Responsible Agencies	Other Partners	Start Date
<p>Undertake a robust evaluation of the Strategy, identifying where initiatives are effective, reviewing implementation and scaling up as appropriate through the term of the Strategy.</p>	<p>FACS, Health, Justice, Education</p>	<p>SHS</p>	<p>Year 1 onwards</p>
<p>3.2 Increase service integration and collaboration to enhance person-centred responses</p> <p>We will improve outcomes for people and reduce service delivery gaps through integrated, person-centred approaches that support people with multiple or complex needs and help them navigate service systems more effectively.</p> <p>Who will benefit: All cohorts, with a primary focus on people with high or complex needs.</p>			
<p>Increase access to AOD services for people experiencing homelessness by providing clear pathways and links into appropriate housing options to improve health and housing outcomes following treatment.</p> <ul style="list-style-type: none"> When housing is linked to appropriate clinical and rehabilitation support, people are better able to overcome the impact of AOD misuse (and associated mental health issues) and live independently.⁹⁶ 	<p>FACS, Health, AOD services</p>	<p>CHPs</p>	<p>Year 1 - develop transition planning guidelines with Health</p>
<p>3.3 Improve services by increasing trauma-informed care and culturally appropriate practice</p> <p>We will improve the way agencies and frontline staff work with people, building on current training to ensure best practice and culturally appropriate approaches to service delivery.</p> <p>Who will benefit: Aboriginal people, people with past experience of trauma, people with multiple or complex needs, rural and regional areas.</p>			
<p>Improve the way we work with people on the frontline, building on current customer service and staff capability development initiatives, with an initial focus on delivering trauma-informed care and Aboriginal cultural capability training available to all FACS staff and NGO services delivered in multiple locations across NSW.</p> <ul style="list-style-type: none"> Improve staff and organisational capacity to provide person-centred, trauma-informed supports to vulnerable people to improve outcomes. Improve staff and organisational capacity to provide culturally appropriate services to Aboriginal people. Build the capability of FACS client service officers to deliver improved customer service outcomes for people experiencing homelessness or at risk of homelessness through the LEAP training. 	<p>FACS, Health, Justice, Education</p>	<p>SHS</p>	<p>Year 1 - training needs assessment</p> <p>Year 2 - training rolled out across NSW</p>

Implementation Plan

FOCUS 1: Prevention and early intervention

Expansion of initiatives in Years 3-5 subject to evaluation and review of initial implementation in Years 1 and 2

WHAT WE WILL DO	1.1 Increase early identification of at-risk groups Who will benefit: Young people, low income families, families and individuals in financial hardship, Aboriginal people, rural and regional areas	1.2 Support people to maintain their tenancies and avoid entering the homelessness system Who will benefit: Older people, low income families, families and individuals in financial hardship, Aboriginal people, rural and regional areas	1.3 Prevent exits from government services into homelessness Primary Cohorts: Young people exiting out of home care, people exiting corrective services, exits from mental health and hospital settings, Aboriginal people, rural and regional areas
YEAR 1 (2018-19)	Planning, procurement and establishment of universal screening program	Support people to sustain their tenancies in private rentals	Explore opportunities to use social impact investment (SII)
	Complete actuarial analysis of pathways into homelessness	Work with financial institutions to address financial hardship/exclusion	Multi-agency best practice review of exits from government services
	Conduct Overcrowding Roundtable		
YEAR 2 (2019-20)	Commence universal screening in one district	Continue implementation of tenancy support actions	SII commences with payment for outcomes delivered
		Continue to work with financial institutions to address financial hardship/exclusion	Implement action plans
YEAR 3 (2020-21)	Continue to implement universal screening and responses in the two identified districts	Continue implementation of tenancy support actions	SII continues with payment for outcomes delivered
		Continue to work with financial institutions to address financial hardship/exclusion	
YEAR 4 (2021-22)	Continue to implement universal screening and responses in the two identified districts	Continue implementation of tenancy support actions Delivery of additional packages	SII continues with payment for outcomes delivered
		Continue to work with financial institutions to address financial hardship/exclusion	
YEAR 5 (2022-23)	Continue to implement universal screening and responses in the two identified districts	Continue implementation of tenancy support actions Delivery of additional packages	SII continues with payment for outcomes delivered
		Continue to work with financial institutions to address financial hardship/exclusion	

FOCUS 2: Increase access to supports, including housing, that prevent homelessness and re-entry into homelessness

WHAT WE WILL DO	<p>2.1 Expand supports in NSW to reduce rough sleeping and prevent chronic homelessness</p> <p>Who will benefit: People who are sleeping rough, people with mental illness, people at high risk of homelessness, regional areas, Aboriginal people</p>	<p>2.2 Provide targeted housing options to prevent homelessness or chronic homelessness for high risk cohorts</p> <p>Who will benefit: Women and children leaving domestic and family violence, older people, young people leaving out of home care, low income families and individuals, rural and regional areas, Aboriginal people</p>	<p>2.3 Provide choice and the right supports for people to address the issues putting them at risk of homelessness and to reduce repeat homelessness</p> <p>Who will benefit: Women and children leaving domestic and family violence, children, older people, people sleeping rough, people with disability, families and individuals in financial hardship, rural and regional areas, Aboriginal people.</p>
YEAR 1 (2018-19)	Continue STEP implementation	Contracts signed for Phase 2 of the Social and Affordable Housing Fund	Sustain tenancies in social housing
	Provision of additional scattered site integrated and housing programs	Youth Foyer design and development commences	Design co-located homeless health services
	Continue assertive outreach to support people sleeping rough in inner city districts to access housing with support	Specialist housing for older women site identification	Expand core and cluster model
		Delivery of Social and Affordable Housing Fund Phase 1	Implement temporary accommodation framework
YEAR 2 (2019-20)	Continue assertive outreach to support people sleeping rough in inner city districts to access housing with support	Social and Affordable Housing Fund Phase 2 delivery commences	Support to existing tenancies
		Social and Affordable Housing Fund Phase 1 delivery continues	Commence co-located homelessness health services Commence site selection for assertive outreach to people sleeping rough in areas of high need
YEAR 3 (2020-21)	Services commence	Youth Foyer services commence	Support to existing tenancies
	Continue assertive outreach to support people sleeping rough in inner city districts to access housing with support	Social and Affordable Housing Fund Phase 2 delivery continues	Facility is fitted out, staff engaged and clients attend
YEAR 4 (2021-22)	Continuation from Year 3	Social and Affordable Housing Fund Phase 2 delivery continues	Support to new tenancies
	Continue assertive outreach to support people sleeping rough in inner city districts to access housing with support		
YEAR 5 (2022-23)	Continuation from Year 4	Consider expansion of the Foyer model to new locations	Consider expansion of health and housing services to other sites

FOCUS 3: Create an integrated, person-centred service system			
WHAT WE WILL DO	<p>3.1 Improve accountability by agencies and services for homelessness outcomes in order to drive systemic change</p> <p>Who will benefit: All cohorts, with a primary focus on people with high or complex needs</p>	<p>3.2 Increase service integration and collaboration to enhance person-centred responses</p> <p>Who will benefit: All cohorts, with a primary focus on people with high or complex needs</p>	<p>3.3 Improve services by increasing trauma-informed care and culturally appropriate practice</p> <p>Who will benefit: Aboriginal people, people with past experience of trauma, people with multiple or complex needs, rural and regional areas</p>
YEAR 1 (2018-19)	Complete Human Services Outcomes Framework (HSOF) for homelessness	Finalise and implement evaluation framework	Identify best practice training materials and mechanisms for rollout of trauma-informed care and Aboriginal cultural capability training
	Design and release homelessness dashboard	Develop transition planning guidelines with Health to support people accessing AOD treatment and housing	
	Planning commissioning for outcomes for Specialist Homelessness Services Introduce new quality system	Identify best practice training materials and mechanisms of rollout of trauma-informed care and Aboriginal cultural capability training	
YEAR 2 (2019-20)	Begin implementation of HSOF	Evaluation of strategy and individual actions under way	Commence rollout of trauma-informed care and Aboriginal cultural capability training
	Continue development of the homelessness dashboard		
	Planning commissioning for outcomes for Specialist Homelessness Services Implement new quality system	Commence rollout of trauma-informed care and Aboriginal cultural capability training	
YEAR 3 (2020-21)	Complete implementation of HSOF	Continue evaluation of strategy and individual actions	Continue rollout of trauma-informed care and Aboriginal cultural capability training
	Stage 1 implementation commissioning for outcomes: new contracts for Specialist Homelessness Services	Continue rollout of trauma-informed care and Aboriginal cultural capability training	
	Continue implementation of new quality system		
YEAR 4 (2021-22)	Continue implementation of commissioning for outcomes	Continue evaluation of strategy and individual action	Continue rollout of trauma-informed care and Aboriginal cultural capability training
	Continue implementation of new quality system	Continue rollout of trauma-informed care and Aboriginal cultural capability training	
YEAR 5 (2022-23)	Continue implementation of commissioning for outcomes	Continue evaluation of strategy and individual action	Continue rollout of trauma-informed care and Aboriginal cultural capability training
	Continue implementation of new quality system	Continue rollout of trauma-informed care and Aboriginal cultural capability training	

Acronyms

AIHW	Australian Institute of Health and Wellbeing
AOD	Alcohol and other drugs
BHCHP	Boston Health Care for the Homeless Program
BOCSAR	Bureau of Crime Statistics and Research
CHP	Community Housing Provider
DFV	Domestic and Family Violence
FACS	Department of Family and Community Services
HASI	Housing and Accommodation Support Initiative
HSOF	Human Services Outcomes Framework
LEAP	Leadership, Engagement and Professional training
LGBTIQ	Lesbian, gay, bisexual, transgender, intersex, queer or questioning
LHD	Local Health District
MH	Mental Health
NDIS	National Disability Insurance Scheme
NGO	Non-government organisation
NSW	New South Wales
OSII	Office of Social Impact Investment
SAHF	Social and Affordable Housing Fund
SHS	Specialist Homelessness Services
STEP	Supported Transition and Engagement Program

Glossary

Term	Definition
Affordable housing	Housing provided by housing provider organisations (usually community housing providers) that meets the needs of people on very low to moderate incomes and is priced according to income so that people can afford other basic living costs.
Assertive outreach	A purposeful, proactive and persistent approach that has the common goal of ending homelessness for those who are sleeping rough. It is conceptualised as part of a broader, integrated and intentional policy response that requires both a multidisciplinary team and the availability of long-term housing. It aims to work with people over the medium to long-term as a means to assist people to access housing and sustain their tenancies post-homelessness.
Boston Health Care for the Homeless Program	A program that targets people experiencing homelessness by providing health and dental care, assistance to apply for benefits, accommodation and medical respite.
Case management	A process whereby an individual and/or family's needs are identified and services are coordinated and managed in a systematic way. The core elements of case management include assessment, case planning, implementation (service delivery), monitoring and review.
Census	The Census of Population and Housing is a descriptive count of population of Australia on one night, and of their dwellings, held every five years.
Chronic homelessness	An episode of homelessness lasting six months or longer or multiple episodes of homelessness over a 12 month period or more.
Commissioning for outcomes	Places a person's outcomes at the heart of the service system. It is a needs-led and outcomes-focused process.
Common Ground	A housing model based in Camperdown in inner city Sydney using Housing First principles. The program provides services that are tailored to individuals in order to help people transition to permanent accommodation and assist with other needs. See also 'Housing First'.
Communities Plus	A new generation of integrated housing developments being delivered in partnership with the private, non-government and community housing sectors. The program includes sites in metropolitan Sydney and regional NSW.
Core and cluster accommodation	This form of accommodation creates a set of individual 'satellite' private units on a piece of land (cluster) connected to a communal area for shared living and support needs (core). Needs are supported by centrally located staff.
Crisis accommodation	Accommodation for people who are experiencing or are at risk of homelessness, which provides short-term accommodation including refuges, shelters, motels, flats, boarding houses or caravan parks.

Term	Definition
Culturally appropriate service delivery	Delivery of programs and services so that they are consistent with the cultural identity, communication styles, meaning and value or normative systems and social contexts of clients, program participants and other stakeholders.
Domestic and family violence	Includes any behaviour, in an intimate or family relationship, which is violent, threatening, coercive or controlling, causing a person to live in fear.
Early intervention	Actions designed to reduce the impact of homelessness when it does occur and reduce the risk factors for longer-term homelessness. These strategies are targeted at individuals who have recently become homeless, aiming to ensure that short periods of homelessness do not become chronic.
Foyer models	Purpose-built centres offering young people a safe and affordable place to live while they engage in education, training and employment.
Homeless	Where a person does not have suitable accommodation which meets basic needs including a sense of security, stability, privacy, safety and the ability to control living space. May be: <ul style="list-style-type: none"> • Primary: no conventional accommodation or shelter; • Secondary: living in shelters, emergency accommodation, refuges and couch surfing; • Tertiary: living in accommodation that falls below minimum community standards.
Household	A group of two or more related or unrelated people who usually reside in the same dwelling, and who make common provision for food or other essentials for living. A household can also be a single person living in a dwelling who makes provision for his or her own food and other essentials for living, without combining with any other person.
Housing affordability	The cost of housing compared with the financial situation of households. Generally refers to housing across major cities, states or nationally, as opposed to individual households.
Housing First	Housing First means offering affordable housing to people experiencing homelessness as quickly as possible, removing potential barriers and providing the supports they need to avoid returning to homelessness.
Human Services Outcomes Framework	A cross-agency framework which specifies seven wellbeing outcomes for the people of NSW: safety, home, economic, health, education and skills, social and community and empowerment. Provides a tool to support agencies and NGOs understand and measure the extent to which positive outcomes are achieved, and is used to guide human services planning, delivery and evaluation.
Individual support packages	An allocation of funding to a person in order to purchase the supports which will best meet their ongoing needs and help them to support their goals. It enables choice and individualised preference to be incorporated in government service delivery.
Mainstream services	Generalist services provided by either government or non-government agencies that are available to the general population, e.g. hospitals, schools, correctional systems.

Term	Definition
Medium-term accommodation	Medium term accommodation (or transitional housing), usually provided or managed by a specialist homelessness service and not expected to be long term or permanent.
Micah Project's Integrated Healthcare and Supportive Housing model	Consists of a multidisciplinary team of health, psychosocial, and housing professionals. Enables tenants' needs to be identified, external resources accessed, and the delivery of a coordinated response that ensures that external service providers and the on-site service providers are operating in a way that realises tenant identified objectives.
Michael's Intensive Supported Housing Accord (MISHA)	A housing model based on the Housing First approach. It is a philanthropically funded initiative based in Parramatta which aims to support men in long-term accommodation, wrap-around services and intensive case management. See 'Housing First'.
Non-government organisation (NGO)	Includes organisations operating in the community or private sectors.
Not-for-profit sector	Community organisations providing a broad range of social services, including in relation to homelessness, housing, education, health, conservation and recreation.
Older women	Women aged 55 years and over.
Out-of-home care	The care of a child or young person who is in the parental responsibility of the Minister, or a non-related person, residing at a place other than their usual home, and by a person other than their parent, as a result of a Children's Court order that lasts more than 14 days, or because they are a protected person.
Person-centred	Placing a person at the centre of service delivery to ensure a high standard of customer service and the best outcomes are achieved for each individual.
Prevention	Actions to prevent someone who is at risk of homelessness from experiencing homelessness. Prevention activities identify people at risk of homelessness and support them to reduce risk factors and build protective factors.
Protective factors	Conditions or attributes of individuals, families, communities, or the larger society that, when present, promote wellbeing and reduce the risk of negative outcomes.
Psychosocial support	A range of supports which may include mental health treatment and counselling, education, social support and group support. It aims to address ongoing psychological and social problems experienced by individuals which may increase the risk of homelessness.
Public housing	Long-term, affordable housing for people on low incomes who are unable to rent privately. The properties are managed by FACS.
Repeat homelessness	The experience of multiple periods of homelessness in a reporting period.
Risk factors	Factors or triggers that can contribute to or increases the likelihood of homelessness.

Term	Definition
Risk of homelessness	A person is at risk of homelessness if they are at risk of losing their accommodation. A person may be at risk of homelessness if they are experiencing one or more of a range of factors or triggers that can contribute to homelessness.
Service integration	Structures and processes that attempt to bring together the participants in human services systems with the aim of achieving goals that cannot be achieved by those participants acting autonomously and separately.
Sleeping rough	Sleeping in uncomfortable conditions without housing and without shelter, often on the streets, in parks or in a car.
Social and Affordable Housing Fund	An innovative approach to the delivery of social and affordable housing in NSW. The SAHF model increases the supply of housing through outcomes based contracts with nominated service providers.
Social housing	Rental housing provided by not-for-profit, NGO or government organisations to assist people who are unable to access suitable accommodation in the private rental market. It includes public, Aboriginal and community housing.
Social impact investment	Investment seeking to generate social impact alongside financial return. It brings together capital and expertise from the public, private and not-for-profit sectors to achieve a social objective.
Specialist homelessness services (SHS)	Assistance provided by a specialist homelessness agency to a person aimed at responding to or preventing homelessness. Support includes accommodation provision, assistance to sustain housing, domestic/family violence services, mental health services, family/relationship assistance, disability services, drug/alcohol counselling, legal/financial services, immigration/cultural services, other specialist services and general assistance and support.
Specialist services	Provide services and support for people with particular issues such as those living with mental health issues, drug and alcohol issues or a disability.
Step-up/step-down model	A health program which has graded care according to need.
Structural drivers	Factors contributing to homelessness that are beyond an individual's control, such as the condition of housing and labour markets.
Supportive housing	Housing which incorporates additional supports, such as case management and psychosocial supports.
Temporary Accommodation	Emergency accommodation in low-cost hotels, motels, caravan parks, boarding houses and similar accommodation for people who are experiencing housing crisis or homelessness. Usually 1-2 days in duration and linked to homelessness services.

Term	Definition
Tierney House	A 12-bed residential unit assisting people experiencing homelessness in inner city Sydney to access health care. It provides a safe and stable environment where residents can access assessment, treatment and support from St Vincent's Hospital and local health and support services.
Trauma-informed care	Provides a framework for service delivery that is based on knowledge and understanding of how trauma affects people's lives, their service needs and service usage.

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