

Evaluation of the Rough Sleepers Case Management Pilot Project

Epsilon Consulting
for the Homeless Agency

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Foreword

I am very pleased to welcome this report on the *Evaluation of the Rough Sleepers Case Management Pilot Project*. The report has been prepared by the IPA Research Division working in association with Epsilon Consulting on behalf of the Homeless Agency.

The Homeless Agency is a partnership body that was established as part of the Government strategy on homelessness in May 2001. It is responsible for the planning and co-ordination of the delivery of quality services to people who are experiencing homelessness in Dublin. The Homeless Agency co-ordinates homeless services in Dublin, provides training and other supports, monitors and evaluates the effectiveness of services, carries out research and administers statutory funding to homeless services.

The Homeless Agency is comprised of voluntary and statutory agencies, who are working in partnership to implement agreed plans for the delivery of services people who are homeless, assisting them to move rapidly to appropriate long term housing and independence. A Consultative Forum advises the Board of Management.

This report examines the problems encountered in accessing suitable stable accommodation appropriate to the needs of rough sleepers. The Homeless Agency launched a three-month Rough Sleepers Case Management Pilot Project, which involved the case management of nine of the most challenging rough sleepers known to the outreach teams.

The objectives of this report were to see how to improve the supports that are offered to people experiencing long term homelessness through greater inter agency working.

Since the writing of this report the Homeless Agency has recruited for an Integrated Service Co-ordinator whose primary role will be to support the development of case management within the sector.

Dr Derval Howley
Director · Homeless Agency

The logo for the Homeless Agency, featuring the words "HOME", "LESS", and "agency" stacked vertically in a bold, sans-serif font. "HOME" and "LESS" are in black, while "agency" is in white. The text is set against a light blue square background.

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The Homeless Agency has commissioned and funded this report. Responsibility for it (including any errors or omissions) remains with the Consultants. The views and opinions contained in any reports arising from this contract are those of the authors and do not necessarily reflect the views or opinions of the Homeless Agency

i Introduction

In Spring 2004, a case and care management initiative was launched between the Homeless Agency (the Agency) and five outreach teams. The initiative targeted nine of the most challenging rough sleepers known to the outreach teams. As this initiative progressed, problems were encountered in accessing suitable stable accommodation appropriate to the needs of the rough sleepers.

Therefore, the Homeless Agency launched a three-month Rough Sleepers Case Management Pilot Project which involved the case management of clients. Accommodation providers were included in the case and care management initiative in an attempt to resolve these problems. The objectives of the pilot were to test the effectiveness of the case and care management approach and to learn lessons that might inform the future use of this approach. The IPA Research Division¹ was commissioned to undertake a short evaluation of the results of the pilot project.

ii Background and Objectives of the Case Management Pilot

The arrangements and scope of the Rough Sleepers Case Management Pilot Project are set out in a document issued by the Agency. According to this document, the specific objectives of the Pilot were to:

- test the effectiveness of a case and care management approach, together with secured accommodation, in addressing the needs of up to six specified rough sleepers
- inform the development of a model of case and care management to be applied to the homeless sector

¹ The IPA Research Division is working in association with Epsilon Consulting

iii Objectives of the Evaluation

The overall objective of the evaluation was to reach a conclusion on the workings of the Pilot and the effectiveness of its results. Four specific terms of reference for this evaluation were agreed, as follows:

- a) Assess the working of the pilot project process as set out in section 2.8 of the case management framework.
- b) Assess the care management role of the Homeless Agency.
- c) Assess the degree of success of the case and care management approach, and problems encountered, from the perspective of the agencies involved and the targeted rough sleepers.
- d) Make recommendations pertinent to the development of a model of case and care management in the light of the findings from the study.

iv Scope of Work

Although the Pilot project formally ran from August until the end of October 2004, the origins of the case workings were a series of activities in the Spring of 2004. A survey of rough sleepers was made in the first two months of 2004 and a list of 176 clients was drawn up. From this list, a shorter list of 21 clients were identified as most in need of active support. From the end of March 2004, the outreach teams (Dublin City Council (DCC), Dublin Simon and Focus Ireland) began to apply a case working approach to nine clients.

The case working approach operated through a weekly meeting of the outreach teams at the Agency where each case was reviewed and actions needed were identified. For the formal launch of the Pilot, the accommodation providers were included through their involvement in an extension of the weekly meeting. In September 2004, a further six clients were added to the case management list.

As the evaluation was conducted during the Autumn, the scope of the evaluation was extended to cover the case working with the original nine clients in the period from April 2004 to October 2004. The case working with the further six clients from September was not examined.

v Methodology and Organisation of the Evaluation Report

The background documentation for the Pilot and the files kept for each of the nine clients were reviewed. A SWOT (Strengths, Weaknesses, Opportunities, Threats) analysis drawn up by the outreach teams at the end of October was also reviewed.

Interviews were held with officials from the Agency, DCC, and several outreach teams.

The report is organised with separate chapters dealing with each of the specific evaluation issues.

- Chapter 1: Assesses the working of the Pilot Project process as set out in the Case Management framework
- Chapter 2: Assesses the care management role of the Homeless Agency,
- Chapter 3: Evaluates the degree of success of the Care and Case management approach as well as problems encountered.
- Chapter 4: Recommendations for the development of a model of case and care management in the light of findings from this evaluation are then presented in the final chapter.

vi Evaluation of the Pilot

Implementation of the Pilot

The initial case and care management approach was successful in improving the quality and extent of support offered to the targeted rough sleepers. All nine people were placed in accommodation and were better off at the conclusion of the pilot than they had been at the outset. Two rough sleepers were settled in supported housing and this is considered by the outreach teams to be a considerable achievement. Overall, the improved communication with rough sleepers is generally seen as a vindication of the merits of the case and care management approach.

The success of the pilot depended on the availability of suitable accommodation. Between April and August 2004 two services (DCC and Dublin Simon) provided this and were willing to bend their rules in respect of some of the individuals concerned in support of the pilot. The full participation of accommodation providers in the pilot from August onwards was limited as key decisions on the rough sleepers to be included in the original list had already been taken before the pilot commenced. Although the accommodation providers made beds available to the pilot, these were not all taken up. The list of rough sleepers was extended by six persons in September, in consultation with the accommodation providers and they then participated in the pilot.

Care Management Role

The care management role was allocated to the Homeless Agency but the full nature of the role was not applied during the pilot period. There was a confusion between the technical and administrative elements of the role and a lack of clarity over the authority of the Agency representative at the weekly meetings. No training was provided as part of the pilot and this may have contributed to the lack of clarity over role definition. An independent facilitator was used for the weekly meetings of the case managers and the accommodation providers. The facilitator is generally seen to have discharged his role effectively and to have made a positive contribution to the pilot results.

Effectiveness of the Pilot

The evaluation conclusion is that the pilot was effective in terms of both objectives.

There were definite gains from the perspective of the rough sleepers.

The way in which the accommodation providers were brought into the pilot was not wholly satisfactory. There was considerable learning (which was one of the aims of the pilot) about the importance of interagency communications, the need for meetings and good co-ordination and the importance of flexibility in the application of rules to underpin a basic change in approach from accommodation provision to client support.

The pilot casts doubt on the traditional classification of accommodation as emergency or transitional as, in some cases, supported long term housing was identified as the immediate requirement for particular rough sleepers.

In terms of informing the future wider adoption of the case and care management approach, important lessons were learned by the outreach teams. The allocation of responsibilities between case managers, key workers and outreach teams has been discussed and the implications of the case and care management approach are better understood. The need for co-ordination among case workers across outreach teams is also appreciated.

The overall evaluation conclusion is that the pilot has demonstrated the viability and appropriateness of the case and care management approach for this stage of the homeless strategy.

vii Recommendations

While in many ways the Rough Sleepers pilot project can be viewed as being successful, it was limited in terms of its duration, the number of rough sleepers involved, project management arrangements, specified performance indicators and the involvement of the accommodation providers. The principal recommendation is that the case and care management approach should be implemented as a wider scale project in 2005 to build on the achievements so far and take the case and care management approach to its next stage of implementation. It is recommended that this more extensive implementation of case management be organised as follows in 2005:

- A formal project plan should be made and agreed with all participants
- The project plan should use the logical framework (i.e. set both overall and specific objectives and identify measurable indicators of achievement)
- A project management team should be established. There should be an overall manager with executive decision making authority for all project activities
- The objectives and performance indicators for the project should be stated in more specific terms of quantity, quality and time. Specific targets should be agreed in respect of each individual rough sleeper involved in the project

- Preparatory training for the project should be provided. The project should include an identification of training and competency needs to support the mainstreaming of a case and care management approach
- Outreach teams, accommodation providers and the Agency should have an equal voice in planning the project and, specifically, in the selection of the rough sleepers to be included. Accommodation providers should be involved in the initial assessment of the accommodation needs of the rough sleeper group as a whole. The allocation of the rough sleeper group to suitable accommodation should take place before the case working project begins
- The funding of outreach teams and accommodation providers should be used as an instrument to underpin their participation in the project
- The workings of case management should be reviewed at periodic intervals
- Case management should be targeted at a more significant and diverse group of rough sleepers. The size of the group will be determined by the availability of key workers and suitable accommodation options
- An independent facilitator should be used for meetings of the outreach teams and accommodation providers involved in the project
- The care management role needs further consideration by the Homeless Agency but should be separated from its administrative support for project activities. Some experimentation with different options for providing the care management role should be made
- Specific attention should be paid to the documentation of case management activities – through the use of templates, and greater use of LINK
- There should be an interim evaluation of case management at an appropriate interval. The evaluation arrangements should be made at the outset
- A network of case managers and of key workers should be established (if not already in place).

The broader recommendations of this report will be available in the report on the recommendations for all reports commissioned by the Homeless Agency under the Action Plan *Making it Home 2004–2006*.

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