This report evaluates a pilot project offering personalised budgets to rough sleepers in the City of London.

The personalised budgets pilot aimed to test a new way of working with long-term rough sleepers who were very resistant to moving off the streets in the City of London. It formed part of the national and local government strategy to end rough sleeping. This report presents findings from a research-based evaluation of the pilot project. It examines the impact of the project and explores the reasons for its success.

The report:

- presents the outcomes of the pilot for individuals involved, in terms of accommodation, support needs and quality of life;
- explores how the personalised approach, the personalised budget and other factors contributed to these outcomes;
- explores common stages in the journeys that people made from the streets and into accommodation; and
- considers the sustainability of outcomes and possibilities for replication and expansion.
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This study evaluated a new way of working with long-term rough sleepers. It examined the impact of a pilot project offering personalised budgets to rough sleepers in the City of London, and explored the reasons for the project’s success.

Key points

• Fifteen people who had been sleeping rough for between 4 and 45 years were offered a personalised budget. By the time of the evaluation, the majority were in accommodation (seven) or making plans to move into accommodation (two).

• Those who had moved off the streets talked positively about their lives in accommodation and had begun to make plans for the future, including taking courses, reconnecting with family, and addressing physical and mental health and substance misuse problems.

• The personalised budget fulfilled several functions. It helped to establish a trusting relationship with the project coordinator; gave people an incentive to move into and stay in accommodation; and supported people in maintaining tenancies by responding to crisis and planning for a future.

• Many people experienced high levels of anxiety around moving into accommodation. Long-term personalised support after resettlement, provided by one dedicated worker, was seen as essential to maintaining tenancies.

• Everyone involved – both those with personalised budgets and professionals – believed that this personalised approach could work with other rough sleepers.

• The authors conclude that the personalised support provided to individuals was as important to the success of the project as the provision of personalised budgets. The personalised approach has brought people elements of choice and control not provided by standard offers of support, alongside intensive support from one trusted worker.

Background

The personalised budgets pilot project has tested a new way of working with long-term rough sleepers in the City of London who were very resistant to moving off the streets. The project has been delivered by Broadway, a London-based homelessness charity. It has been funded and supported by the City of London Corporation and Communities and Local Government (CLG) as part of their strategy to end rough sleeping.
About the research

This action research study evaluated the pilot project undertaken by Broadway’s specialist research team in partnership with front-line staff, with support from Lancaster University. Regular reflective meetings were held with the project coordinator throughout the pilot to capture ongoing learning. In-depth interviews were conducted with eight recipients of personalised budgets and a number of project stakeholders. The report presents the findings of the evaluation in June 2010, 13 months after the start of the project.

The personalised budgets project

The main resources for the pilot were a full-time coordinator and a budget that allowed £3,000 per person for a personalised budget. Most people spent less than this, while a few spent more. In the model developed in the pilot, rough sleepers were:

- asked what they needed to help them off the streets;
- told there was a personalised budget available for them to help them achieve this; and
- supported to develop an action plan which was agreed by the local authority.

Participants had to choose a broker to help them write a plan for their personalised budget; they all chose the project coordinator as their broker. Unlike the personalisation model used in social care, there was no resource allocation system and no formal assessment of participants’ needs.

In all, 15 long-term rough sleepers were offered a personalised budget plus flexible, personal support from the project coordinator; 13 accepted. These 15 were targeted because they were the hardest to reach using standard methods.

Results

The results achieved for these long-term rough sleepers have far exceeded many people’s expectations of the project. Of the 15 who were offered a personalised budget, seven have moved into and remain in accommodation, which they have maintained for between four and eleven months. A further two were making plans to move into accommodation.

*It has made it possible for me to stay [in accommodation]. There’s a good chance I could have been back out there by now if not for the budget.*

Former rough sleeper

Despite previously being reluctant to leave the streets, eleven people moved into accommodation; in four cases this resulted in negative outcomes such as abandoning the accommodation, and imprisonment. Several people moved into hostels, a form of accommodation they had repeatedly refused to consider in the past. Of the seven resettled people interviewed for the project evaluation, all but one (who subsequently abandoned his accommodation) talked positively about their lives in accommodation, and had begun making plans for a long-term future in accommodation.

This suggests that even long-term rough sleepers who say that they do not want to go into accommodation can choose to do so when they are in control of the conditions for making such a move. Throughout the interviews, many people used the phrases ‘I chose’ or ‘I made the decision’ when discussing their accommodation and the use of their personalised budget, emphasising their sense of choice and control.
It empowers people, it gives choices, I think it can make a difference.
Street Population Manager, City of London Corporation

Wider results included people registering for courses, reconnecting with family, developing independent living skills (such as cooking and paying bills), and addressing physical and mental health and substance misuse problems. Five people who previously did not claim welfare benefits set up claims, and four have maintained these.

How the personalised budget worked

Participants were not told how much money was available in their budget. Instead, they were asked what they wanted in order to help them. Total spending in the first year averaged £794 per person, compared with the £3,000 allowed.

The budget worked in different ways in different circumstances. At an early stage, it facilitated people’s engagement with the project coordinator, building trust and demonstrating that the personalised approach was different from previous offers of help. When someone was contemplating moving off the streets, the budget could help them make the decision; for example, they could buy furniture or a television to make the move more comfortable and desirable. At later stages, the budget could be used to help people to sustain accommodation – for example, by paying off small arrears or by buying gas, electricity or food when there were problems receiving benefits. The budget could also help people to plan for a future in accommodation, for example by paying for courses.

People’s journeys

Many participants described similar features in their journeys off the streets and into accommodation.

Pre-engagement

Long-term rough sleepers in the City of London had a strong sense of pride and resilience. Offers of help and support before the personalised budgets project did not match their needs or preferences. This group often perceived themselves as different from people who went into hostel accommodation. There was strong resistance and even antagonism towards outreach workers, who were viewed as part of the establishment, aiming to force rough sleepers into accommodation they did not want to go into.

The option of going to homeless organisations [for support] didn’t enter my mind. I know I’m an entirely different creature from most homeless people.

Personalised budget recipient

I couldn’t stand the sight of [outreach worker]. She belonged to the establishment. I despised her.

Personalised budget recipient

Key to breaking down these barriers among this group was building up a relationship with the project coordinator and being asked about what they wanted rather than being presented with a repeated offer of hostel accommodation. Although the personalised budget and the coordinator’s time were intended to help long-term rough sleepers to move off the streets, it was up to individuals how they went about this: they had control over the process.
Engagement

The context of taking an assertive approach to ending rough sleeping in the City of London impacted on some people’s decisions to engage with the project. For example, one person moved into accommodation because there was now far less free food available on the streets.

Project stakeholders considered it very important that people knew that the personalised budget was to help them ‘get off the streets’. A clear action plan specified how money would be spent and the actions required of the coordinator, the person with the personalised budget, and others.

The personalised service offered by the project coordinator was crucial in facilitating change. It had to be genuinely distinct from the standard outreach service. Areas of difference included:

- the rough sleeper choosing where to meet the coordinator rather than being approached at their sleep site;
- the coordinator largely working on a one-to-one basis rather than in a pair;
- the coordinator spending a lot more time with people than is typically possible on an outreach shift; and
- the rough sleeper guiding the conversation rather than the worker focusing on a quick move into accommodation.

I’ve got to be honest here, it wasn’t just the individual budget, it was the fact there was [coordinator] there as well … We was meeting [regularly] to discuss it, and I’d actually gone from the stage of wanting nothing to do with these people, to actually looking forward to seeing them. So it’s not just the actual money. It’s the way it’s being handled. In this case it’s [coordinator] … All the people are dealt with as individuals.

Personalised budget recipient

People who had been sleeping rough for many years often found it hard to think of what they wanted or needed. They required support to help them envisage a life away from the streets and what material things or services would help with this.

Moving into accommodation and remaining in it

A high level of anxiety was associated with moving into accommodation after between 4 and 45 years sleeping rough. Professionals involved in the project thought it likely that for many people this huge life change brought up hidden trauma associated with past experiences.

Most people settled in over time and adapted to their new accommodation. Some started courses or began engaging with services. Some maintained their old social networks, but others spoke about developing new networks and moving away from an old lifestyle and identity.

I’ve been able to break away slowly from the rough sleeper lifestyle. I still keep in contact with some of my friends … I use two [day centres] … but the rest of them I don’t bother. It’s [hard] ‘cos it’s where all your friends are … If you’re not careful you end up isolated.

Personalised budget recipient

Four people had negative outcomes from their resettlement, including abandoning their accommodation, and imprisonment. Challenges in dealing with money, particularly benefits claims, were a source of anxiety and a risk factor in many tenancies. The coordinator helped several people to return to accommodation
after they had left it. Having a consistent worker involved in the move from street to accommodation was viewed as key in helping people to maintain their tenancies. A number of instances of accommodation being abandoned occurred at times when the coordinator was on leave; hence it was found that careful handover and cover arrangements were important. Long-term personalised support, perhaps for several years, was also seen as essential for people to maintain tenancies.

**Conclusion**

Agreement was widespread among both those with personalised budgets and professionals involved in the project that this personalised approach could be expanded to other rough sleepers in the City and beyond.

*A fantastic opportunity to approach work with individuals differently ... We'll certainly encourage the approach.*

CLG official

A different way of working with personalised budgets may be required for people with drug problems. The one drug user in the pilot sold items purchased with his budget to fund his drug use, suggesting that support for drug use needs to be in place before expensive items are bought.

Key features for replication in other areas are:

- support from the local authority, including quick access to money;
- clarity about who is eligible and what the budget is for;
- an action plan to give responsibility to the coordinator and the recipient of the personalised budget; and
- an intensive and consistent approach to working with people.

The pilot has received additional funding to continue until March 2011. After that it will become a mainstream part of the work of Broadway’s outreach team in the City of London.
In 2008, there was a core group of 15–20 people who had been sleeping rough over many years in the City of London and who were very resistant to moving off the streets. The Personalised Budgets pilot for entrenched rough sleepers was set up to test a new way of working with this group, drawing on recent policy developments in adult social care. This report presents findings from an evaluation of the pilot project.

Personalised support

In 2008, the government published its rough sleeping strategy document: No One Left Out: communities ending rough sleeping, which committed to ending rough sleeping by 2012. In 2008, the Mayor of London also pledged to end rough sleeping in the capital by 2012. A range of measures was introduced to achieve this goal including a commitment to pilot personalised support to long-term rough sleepers. In May 2009, as part of this work, Broadway began a pilot project of personalised support for rough sleepers. The project was funded and supported by the City of London Corporation and Communities and Local Government, with advice from the social care social enterprise, In Control. Three other national pilots, in Nottingham, Northampton, and Exeter and Devon, were also funded by Communities and Local Government.

Personalisation ‘puts the person who needs support in control’ of the services they receive (In Control, 2009), i.e. it enables people to tailor support to their individual needs. The principle was adopted by the government in policy reforming adult social care when they published Putting people first: a shared vision and commitment to the transformation of adult social care in 2007. The City of London is a leading local authority in adopting a personalised approach. In the financial year 2009/10, 49 per cent of adults in receipt of adult social care in the City of London had a personalised or ‘Self-Directed Support’ package (the target was 50 per cent). The target for 2010/11 is 65 per cent (figures provided by City of London Social Services Department).

Many providers are beginning to explore personalisation within the field of homelessness (see Look Ahead Housing and Care and the London Borough of Tower Hamlets, 2010), but such work is innovative and exploratory; personalisation has yet to be integrated into homelessness service provision. The four pilot projects funded by Communities and Local Government were amongst the first attempts to personalise support for rough sleepers and experimented with ways in which this could be done.

In social care, there are a number of key elements of personalisation (also termed self-directed support). Firstly, people undergo a formal needs assessment, and a Resource Allocation System (RAS) determines how much money they are entitled to. A support plan is then written stating what support they need and what they would like to achieve in their lives. This must then be agreed by the local authority. Those who wish to can appoint a support broker to help plan and manage their support (adapted from In Control, 2009).

Personalisation in the pilot project in the City of London differed from personalisation in social care in several key ways:

• Potential personalised budgets recipients did not undergo a formal needs assessment.
There was no Resource Allocation System.

Recipients were obliged to appoint a broker.

People could only spend their personalised budget on things which would help them move into and stay in accommodation.

However, the approach had the following elements in common with personalisation in social care:

- People wrote a support plan (or ‘action plan’) outlining what support they needed and what they would like to achieve.
- The action plan was agreed by the local authority.

Instead of a formal needs assessment, people’s needs were identified in their action plans and through discussions with their broker. Resources were allocated according to these needs, and action plans and allocated resources could be revised over time. An amount of £3,000 was budgeted for each personalised budget holder; many spent significantly less than this, but some spent more. The personalised budget was an additional sum of money allocated for the pilot project rather than a reallocation of existing expenditure. In contrast with most recipients of social care, people taking part in this project were not already receiving the support to which they were entitled; although they were already receiving a service from the outreach team operating the City of London, many of them did not engage with this service.

Rough sleeping in the City of London

The City of London Corporation is one of 33 local authorities in London. It covers a small area – also known as the Square Mile – and has a high concentration of financial and business services.

Rough sleeping is particularly prevalent in the City of London. In 2009/10, 338 people were seen by outreach teams sleeping rough in the City of London; of these, 193 had also been seen sleeping rough in previous years (data from Broadway, 2010). There were more rough sleepers seen in the City of London than in any other London borough except Westminster.

The City of London has a unique rough sleeping population. Among other groups, it attracts older rough sleepers who are drawn to the area by the comparative safety and quiet of primarily non-residential streets. A small group of rough sleepers in the City of London have been on the streets for many years. The project targeted the 15 most difficult to engage with: people who had been sleeping rough for between 4 and 45 years, who had consistently refused standard offers of support, and often had poor relationships with outreach teams.

Service provision for rough sleepers in the City of London

The ‘standard offer’ made to rough sleepers both in the City of London and nationally is a range of support with problems (such as obtaining identification, setting up benefits claims, referral to drug or alcohol services) and referral to a hostel.

Support for rough sleepers in the City of London is provided by Broadway’s street outreach team, which conducts its work from early morning until late into the night. The team makes contact with people sleeping on the streets and links them with appropriate services such as healthcare, accommodation and learning opportunities. It offers pathways for people into housing, detoxification, employment, medical services and the benefits system. In 2008, the City of London Corporation adopted an assertive approach to rough sleeping, which involves the street outreach team, drug and alcohol services, mental health
services and the Police working in partnership. The approach aims to challenge lifestyles which could be damaging whilst offering rough sleepers routes to enable positive change, through targeted and extensive contact from the outreach team and the Police.

These approaches have been effective in decreasing the numbers of rough sleepers in the City of London. Street count figures, which capture the number of people seen sleeping rough on one night, have decreased from 63 in April 2008 to 48 in May 2008, 38 in March 2009 and 29 in March 2010.

Although there are no day centres in the City, there is easy access to those in surrounding boroughs, where food, showers, clothes and support can be obtained.

The accommodation option generally available to rough sleepers is hostels for homeless people. From a hostel (usually after one or two years), people can move on to live in supported housing or an independent tenancy. However, problems have been identified with this route. Research conducted with very long-term rough sleepers in 2009 (Broadway and NatCen, 2009) showed that they did not want to go into hostels, often because of their own or others’ negative experiences of hostels in the past. It found that some would be willing to go into hostels on their own terms ‘for short periods, on the understanding that they could move on into their own tenancy quickly, or they would like to move straight from the streets to their own tenancy’. Outreach workers ‘stressed the importance of hostels being flexible and understanding the difficulties of the transition from street to hostel’. However, this flexibility was not always provided.

In 2010, the City of London and the homelessness charity St Mungo’s opened The Lodge, a bed and breakfast-style accommodation for older rough sleepers. It is an innovative alternative to the hostel route which gives people more independence over their lives than the traditional hostel.

‘Rough Sleeping 205’, a London-wide Communities and Local Government project overseen by the London Delivery Board, recently identified the most entrenched rough sleepers in London. Coordinated case management enabled boroughs and providers to work flexibly with this group, and had enabled around 140 individuals to come in off the streets by November 2009 (Communities and Local Government, 2009). Several of the people offered personalised budgets had been identified by the ‘205’ project.

The pilot project

The project aimed to explore a new way of supporting entrenched rough sleepers – a group of people for whom standard support services did not work – to move and stay off the streets and make positive changes in their lives. Each person identified as suitable for the project was entitled to a personalised budget of a maximum of £3,000. Budgets could be spent on anything of people’s choosing which would help them move off and stay off the streets.

Fifteen long-term rough sleepers were targeted for the personalised budgets project. They were targeted because they were the hardest-to-reach people within the City, for whom the standard approach was not working. They had been sleeping rough for between 4 and 45 years. All had repeatedly refused offers of accommodation, and some became agitated, angry or frustrated when offered accommodation. Several had previously abandoned hostels. Many did not claim benefits, surviving on money found on the street, casual work, and free food and clothes provided by day centres. All were male; all but four were over 50; the majority were White British, three were White Irish, one was Black British and one person was of mixed race.

Because the group consisted of people who chose not to engage with outreach teams, little was known in any depth about their histories or support needs. Thirteen were known to have physical health problems and nine to have mental health problems. Five had problematic alcohol use and one was a problematic drug user. Multiple, complex needs were less prevalent in this group than in the general homeless population.

The project was conducted by a Personalised Budget Coordinator in a discrete full-time role based within the street outreach team. The coordinator had previously worked as an outreach worker in the area and was familiar with the people to whom the personalised budget was offered. People who engaged with
the project worked with a broker of their choice to create an action plan. In practice, each person chose the project coordinator. The action plan specified how they would spend the budget and how this would help them achieve agreed outcomes, and included deadlines and responsibilities for both the person with the personal budget and the coordinator. The coordinator then worked with people to support them to achieve these goals. The coordinator also had access to a credit card and petty cash of £500.

A steering group, on which were represented the City of London Corporation, Broadway, Communities and Local Government, In Control and the Department of Health, oversaw the project and met once a month to provide advice and monitor progress. The City of London’s Street Population Manager chaired the steering group and authorised the money allocated to each person.

The evaluation

The project was evaluated by Broadway’s specialist research team in close partnership with the project coordinator, drawing on an action research approach. The project was supported by Lancaster University, and by the Joseph Rowntree Foundation. Regular meetings were held with the project coordinator throughout the project to capture ongoing learning; see Appendix I for a detailed outline of the evaluation methodology. In-depth interviews were conducted with eight personalised budget recipients and a number of project stakeholders including steering group members and other professionals working with the group of rough sleepers involved. The researchers also attended the project steering group meetings. This report presents the findings of the evaluation at June 2010, 13 months on from the project’s commencement.
1 Outcomes

Summary

Fifteen people were offered a personalised budget alongside flexible, personalised support from the project coordinator, and thirteen accepted. The outcomes achieved for these people far exceeded many people’s expectations of the project.

Despite previously being reluctant to move away from the streets, eleven people moved into accommodation, and of these seven remain in accommodation. Several people moved into hostels, a form of accommodation they had repeatedly refused to consider in the past. The reasons for this are explored throughout this report.

Five people set up new welfare benefits claims which four have maintained. A range of wider outcomes were observed including having a plan for the future and better physical and mental health.

One person’s rapid move from the street to private rented sector accommodation resulted in negative outcomes including tenancy breakdown, disengagement with the project and increased drinking. This highlights the importance of ensuring that people are ready and sufficiently supported when moving into independent accommodation.

The personalised budget project provided real choice and control for people over how they engaged with services, which accommodation they moved into, and how to envision their futures and begin working towards realising their vision. The approach also required that people take responsibility in their own action plans. This was a particularly appropriate approach for a disempowered group of people.

The project cost just under £50,000 for its first year of operation. The cost per person was £4,437; this compares with an estimated annual cost of £3,120 to deliver standard outreach provision to one person. However, it is likely that people will need less intensive support from the coordinator as time goes on. Increased costs to the public purse relate to more benefits claims and higher engagement with some support services. Expected decreased costs relate to reduced outreach and Police contact and hospital admissions.

The project sought to support long-term entrenched rough sleepers to move off the street and make positive changes in their lives through flexible support and a personalised budget. Fifteen people were offered a personalised budget and thirteen accepted. This section presents outcomes 15 months from the project commencement.

Accepting a budget and moving off the streets

Figure 1 shows accommodation outcomes for the 15 people offered a personalised budget. Of the 13 people who accepted a personal budget, 11 moved into accommodation, and seven have maintained their accommodation for four to 11 months. Of the six people who are not in accommodation, two are actively planning to go in, and four are not engaging with the project. Each of these people had been sleeping rough
for between 4 and 45 years and had all stated that they did not want to move away from the streets with the support previously on offer. These outcomes far exceeded the expectations of the project steering group:

"I think when I started out I didn’t have enormous expectations … it’s gone above and beyond my expectations. I thought it would be a real challenge and I honestly didn’t expect a year down the line to have this many outcomes."

Coordinator

Of the eight people who maintained accommodation, four moved to hostels and the remaining four into sheltered housing, a therapeutic community, a Clearing House flat (accommodation provided by housing associations under the government’s Rough Sleepers Initiative) and a bed and breakfast. The two abandonments were from a private rented flat and a hostel. A third person returned to the streets after his temporary stay in private bed and breakfast accommodation came to an end, having refused several offers of other accommodation.

Of the seven accommodated people interviewed for the project evaluation, all but one (who subsequently abandoned his accommodation) reported feeling positive about their move off the streets and said that they would like to stay in accommodation for the long term:

"I would hope to stay [in hostel] for one or two years … [Then] I expect to move on. I’m on the council waiting list … But I don’t need more than a room. Ideally I’d like to live in this area."

Personalised budget recipient

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Figure 1: Acceptance of personal budget and accommodation outcomes
**Broader outcomes**

Engaging with the project and moving into accommodation had an impact on a range of other aspects of people’s lives. These included:

- New welfare benefit claims were set up for five people who had not been previously claiming benefits, and were maintained by four of these. Several people were resistant to claiming benefits due to previous problems with maintaining a claim or a sense of self-sufficiency. Obtaining a regular income is key to planning a life away from the streets.

- Improvements in physical health were reported by a number of people. The personalised budget has paid for contact lenses and a hearing aid, and moving off the streets has helped several people move away from lifestyles which had damaged their health.

- People also experienced improvements in mental health. One person is living in a therapeutic community, and another person has completed a course of cognitive behavioural therapy.

- The one person who had a serious drug problem is now engaging with a drug treatment service and is on a methadone script.

- A number of people say that they have reduced their drinking since going into accommodation.

- People are making plans for a future away from the streets. Three people have registered for courses (in IT, art, and gardening). Several people in short-term accommodation are thinking about where their next move will be.

- People have developed independent living skills, such as cooking, maintaining their homes, and paying bills.

- Several people have made plans to re-establish links with their families.

Professionals working with people receiving personalised budgets reported the difference the project made for them:

> It’s great for him … He seems very happy and positive, more so than he did before. I think he feels that his life has been more sorted out now.

  Day centre manager

> The difference is he has more quality in his life now. You look at him and he looks weller, he seems more … happy, more light-hearted.

  Coordinator

**Choice and control in the personalised budget project**

The personalised budget project provided real choice and control for people over how they engaged with services, which accommodation they moved into, and how they envisioned their futures and began to work towards realising these visions. Choice and control was available to people at all stages of their journey from the streets, from the point of engagement with the project (whether, how and where to engage), to creating the action plan and deciding what their budget should be spent on:
**Case study: the impact of the project**

Simon was sleeping rough for 18 years. He moved into accommodation ten months ago after engaging with the personalised budget pilot. He has been on a methadone script for four months, engaging with drug treatment after 20 years of heroin use.

“The script is great. I don’t know what to do with myself. I have breakfast, go to the clinic to get my script, then watch telly. I think: what can I do today? – instead of going out begging for money for gear. I’m concentrating on getting it together. I’m trying to go for rehab and detox. I just want to get myself steady first.

For some reason, for the first time in my life, everything just clicked, it feels like now I can do something. Now I’m thinking of going back home. I’ve got two kids. Hopefully by Christmas I’ll get it together. I want to get myself sorted first.

I’m happy as Larry. I never thought about going back out. [The quality of my life has improved] a lot. I’m starting to look after myself, wash and shave. I’ve got a better life, I’m starting to do something with my life.”

Anything that’s been purchased has been discussed between me and [coordinator], and it’s all come from me. Not one thing has she said ‘You need…’ It’s just that, it’s an individual budget. A lot of people don’t want to be put somewhere they don’t want to go. But [in this project] there’s no obligation to take a place.

The budget gives us a choice – you can say yes or no – you’re not being forced to change. You can accept it or not. You’d get a few [other rough sleepers] to go in [with this project]. You’re not being bullied to get into a hostel. A lot of people feel like they’re being bullied.

Through their interviews, many people receiving personalised budgets used the phrases “I chose” or “I made the decision” when discussing their accommodation and the use of their personalised budget, emphasising their senses of choice and control.

The coordinator also recognised the particular value of a personalised approach for a disempowered group of people. She explained that she thought many people had stayed on the streets because of ‘learned helplessness’:

Learned helplessness [is] when people just don’t think anything is going to change … I think learned helplessness is initiated by people losing control of their life and becoming quite powerless. And I think what personalisation has done is given them back some control over their life.

Coordinator

**Outcomes**

Some steering group members emphasised the importance of ensuring that people had responsibilities built into their action plans, suggesting that responsibility was related to control:
There is an explicit ask of [people] … And I think it’s really important because a lot of the clients … have had a quite fractious relationship with authority and a really difficult relationship with accepting things, being given them, benefits and stuff … I think there’s a bit more dignity that comes from that, rather than [a worker] saying ‘right, you’ve signed on, there’s your housing benefit, there’s your benefit, there’s your room’ … You [the person with the personalised budget] need to do these things because it’s your dream, you’re the one who’s driving this.

Steering group member

Some recipients of personalised budgets also discussed taking responsibility in relation to moving into accommodation:

I think I’ll cope in the new place. I can handle it mentally. I’m taking responsibility.

**Negative outcomes**

The outcomes of the project for those who engaged are overwhelmingly positive. However, the negative experiences of one person demonstrate that extreme care should be taken in supporting vulnerable adults moving off the streets after a long period of rough sleeping. After a rapid move from the street to private rented sector accommodation, the person experienced extreme anxiety (particularly around benefits), isolation and increased problematic alcohol use. He abandoned after several months. He had intended to restore family networks in the area he moved to but this did not prove possible. He is currently not engaging with the project coordinator. Disengagement (sometimes only temporary), after abandoning properties or behaving in ways about which people feel a sense of shame, has been common in this project.

The experience described above highlights the importance of ensuring that people are ready and sufficiently supported when they are moving into independent accommodation and that they have access to social networks, or plans for how they will spend time and develop networks. Despite the negative outcome of the stay in accommodation, the project coordinator believes that this experience may have been a useful one for the person in question and that he may re-engage with a more informed idea of what he wants.

**Broader impact**

There was some divergence in views about whether long-term rough sleepers moving off the street would have an impact on others’ decisions about accommodation.

Some steering group members believed that several people moving into accommodation had disrupted the long-term rough sleeping community and would therefore encourage other rough sleepers to go into accommodation, or at least make them less likely to sleep rough in the City:

Long-term rough sleepers act as a pole of attraction for those who are new to the streets … We now have the ten people [in accommodation at the time of the interview] who would have encouraged the community around them, at least one, two, three people [each] … [the project] has had a bigger impact than just on the ten people or so that have gone in … I think people have made decisions to go in because other people who’ve been extremely reluctant to go in have also gone in.

Steering group member
[Rough sleepers] tell us … that they go to areas to sleep where there’s other rough sleepers because they feel that’s better for them or safer. So if you’re getting hot spots cleared … that means less people are going to come and join [sleep rough in] the City.

Steering group member

Other steering group members disagreed that a relatively small number of people moving into accommodation would significantly deter others from sleeping rough.

One person with a personalised budget said that he was influenced to take part in the project after seeing the impact that moving into accommodation through the project had had on a friend. Two rough sleepers had approached the project coordinator over the course of the pilot to request a personalised budget. Several people described in interviews how they had initially felt hostile towards support services but, since taking part in the project, had become advocates for their work:

*It’s worked for me, and now, when I get the opportunity, I push it … I’m talking to other people [rough sleepers, about the project] all the time.*

Personalised budget recipient

## Costs and benefits

The project cost just under £50,000 for its first year of operation. The majority of this was the salary and overheads for the project coordinator. The average spend per person was £794 (compared with a budgeted £3,000 per person); however many people had additional future expenditure in their action plans.

Table 1 shows the costs per person for the first year of the project. It is based on the provision of support to eleven people. The cost for the first year of the project was £4,437 per person. The delivery of the first year of the project cost around £1,300 more per person for one year than the estimated cost of standard outreach provision. However, many had been recipients of outreach services for many years, and it is likely that, in contrast, they will need less intensive support from the coordinator as time goes on.

A number of issues would need to be considered in a full assessment of the costs and benefits of the personalised budgets project, which is not possible here. These issues would include:

- increased costs to the public purse as people opened new benefits claims and began to engage with other services;
- expected savings to the public purse in the form of reduced need for acute medical care and accident and emergency treatment and lower Police and outreach contact with this group in the longer term;
- potential savings to the public purse in the future as people may start work and move off benefits;
- demonstrable benefits to the person with the personalised budget, through increased life chances in terms of health, money and relationships; and
- expected benefits to communities through reduced rough sleeping.
Table 1: Costs for the first year of the project compared with a year of standard outreach provision

<table>
<thead>
<tr>
<th>Element of support</th>
<th>Cost per person per year (£)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Personalised budget project:</td>
<td></td>
</tr>
<tr>
<td>Coordinator’s salary and overheads (A)</td>
<td>3,643</td>
</tr>
<tr>
<td>Personalised budget (B)</td>
<td>794</td>
</tr>
<tr>
<td><strong>Total per person (A + B)</strong></td>
<td><strong>4,437</strong></td>
</tr>
<tr>
<td>Standard outreach provision:</td>
<td></td>
</tr>
<tr>
<td><strong>Cost of one year outreach support (estimated)</strong></td>
<td><strong>3,120</strong></td>
</tr>
</tbody>
</table>

(based on Kenway and Palmer, 2003, which estimates that the provision of outreach services to one person costs £60 per week)
Summary

An action plan for each person outlined what would be purchased with their personalised budget and how this would help them find and keep accommodation. Action plans also outlined things that should happen which did not require the budget.

People were not told how much there was in their budget, but were instead asked what they wanted in order to help them. The most expensive purchases were temporary stays in bed and breakfast accommodation (for those who chose not to go into hostels) while awaiting more long-term accommodation.

The budget worked in several different ways in different circumstances. At an early stage the budget facilitates engagement with the coordinator, building trust and demonstrating that the personalised approach is different from previous offers of help. When someone is contemplating moving off the streets, the budget can help them make the decision – for example, they can purchase furniture or a television to make the move more comfortable and desirable. At later stages the budget can be used to help people sustain accommodation – for example, by paying off small arrears or by purchasing food, gas or electricity when there are problems receiving benefits.

The role of the personalised budget in bringing about change

The budget fulfilled several functions. Table 2 gives examples of items purchased with the personalised budget and shows how these things helped people make and sustain change.

The action plan

People identified in an action plan what they would like to spend their personalised budget on (see Appendix II). Each item purchased was related to a desired outcome which would help them move into or stay in accommodation. Each action had a deadline and a responsibility (usually for the person with the personalised budget or the coordinator).

Amounts spent

During the first year of the project, people spent on average £794 each. The most costly items were temporary stays in private bed and breakfasts. The estimated total spend, based on people’s current action plans, is an average of £1,740 per person, substantially less than the £3,000 allocated. However, this may increase as people develop clearer plans for their futures and identify ways of using the budget to help them towards achieving these. It is worth noting that many action plans include several intended actions which do not require the use of the budget.
The process: making money available

The coordinator had access to a credit card and £500 petty cash. Action plans were agreed by the City of London commissioner. Importantly, authorisation to spend money was received promptly from the commissioner (usually within a day), enabling the coordinator to respond quickly to people’s requests:

For you [coordinator] to be able to say [to someone] ‘Well let’s go and get [item requested]’ and know your organisation’s going to back you to do that without you having to fill out a form in triplicate is crucial, because (a) you can seize the moment and (b) you instantly become a credible person who’s worth listening to.

Steering group member

Attitudes to money: ‘going for the cheapest’

One concern expressed by several professionals, both during the project set-up and in interviews for this evaluation, was that people would spend their personalised budgets without any real commitment to staying in accommodation:

I thought people would milk it, get jealous.

Professional

I think [the personalised budget] will work for some, and others will see it as a nice way to get something for nothing … I think the clients should match the money – it indicates commitment.
Case study: uses of the personalised budget

Paul spent his personalised budget on a chair for his room, clothes, a mobile phone, a dictionary, a DVD player, a hearing aid, and some clippers. Here he describes the difference these things have made in improving his physical and mental health, and enabling him to achieve personal change, break away from his old lifestyle and stay in accommodation.

“[The personalised budget has] made my life in here [hostel] easier. I read a lot and needed a chair so I got a chair … I don’t have to lie in bed, which is bad for my back.

I was having to go to handouts to get clothes. I don’t have to any more. There’s no point in coming in and then going to the same old handouts and day centres. I came here to concentrate on my health and break away from old habits.

At one time I couldn’t relate to anyone. But since I’ve been in here [hostel] I’ve re-engaged. I can sit and talk and not get stressed out. Now I’m sorting out my health problems, my psychological problems, my hearing. I use [my dictionary] every day, I do this diary for my clinical psychologist. I’ve got these DVDs of my therapy sessions which I can put on and I can actually watch, and that does make a difference.

It [the personalised budget] has made it possible for me to stay here. There’s a good chance I could have been back out there by now if not for the budget.”

Otherwise they might just take the money … You need to means test the personal budget. Otherwise you can give and give and give.

This has been shown not to be the case. In fact, many people found it hard to identify what they would like to spend money on, spent very little, and were reluctant to buy more expensive items:

Everything I’ve chosen I said don’t be extravagant, just go for the cheapest.

I didn’t just go for the most expensive, I did it as if it was my money. I’m getting thinking about how the money is spent.

One person with a personalised budget said that he was not going to spend £3,000 and suggested that the budget was lowered to £2,000 so that more people could benefit from it. The coordinator believed that a reluctance to spend money could be linked to low self-esteem and tried to encourage people to buy slightly more expensive items.

Many people did not claim benefits when they were sleeping rough; they were used to surviving without money, as a person with a personalised budget explains below:

I lived for one year without a penny ... [Because I can survive without money, I thought] the budget wouldn’t make a great impact on me … It’s almost a godsend, for people who are homeless to have the luxury of buying a pair of boots. Most of my clothes are second hand, so I’ve become accustomed to this.
Figure 2: Photographs showing new homes and items bought with personalised budgets
This suggests that money can be less important to them than it might be to others; but also that things bought with money can have a huge impact on them (such as the pair of boots this person talks about). Even cheap items (such as a TV or a carpet) could be a source of pride and pleasure for people and could help them establish a new life away from the streets:

I've got a 32-inch telly and a DVD. I've come a long way from the street!

The gap between professionals’ concerns about offering personalised budgets and the ways in which people actually spent money indicates that personalisation may require a change of outlook by service providers. Providers’ wariness of personalisation may also help explain why joint working with other services was sometimes a challenge for the project.

**Inappropriate uses of the budget**

There were no cases of people wishing to spend their budgets on inappropriate items or things which were not agreed by the commissioner.

However, there was one misuse of the budget whereby a current drug user sold items bought with his personalised budget to fund his drug use. He subsequently engaged in treatment and replaced the items he had sold. See chapter 8 (Expansion and Replication) for a discussion of issues around offering personalised budgets to drug users.

One lesson learnt during the course of the project was that spending large sums of money on private bed and breakfast accommodation without longer-term move-on accommodation having been secured was not an effective use of the budget. One person who stayed in bed and breakfast accommodation for several months is now sleeping rough again; once over £3,000 had been spent, a range of long-term accommodation options, in line with the type of accommodation he wanted, were made available to him, but were turned down. He decided that there was one particular scheme which he wanted to move into, which has not had any places available:

*We need to look at accommodation choices and how we finance it. We’ve really got in a mess over people choosing a private bed and breakfast because that’s not sustainable … because we could wait a long, long time for their move-on accommodation.*

Steering group member

**Understanding the budget**

Some people found the personalised budget difficult to understand; for example, it was seen as ‘compensation’ for being on the street by one person who was receiving a personalised budget, and another, when asked in an interview about his ‘personal budget’, began to describe his own budgeting practice. However, when they were asked what the aim of the personalised budget was, many people expressed clear understandings of the budget, which they explicitly related to the aim of getting off the street:

*It’s an idea to get people off the street. It’s a good idea.*

*If you want to, you can get yourself off the street. It’s down to the individual whether they want to take it. If you’re on the street, it’s up to you if you want to take it.*
3 People’s journeys: an overview

The project enabled each person to engage differently, according to their individual choices and needs. However, many people described similar features in their journeys off the streets and into accommodation. The model presented in Figure 3 shows common experiences at different stages of the journey, danger points where things can go wrong, and the role of the coordinator in supporting the person at each stage. Subsequent chapters explore the common stages in people’s journeys in more detail.
Figure 3: Common experiences in people's journeys

The individual's journey
- No engagement with outreach workers
- Negative experiences/perception of services
- Anti-establishment
- 'Happy' on street (valued identity)

Suspicion
- Growing trust

Getting used to the idea
- Developing a vision for future
- Making plans

Coping with transition
- Coping with bills and money
- Taking responsibility

Settling in
- Forging a new lifestyle and identity away from the streets

Sustaining a life away from the streets

Pre-engagement
- Get to know the client (building trust)
- Meet clients away from their sleep site
- Explain you’re not doing outreach

Engaging
- Allow the client to take the lead (where, when and how much to engage)
- Ask what client wants
- Take at client's pace

Preparing to go in
- Help develop vision for future
- Support to make plans
- Support with preparing to go in – including benefits and script
- Give responsibility to client

Going in
- Support with anxieties
- Support with practicalities and tenancy
- Working with other services to secure flexible, personal support for client
- Support the client to interact with other services which do not provide flexible, personal support
- Finding and encouraging to return after abandonment

Staying in
- Support with creating new life, including social networks and meaningful activity
- Ensuring support with full handover when on leave

A long term future in accommodation
- Ongoing personalised support (from coordinator or other) for as long as it is needed

The Coordinator's role

Abandonment
- Shame and disengagement
- Re-engagement and returning

Dangers: saying no, viewed as just another offer

Danger: desired accommodation not available

Dangers: anxiety triggers past trauma; problems with benefits; coordinator on leave

Dangers: the street always an option when faced with difficulties; if support is reduced/support worker changes

Settling in
- Forging a new lifestyle and identity away from the streets

Sustaining a life away from the streets
Summary

Long-term rough sleepers in the City who were interviewed for this research had a strong sense of pride and resilience. They chose to live on the streets and outside of the system. People had often had negative experiences in the past relating to accommodation and welfare benefits.

The offers of ‘help’ and ‘support’ available before the personalised budgets project did not match their needs or preferences. This group often perceived themselves as different from people who went into hostel accommodation. There was strong resistance and even antagonism towards outreach workers who were viewed as part of the establishment, there to force them into accommodation they did not want to go in to.

Key to breaking down these barriers was building a relationship with the project coordinator over time, and being asked about what they wanted rather than being presented with a repeated offer of hostel accommodation.

Although the personal budget and the coordinator’s time was intended to help them move off the streets, it was up to the individual as to how they went about this – they had control over the process. Being reassured that they were not going to be forced into accommodation they did not want was important in the early stages.

The people who took part in the project were long-term rough sleepers and there were a number of barriers which prevented them from accepting assistance from outreach teams.

The long-term rough sleeper’s identity

The sense of identity presented by many personalised budget recipients helps explain why the standard offer of support was not appropriate for them. There are two aspects to this identity: people presented themselves firstly as proud, self-sufficient individuals who had chosen to live on the streets; secondly as people who were different from other homeless people.

Autonomy, pride and self-sufficiency

Many people stressed that they had been happy living on the streets and that it was a choice they had made. They expressed pride at their self-sufficiency and ability to survive, and at the community they were part of. This was a strong aspect of identity for some and it is therefore not surprising that they refused standard offers of help; they were able to ‘look after themselves’, and help was not required.

Another feature of their identity was the decision made by many to live outside the ‘system’. This included hostels, the ‘homelessness industry’ and benefits. Offers and persuasion to accept benefits or accommodation often entrenched rather than challenged this decision. Accepting personalised support means that the decision to move off the streets is the person’s own.
I never go inside, not even at Christmas … It’s not a hard life on the street. I look after myself.

Person still sleeping rough but planning to go in

I’m richer for the experience [of homelessness] – I’ve survived everything fate could throw at me.
I’m very self-sufficient. I sometimes look at myself as a combatant soldier … Being homeless is the hardest task that can be thrown at anyone.

I was happy [on the street]. People can’t understand – all your friends are out there, you get to know people.

Once they were in accommodation, some people began to acknowledge problems associated with living on the streets, in particular the bad weather, associated health problems, and lack of safety. In the quotations below, two people express their changing views of rough sleeping:

I loved the cold weather. It sorted the men from the boys. Now I hate it.

[I stayed out so long because] I wanted to stay independent … I had no problems being out, I always had the Police looking out for me. That was when it was dry. When it was wet sometimes I’d only be [bedded] down four or five hours, I’d hope I’d get a good night’s sleep, sometimes I’d only get one hour. Sometimes I’d stay awake 24 hours a day. It’s like putting 30 years on top, getting old before your time. Keeping one eye open and one eye closed, you never knew who was about.

A personalised approach enabled people to reappraise their choice to live on the streets without threatening their sense of identity.

**Being different**

Another aspect of identity expressed by several people was being different from other homeless people. They identified homeless people as having drug, alcohol, mental health or behavioural problems which they themselves did not have:

The option of going to homeless organisations [for support] didn’t enter my mind. I know I’m an entirely different creature from most homeless people.

I’m different [from most homeless people], more steady, I don’t have mental health [problems].

Again, this would help explain why people did not see the standard offer, which was tailored to a group they did not identify with, as appropriate for them. Personalised support mitigates this issue. An important example of this is that the personalised budget has enabled several people to move, at their request, into accommodation not specifically for homeless people. One person, for example, moved into a private bed and breakfast (rather than a hostel) while awaiting resettlement into permanent accommodation.

**Negative views of services and the ‘establishment’**

Many people said they had had very negative views about the services available to them before the start of the project. These negative views extended from outreach services and hostels to the broader ‘system’
or ‘establishment’. They were often based on negative personal experience (sometimes from many years ago):

> Because of past experience I’ve always been wary of hostels … I didn’t like outreach. [I went into a hostel before and] things didn’t work out for me and for me everything was [outreach worker’s] fault … I couldn’t trust the system.

> I couldn’t stand the sight of [outreach worker]. She belonged to the establishment. I despised her.

Views of services such as hostels were often outdated and many people described how their views had changed since they had engaged further with services and gone into accommodation:

> It’s great here … It’s not like a hostel, you wouldn’t think it was a hostel.

> I was in a hostel 20 years ago … I spent one night there and it made a lasting impression. It struck me as an authoritarian regime which placed prohibitions on your liberty, there were curfews there … I had a naïve, limited view … [Moving into my current hostel] forced me to re-evaluate my attitude.

Many people had chosen not to claim benefits, the benefits system itself being seen as one of the most constraining aspects of the establishment. Freedom from all aspects of finance (including paying bills) was an important reason for choosing street life for many people. People did not want to interact with a benefits system which many found complex and stressful; they preferred instead to opt out of the system:

> For long periods I wasn’t claiming – I couldn’t be bothered … A few homeless people decide not to claim JSA [Job Seekers Allowance]. They’re incapable of understanding the system and it overwhelms them, it’s beyond them. I made a conscious decision not to sign on.

The project was also operating within the context of the assertive approach to rough sleeping being taken by Police and service providers, which increased some people’s ‘anti-establishment’ views.

Chapter 5, ‘Engagement’, shows how rough sleepers engaging in the project positioned the coordinator as someone outside the system or the ‘us’ and ‘them’ divide. At the time when people began to engage with the project, a rumour began to circulate in the rough sleeper community that the coordinator had previously been a rough sleeper herself, suggesting the importance people placed on positioning the coordinator as ‘one of us’ rather than part of ‘the system’. There may be several reasons why the coordinator was able to bridge the ‘us / them’ divide, including personal characteristics such as her age (she was an older woman) and the way of working which sought to work from the perspective of the individual rather than any service.

**Initial suspicion**

People’s suspicion of services and the establishment extended to suspicion and anxiety about the personalised budgets project:

> When [coordinator] first told me about the personal budget, I thought it was a con job.

One person, after several discussions about the personalised budget with the coordinator, came to her office in an anxious state, saying that he was worried he had signed something to say he would never sleep rough again and would be forced to do something he didn’t want to do. He asked the coordinator to explain the personalised budget in a letter before he agreed to take part in the project.
Taking things at a pace people were comfortable with, ensuring people felt in control of their engagement, and enabling enough time for a trusting relationship to build, were essential in overcoming this anxiety and suspicion.

**Moving from pre-engagement to engagement**

The targeted group of rough sleepers reported making a positive choice to sleep rough, had a sense of identity bound up with self-sufficiency and survival on the streets, and were strongly anti-‘the establishment’ including homelessness support agencies. The research suggests that making the decision to engage with the personalised budget project depended on:

- overcoming suspicion and negative views of services through a trusting relationship with the coordinator. This included reassuring people that they did not have to go into accommodation they did not want; and

- enabling people to make the choice to come off the streets without threatening their dignity or autonomy, through a way of working that provided a sense of control and started with individuals’ needs rather than others’ expectations of those needs.
Summary

The context of an assertive approach to ending rough sleeping in the City impacted on some people’s decisions to engage with the project. For example, one person moved into accommodation because there was far less free food available on the streets than before. One person who did not engage with the project moved to another area of London.

It was considered very important that people knew that the personalised budget was to help them ‘get off the streets’. A clear action plan specified how money would be spent and the actions required of the coordinator, the personalised budget recipient and others (see Appendix II). Although people had previously said they did not want to move from the streets, they took up a project which had the aim of helping them off the streets in a personalised way.

The ‘personalised service’ offered to people by the project coordinator was crucial in facilitating change. The service had to be genuinely distinct from the standard outreach service. Areas of difference included the person choosing where to meet the coordinator rather than being approached at their sleep site; the coordinator largely working on a one-to-one basis rather than in a pair; the coordinator spending a lot more time with people than is typically possible during an outreach shift; and the rough sleeper guiding the conversation rather than the worker focusing on a quick move into accommodation.

The personalised budget enabled the coordinator to ask ‘what do you want?’ rather than offering predetermined options that the person had previously turned down.

A close and trusting relationship between potential recipients of a personalised budget and the coordinator was essential. The element of choice and control in determining the way forward helped to engender ‘adult-to-adult’ relationships between each person and the coordinator. This avoided a situation which can be faced in outreach services in the City with very long-term rough sleepers, where an inflexible offer is made by an authority figure (the outreach worker) but dismissed and turned down.

The context: an assertive approach to ending rough sleeping in the City of London

Before discussing the ways in which the project motivated people to engage, it is necessary to describe the broader context in which the project was operating. The personalised budgets project took place within the context of a broader approach aimed at encouraging rough sleepers to move into accommodation. This assertive approach is founded on the belief that people are safer and healthier in accommodation than sleeping on the streets. It entails:

- an outreach team which acts as a consistent street presence;
• offering a range of accommodation options including: hostels, private rented sector accommodation, social housing for rough sleepers, reconnection to a local area, sheltered accommodation and care homes;

• helping people make positive changes in their lives, including meaningful activity and access to money, services and resources;

• informing people who are resistant to change that it is not acceptable to sleep out and that a route off the streets is available to them;

• influencing the public and businesses to prevent free food maintaining people on the streets;

• working with partners in the Police and City of London to ensure that anti-social behaviour is identified and challenged; and

• targeted and extensive contact from the outreach team and the Police.

Many personalised budget recipients were aware of the government target to end rough sleeping by 2012 and talked about the assertive approach to rough sleeping in the City of London. It is probable that this influenced several people’s decisions to engage in the project and move into accommodation, as some people explained:

There’s been a recent change in policy about food wastage … The reason I moved in was a lack of food.

I don’t think I could stay [sleeping rough] in the City – they’ll move you on, for 2012.

It is notable that some people particularly related this strategic approach to rough sleeping in the City of London, which suggests that they might have seen moving to another borough as an option if they wished to continue to sleep rough; in fact, one of the two people who did not accept a personalised budget did indeed move to another borough.

Some personalised budget recipients also expressed an awareness that the personalised budget project was part of this overall strategy:

2012 there’s going to be no rough sleepers … I think [the personalised budget] is part of it.

Project stakeholders also believed that the assertive approach influenced people’s decisions to engage with the project:

It may be that the enforcement created the conditions around which rough sleepers were willing to accept the offer of a personal budget and engage with [coordinator] around the work … It might have been that people said ‘I’m pretty sick of that, and you’re making me a really good, new, different offer.’

Steering group member
The opportunity to engage with a different form of support to help people off the streets

The majority of the personalised budget recipients were offered the budget whilst sleeping rough, but three people had already moved into accommodation when the project started and were offered the budget to enable them to sustain their accommodation (see chapter 6, ‘Deciding to go in’). Clarity with potential recipients about the aims of the project was felt by professionals involved in the project to be essential. When first explaining the project to people, the coordinator said: “There is a project you can be part of to help you get off the streets”, and she explained that the budget could only be spent on things which met this aim:

> It’s not always appropriate to say to somebody ‘I want to offer you a personal budget. I’d just say, ‘I’ve got access to some money that can help you’, and I explain it’s for people that have been out for a long time and not wanted to go in … I do explain what the personal budget is and that it is a personal budget.

Coordinator

Each person had an action plan (see Appendix II) which related each item purchased to a desired outcome. People were generally not told about the £3,000 estimated budget, because the project aimed to focus on meeting needs rather than spending fixed amounts of money, but they signed action plans which showed how much they intended to spend.

**Personalised service**

The personalised budget fulfills an important function, as shown in chapter 2, ‘The role of the personalised budget in bringing about change’. However, a key finding of the project evaluation is that the ‘personalised service’ offered by the project coordinator is at least as important as the personalised budget itself in facilitating change:

> I’ve got to be honest here, it wasn’t just the individual budget, it was the fact there was [coordinator] there as well … We was meeting [regularly] to discuss it, and I’d actually gone from the stage of wanting nothing to do with these people, to actually looking forward to seeing them. So it’s not just the actual money. It’s the way it’s being handled. In this case it’s [coordinator] … All the people are dealt with as individuals.

The people with personalised budgets interviewed for the evaluation emphasised the importance of the coordinator’s support, which was tailored to their needs. They had choice and control over the support they received:

> The budget gives us a choice – you can say ‘yes’ or ‘no’ – you’re not being forced to change … You’re not being bullied to get into a hostel … [Coordinator] always treated me with respect. She never tried to show her authority, to push you into doing something.

**Distinction from outreach**

The outreach team operating in the City of London supports over 200 rough sleepers every year to move into accommodation and address other needs. However, amongst the personalised budgets project’s target group there is a negative perception of outreach workers; they can be seen as a threat to liberty, and as people who don’t really care but are just doing a job:
The outreach workers want to get you in a net and pull you in. They need to prove they’re doing their job. People are forced to come in.

Personalised budget recipient

The personalised budgets project was explicitly presented to people as something different from outreach, and this was seen by the project coordinator as crucial in engaging them. Making this distinction clear was particularly important as the Personalised Budget Coordinator was previously an outreach worker known to the targeted people:

The first thing I say to everyone is I’m not doing outreach any more ... They respond to me in a different way. What do you associate outreach with? – coming round and waking you up. The project is focused on people who’ve refused other services. They’ve no experience of outreach doing anything for them – helping set their benefit claim up or getting them to the doctor – because they’ve refused ... I have found that taking a different approach from outreach work has been the key to engagement with this client group.

Coordinator

How a ‘different from outreach’ approach facilitates engagement

Figure 4 shows the key elements of a ‘different from outreach’ approach to engagement, and the effects these have on facilitating engagement. The key elements of this different approach include:

Figure 4: Personalised methods of engagement
Meeting people away from their sleep sites
Meeting people away from their sleep sites was seen to be crucial. For example, the coordinator met people at benches, cafés, or other sites they frequented during the day. People could find being met at their sleep sites disempowering and intimidating and several preferred the opportunity to talk to the coordinator away from their peers. Appointments were made with each person in advance in a flexible way. (See the case study below, where the person and the coordinator met regularly at a bench.)

Working alone
Working alone and providing one-to-one meetings achieved greater openness from people than the usual approach of outreach workers meeting people in pairs. One to one meetings were found to be less intimidating and intrusive, and gave a sense of a single point of contact with someone who is really involved and cares about the person’s progress.

Taking time
The coordinator’s initial engagement with people involved overcoming suspicion, building up trust, giving the coordinator the chance to get to know people and their histories, and giving people time to make a decision to come off the streets. This could be a lengthy process. The first two or three meetings with people usually involved explaining the concept of the personalised budget and could last for up to two hours each. There was no pressure on the coordinator to see a certain number of people or achieve a certain outcome on a shift, as can be the case in contracts that homelessness services have for standard outreach. The coordinator found that longer meetings resulted in people disclosing more about themselves – for example, people talked about their families or their work histories, and one person disclosed a gambling problem he had not discussed with outreach workers previously during an initial meeting.

“This work is about spending as much time with clients as they want.”

Coordinator

Case study: taking it at the individual's pace
Harold is in his 60s and had been sleeping rough for 25 years. He had never engaged with outreach teams and never claimed benefits. He did not like to talk in day centres as it was not private, but said that the coordinator could meet him every few weeks at a bench he sat on every evening. They met around once a month, and usually chatted for around 1½ hours.

He was very undecided about accepting a personalised budget, but the coordinator continued to work with him and after about three months helped him set up a pension credit claim and a few months later a post office account. He started engaging with a day centre for the first time. He said he did not want to talk about accommodation until the post office account had been arranged as he only felt comfortable dealing with one thing at a time.

Five months after first talking to the coordinator, he said he would like to talk about accommodation. He wanted to wait for a few months before making concrete plans, but the coordinator encouraged him to start doing so straight away because there might be waiting lists. He moved into accommodation and formally accepted a personalised budget nine months after the coordinator began to work with him. At the time of writing this report he has been in his accommodation for four months, and says he is happy and feels confident living in his new flat.
If the project is replicated, it is important to ensure that the value of taking time and building relationships is recognised, and that staff are not under pressure to achieve quick outcomes:

Maybe two or three months into the project there were times when I was thinking ‘I don’t know what I’m doing’ ... I was three months into the project and in the initial engagement process, so you can’t get an [accommodation] outcome and it took quite a while before anybody went in.

Coordinator

The time that [coordinator] spends doing it is the crucial part, and it’s spending hours and hours and hours with a client, which couldn’t be done previously ... It’s how you spend that time. And also it’s having the skill to know that just because you’ve not achieved anything tangible in three hours doesn’t mean to say you’ve not achieved anything.

Outreach team leader

**Asking not offering**

The ‘standard offer’ (see Introduction, ‘Service provision for rough sleepers in the City of London’) is an offer to which long-term rough sleepers repeatedly say ‘no’:

[Outreach worker] had been putting [the idea of moving into accommodation] to me every time he met me, over more than one year. For longer than a year, we’d chat for five minutes but the conclusion was always ‘no thanks very much.

A crucial difference in this project is that, instead of being offered things they could turn down, people were asked what they wanted. This was instrumental in engaging people who had previously refused to engage:

[Outreach worker] phoned and asked if I was prepared to speak to [coordinator]. I thought that was different, phoning to ask me ... I could say ‘yes’ or ‘no’ ... That’s what clinched it for me [my decision to accept a personalised budget] ... [The personalised budgets project] is not: ‘We’re going to get you this, that and the other’. It’s: ‘What do you need?’

Steering group members and the coordinator also emphasised the importance of asking not offering:

I was able to say to [people] ‘Well what do you want?’ rather than going ‘Well I can find you this or I can find you that.’

Coordinator

**The coordinator**

Several personalised budget recipients commented favourably about the age and experience of the coordinator, who has been known to most for several years as an outreach worker:

A lot of [outreach] workers, they’ve just left school, they don’t have a clue about what it’s like to be homeless or why you’re on the street. [Coordinator] and [other worker] aren’t like that.

Some of the people [other rough sleepers] wouldn’t have anything to do with outreach workers, one because of their age, and two because they looked down [on people].

She’s got experience behind her – that’s very important ... She understands and knows what [a] person is going through ... She’s mature.
People were told they could choose who acted as broker for their budget, but they all chose to work with the coordinator. One person chose initially to work more closely with a member of the outreach team who had other characteristics with which he was thought to identify. This suggests that a coordinator who reflects characteristics (such as age) of the people they are working with may be responded to more favourably by them.

The coordinator was already known to people from her previous role as an outreach worker. The advantages and disadvantages of recruiting an existing outreach worker to the project was a subject of debate by the steering group when the project was being set up. Recruiting an existing outreach worker to the role may have increased perception of her ‘experience’, and she believes that already knowing and being known by people helped her establish relationships more quickly. It does not appear to have made it difficult to demonstrate that the project was ‘something different,’ although it may have made it more important to spell this out.

**The relationship between personalised budget recipients and the coordinator**

The coordinator believes that one reason the project may have been so effective is that people feel that she cares about them. The personalised way of working emphasises a close, trusting relationship between personalised budget recipients and the coordinator, which enabled the coordinator to demonstrate her care for people in a way in which her previous outreach role may not have enabled:

*She [coordinator] cares. She cares about individuals, she treats people as individuals."

*Plenty of [outreach] workers, all they give you is bullshit and you don’t see them again for a month. But [coordinator] has gone out of her way for me … [Coordinator] takes the job serious. She’s not just there for a wage … She respects us.*

*I don’t believe anybody does outreach work unless they care, but sometimes you have a particular shift pattern and to the client I think it can sometimes look as if it’s sort of a conveyor belt job. I know by comments clients have made in the past that sometimes that’s how it feels like, whereas personalising the approach, I think that’s just telling the client that they matter, what happens to them and what they have to say matters … So I think there is a very caring, carer’s approach.*

Coordinator

The relationship between the individual and the coordinator is no longer seen to be founded on ‘authority’ (which relates to being part of the ‘system’ which this group of rough sleepers reject). It is a relationship of respect, between individuals. Steering group members also highlighted this different relationship:

*[The personalised approach] is about how you see people, how you want to describe your relationships with people. I think the homelessness sector is really poor in ‘doing unto’ people: ‘here’s a hostel or outreach service, take it or leave it’. This is shifting the conversation to grown-ups, saying ‘what can we do?’ It’s a fundamental shift in how you see people.*

Steering group member

**Not engaging**

Only two of the 15 targeted rough sleepers did not accept a personalised budget. One of these went into accommodation but has declined a personalised budget. The other has moved to a different borough.
Neither could be interviewed for this evaluation. People who had accepted a personalised budget were asked why they thought other people might decline, and they discussed issues around privacy, suspicion, not wanting to engage with ‘the establishment’, and not wanting to move into accommodation, most of which have been discussed above:

*It could be because you’re part of the establishment. Some of the boys are stubborn. We don’t want them [staff] sitting in an office saying ‘we’ve given him that much.’*

*People get worried if they’re singled out. They’ll back away. They think there’s some catch.*

*When [coordinator] offered it to me I didn’t fully understand the implications of what she was offering. I knew her before from outreach. I had no intention of moving in anywhere. It didn’t make sense to me … [coordinator] was a stranger. When you haven’t committed a hundred per cent to moving into accommodation, your mind isn’t geared to absorbing what’s being offered.*

People could not suggest ways in which the budget could have been explained or offered in a different way to encourage engagement.

Steering group members saw displacement to other boroughs as a negative outcome, and people who did not engage were a concern for the project commissioners:

*I think it’s a problem that we’ve identified people that fit into the criteria and that somehow we can’t engage with them, or can’t find them, or they’ve disappeared, or they’re saying no.*

They suggested working with outreach teams in other boroughs to work with people who had refused a personalised budget.
Deciding to go in

All those engaging with the project knew that its aim was to help them move into and stay in accommodation. The decision to go into accommodation was made and experienced differently by each person involved in the project. Some people made the decision before engaging with the personalised budgets project; the project made it easier for them to go in and to stay in. For others, the decision to go in was made as part of their decision to engage with the project.

Of the recipients of personalised budgets interviewed for this evaluation, several were motivated primarily by factors not related to the personalised budgets project. One person was motivated to go in by a new relationship, another had been sectioned and another went in because he could no longer find free food on the streets.

Four of the eight recipients of personalised budgets interviewed for this evaluation were directly motivated to move into accommodation by their engagement with the project. Two said that they had the idea ‘in their mind’ but that the project helped them start planning towards it; another decided it was ‘time to take responsibility’, and another said that he had always wanted to go in but needed ‘a shove’, the budget acting as a clear incentive in his case:

**Interviewer:** What made you decide to come in?

**Budget recipient:** I was getting fed up with [the lifestyle]. [Coordinator] was so stern and strict. That’s one of the main reasons I did make the decision. She said ‘you’re not going to get this unless you do that’. She gave me a shove. She helped me a lot. She said ‘the grant is there but you have to sign a contract and keep to it, for six months to begin with.’

Summary

Some people were directly motivated to move into accommodation by the personalised budgets project. Others were motivated by other factors but the budget helped them realise their plans to move away from the streets.

People who had been sleeping rough for many years found it hard to think of things they wanted or needed. Support was required to help individuals envisage a life away from the streets and what material things or services would help them with this.

A high level of anxiety was associated with moving into accommodation after between 4 and 45 years sleeping rough. It is likely that, for many people, this huge life-change brought up issues that they had faced in the past. Support and encouragement during this transitional period was essential. Dealing with bills and money, being away from social networks and living with new people were amongst the practical factors which could make moving very difficult.
The importance of a signed action plan with shared responsibilities is highlighted by this person’s experience. It is notable that, despite being given ‘a shove’, the person felt that the decision to go into accommodation was his:

\[\text{Interviewer: Did it feel like your choice?}\]

\[\text{Budget recipient: It was my choice, it was to do with me getting my act together.}\]

The coordinator was able to describe the pilot project to people as a ‘window of opportunity’, explaining that it was likely to be time-limited, to encourage people to start to make steps toward going in.

**Developing a vision for the future**

The coordinator found that many people did not know what they wanted for their future, or said ‘I’m not sure I want anything’. She would give examples, make suggestions, and offer to do the research once people came up with ideas. The coordinator plays a vital role in helping people to develop a vision for the future, decide how to get there, and prepare to go into accommodation:

\[\text{It’s about [coordinator] taking time, building the picture with [people] of where they want to be.}\]

- Project manager

The opportunity to get to know people during the engagement process helped the coordinator to support them to come up with appropriate ideas for the future.

**Getting used to the idea and managing anxiety**

Some people made the decision to go into accommodation relatively easily, whilst others needed time to get used to the idea. The exchange below shows that it can be hard for someone living on the streets to think about a future in accommodation:

\[\text{Interviewer: How do you feel about [going in]?}\]

\[\text{Person who is making plans to go in: It will sink in when it happens. This is now. It’s not a hard life on the street.}\]

The idea of going into accommodation can be associated with anxiety:

\[\text{I was apprehensive [about going into hostel] because I wasn’t sure to what degree it was a prescriptive regime. I had no restraints on my freedom [on the street].}\]

All of the people with personalised budgets experienced anxiety to different degrees. One person told the coordinator each time he met her for an appointment ‘I was really anxious you wouldn’t turn up’. Another person was convinced that at the end of a two-year period of tenancy he would be homeless again.

Anxiety can peak just before going into accommodation and its seriousness should not be underestimated: one person went missing a few days before he was due to move into his new accommodation, and was found by Police saying that he felt suicidal. Several people needed support in managing their anxiety before going into accommodation.
Many people talked about dropping out or putting their engagement on hold, often as their plans to go into accommodation became more concrete. This was often thought to be associated with anxiety. The coordinator worked with most of these people to manage this anxiety and encourage them to continue with their plans.

### Disengagement

One person accepted a personal budget and started to develop ideas for his future, but then disengaged with the project. His reason for doing so was that he did not wish to receive benefits (after a previous negative experience with the benefits system) and could not see how the project could help him to fund his accommodation without benefits.

### Moving into accommodation: the transitional period

After between 4 and 45 years sleeping rough, going into accommodation could be extremely difficult. For the personalised budget recipients it entailed adjusting to a new environment, a new lifestyle and often a new conception of themselves. Most were away from old friends and often living in close proximity to strangers.

People described the difficulty of what one termed the ‘transitional period’: this could include the first night, the first few weeks, or the first few months in accommodation. Difficulties included dealing with money and bills and being away from friends, and could lead people to contemplate going back to sleeping rough:

> The first few weeks were hard. I thought I'd go back outdoors ... Settling into a new life. On the streets you have no worries. Moving in, it's stressful, money, benefits, bills, the council phoning up for rent ... Now I've got the first few weeks out of the way it's plain sailing.

> It's not easy, that transitional period ... When you're out on the streets you get to know the same group of people, and one of the hardest things is you're all of a sudden in a completely different group of people. So then you've lost all your friends. So then you start going back to using the same places [day centres and soup runs] and if you're not careful you get in with the wrong people ... and you don't get back [to your accommodation]...

> You need a lot of support in keeping your belief strong and focused, it's a huge transition.

Support worker

One person walked out of his hostel accommodation on his first night because he could not cope with the noise from the communal television room next to his room and has not since re-engaged with the project (see chapter 7, ‘A new lifestyle’, for a discussion of how flexible support from the coordinator and from other services is essential in helping people get through the transitional period).

It should be noted however, that going into accommodation was not difficult for everyone:

> It was so easy going in here. There are no questions about the time you come in and out – they leave you alone. My key worker is great ... I have a lot of friends [in the hostel], [which] makes a big difference.

> I keep myself to myself. I think I'll cope in the new place. I can handle it mentally. I'm taking responsibility, which I've had before [in previous tenancy]. I'm used to being independent. I try to avoid trouble ... It's not strange to me, it's second nature, I've done it before. There's no panic.
Dealing with hidden trauma

Professionals working in the homelessness field interviewed for this evaluation suggested that people choosing a long-term rough sleeping lifestyle are likely to have traumatic memories associated with being in accommodation, and that re-entering accommodation was likely to bring up past traumas. Very few people discussed their past or the reasons they became homeless in the first place, either for the project evaluation or with the coordinator; any trauma was hidden and therefore very difficult for the coordinator to support people with:

[People] have come to be where they are because of something – most of them won’t tell you what it is – something very traumatic in their lives that’s led them to be there. And I am not surprised at the high level of anxiety. We’re asking them to change away from a lifestyle that is familiar, to something that is very unfamiliar and that might have been abusive in the past … I think that’s probably what’s happening at the moment of going in, it’s triggering something and the problem is we don’t know what.

Steering group member and qualified psychotherapist

One person who was having cognitive behavioural therapy (CBT) felt that this enabled him to maintain his accommodation. The coordinator suggested counselling or other psychological support to several other people, but most declined.
7 Staying in or returning to the streets

Summary

Of the 15 people targeted, seven moved into accommodation and have remained accommodated. Two of these temporarily left their accommodation but subsequently returned. Four people had negative outcomes from their accommodation: two abandoned, one left when his short-term accommodation arrangement ended and declined other longer-term options; and one went to prison.

People described initial moves into accommodation as challenging and a huge change from life on the streets. Most settled in over time and adapted to their new accommodation – for example, managing anger issues arising in communal areas, and sleeping in a bed after initially sleeping on the floor. Some maintained old social networks and others tried to distance themselves from their old lifestyles. Some people began courses or started engaging with services after moving into accommodation. All of those in accommodation said they would like to stay in over the long term.

Challenges in dealing with money, in particular benefits claims, were a source of anxiety and could be a risk factor for tenancies breaking down. The coordinator needed to support people in dealing with money and benefits services. Where other services could be flexible, it was important that the coordinator worked with services to achieve this; inflexible, non-personalised services are a risk factor for abandonment.

Having a consistent worker involved from the street and after going into accommodation was viewed as key to helping people maintain their tenancies. This differs from the model often used in outreach, whereby the client is ‘handed over’ to hostel staff to work with quite soon after moving into accommodation. The coordinator supported several people to return to accommodation after abandoning. Without the consistent support of the coordinator, the work undertaken in helping people find a path into accommodation could have been wasted if the pressure of the first few weeks in a tenancy led to abandonment. Long-term support was seen to be essential for people to maintain tenancies. Professionals involved in the project thought that most people would need the coordinator’s support for 18 months or longer.

There is a risk of dependence on one support worker in the current model of the project. People experienced some difficulties when the coordinator was on leave. Careful handover and cover arrangements are essential when working intensively with very long-term rough sleepers who are making significant changes in their lives.

Settling in

People described different ways of coping during the ‘transitional period’ and beyond. These included taking it a week or a month at a time and keeping a distance from other residents (especially where people had anger management problems or had enjoyed the solitude of the streets):

*When someone’s talking about two years, I can only take this place 1 month at a time … At one time I was doing it by the fortnight. Tuesday’s payday [for benefits] … You think, ‘if something doesn’t*
happen between now and next Tuesday I’m out of here!’

I tend to lock myself in my room.

After the initial difficulty of adapting to being in accommodation, people began to settle in. They described the changes they made but emphasised that settling in takes time:

They [hostel staff] got used to me and my strange ways, I got used to them. I couldn’t even eat in the dining room at one time … if somebody had said something which I misunderstood I was liable to explode … But now, well I don’t use it every day but yesterday … [I] had the evening meal, and I felt comfortable. But it’s taken time to do it.

There’s a double bed. I haven’t slept on it yet. I sleep on the armchair, it’s comfortable. I slept out for a long time.

Person who had slept on the floor when first moving into accommodation

A new lifestyle

Interviewees described establishing new lifestyles. Some people thought that it was important to break away from their old lifestyles and street-based communities, and had begun to do so. Others continued to go to day centres and see old friends, but were developing new routines. Several were starting courses and addressing drug or alcohol problems. People’s lives were no longer occupied with ‘survival’ on the streets, and it was important that meaningful activity began to fill this gap:

I keep the same routine, I come out early every day and go to [day centre]. I get set in my ways. I’m quite happy the way I am. In the afternoons I might take the bus to [shopping area], walk around the market stalls or the shops.

(after several months in accommodation, this person now also returns home every evening to cook dinner)

I’ve been able to break away slowly from the rough sleeper lifestyle. I still keep in contact with some of my friends … I use two [day centres] … but the rest of them I don’t bother. It’s [hard] cos it’s where all your friends are … If you’re not careful you end up isolated.

After 20 years it will take a lot longer [to get myself sorted]. I need to keep my head down and keep occupied.

Social networks

Maintaining or establishing social networks was important for many people. Even someone who liked to ‘keep myself to myself’ popped in to say ‘hello’ and have a chat every evening to a member of staff at his accommodation, with whom he got on well . He also continued to go to a day centre every day where he had friends. Several other people also talked about the importance of friends, and the coordinator talked about the importance of courses for addressing isolation. One person who abandoned his accommodation did so partly because of a lack of friends living nearby; soon after moving in he began to return to the City of London and sleep out on occasion with old friends. Social networks helped some people stay in accommodation, and a lack of them are a risk factor for abandonment.
A new identity

Several people described how they were changing the way they looked after and presented themselves:

I’ve bought some clippers. I’ve arranged for my brother to come and cut my hair. I used to have short hair but I got lazy on the street.

I’m starting to look after myself, wash and shave.

Others described personal change and changes in the way in which they viewed themselves:

For the first time in my life, everything just clicked. It feels like now I can do something.

The fact that I’m actually sitting here talking to you … that’s how much I’ve changed.

Steering group members also emphasised the way in which the project could change people’s identities:

Part of [coordinator’s] role is to bring people who are outside of the community into the community … It allows them to be somebody who they are, rather than a label that everybody else puts on their shoulders.

Steering group member

Dealing with bills, money and benefits

‘Pre-engagement’ (see chapter 4) describes the importance attached to self-sufficiency by this group of rough sleepers and the choice not to engage with ‘the establishment’, including benefits agencies. Not having to deal with bills, money and benefits was described by several recipients of personalised budgets as one of the freedoms of living on the streets:

It’s the responsibility to pay bills [which makes people abandon hostels] – they don’t want to know about this. They don’t want to pay money.

Bills and money were a considerable source of anxiety for several people, as were any interactions with ‘the system’ which they had previously avoided on the street. Several of the people interviewed for the project evaluation reported having had problems with benefits. One person said he was ‘sent nine giros and asked for six things in one day’ and had to ask a support worker to help him sort it out. Another had been living off his Community Care Grant because ‘they mucked up my dole money’. Another had his Jobseeker’s Allowance repeatedly stopped, on one occasion because he had only carried out five rather than the required six job-seeking activities in one fortnight. Below, two support workers explain the difficulties with benefits experienced by one person who later abandoned his accommodation:

He seems to resent bureaucracy and people having a hold over him. One time we went to the housing benefit office with what we thought were the required documents … [but they] said they weren’t acceptable. He got very agitated … He found it really frustrating … These things tipped him over the edge … It wasn’t that he wanted a job [he was on JSA] but he wanted to be out of the benefit system and becoming self-sufficient was a quick route out.

Support worker
The way they work at the job centre is often with hostility, not positive encouragement, which [he] needed. I think he could have maintained his tenancy if not for JSA.

Professional

**Working with other services**

Choice and control can be limited by inflexible services. Where flexibility is possible it is important that the coordinator works with services to achieve this. For example, the coordinator worked with a Job Centre to agree more flexible rules about seeking work for a person receiving JSA.

The project came across several examples of services failing to be flexible, which then had serious implications for people. One example concerned a person who, on his first night in a hostel, said that he was being disturbed by noise from the nearby TV room and asked if he could close the fire door between the rooms. After his request had been refused by the night staff, he abandoned the hostel and is no longer engaging with the personalised budgets project. Staff who were more familiar with the personalised approach would have sought other solutions, for example allowing the person to move to another room. In another case hostel staff allowed a person to build up substantial arrears, raising concerns that he believed he could pay them off with his personalised budget. However, as he progressed with treatment, he later paid off his arrears, partly through his budget and partly through his benefits.

A person with a personalised budget described the importance of a flexible, personalised approach from his hostel:

*My old keyworker said I’d be kicked out if I didn’t keep my appointments … Because I’ve been on the streets a long time, I hate people saying ‘be here at this time’. [My new keyworker] is like, ‘can I talk to you today, can I see you today?’ … There’s not the hassle of making appointments … He’s great.*

A support worker described how he took a careful, personalised approach to his client:

*[When client moved in] I thought I needed to be very careful, he had a history of abandonment, he was a long-term rough sleeper. He’s nothing to lose, walking away…*  

Hostel keyworker

Steering group members described the importance of joint working at a strategic as well as practice level to support people:

*[One of the things that works well is] the focus, that identifying a cohort and saying as a strategic group, the Primary Care Trust and the local authority, the voluntary sector provider, the Police, everybody, to say ‘For this group we are all going to try extra hard, we’re worried about them, they’ve been out for a long time.’*  

Steering group member

**Ensuring consistency of support**

Several recipients of personalised budgets and professionals involved in the project emphasised the importance of having one consistent worker to support the rough sleeper from the street and after going into accommodation. This contrasts with the standard outreach model, where clients are handed over within a relatively short time period to their accommodation provider for support. Having one consistent worker facilitated a trusting relationship and helped establish the sense of someone who ‘cares’ (see chapter 5, ‘The relationship between personalised budget recipients and coordinator’):
[It’s] the fact that you’re dealing with one person ... it’s a great advantage that I’m dealing with somebody I’ve got a lot of time and respect for.

Person with personalised budget

Somebody’s handed over to somebody else and handed over to somebody else, handed over to somebody else... and actually the feeling of self-worth for that person in building up any significant connection with anyone is atomised, and therefore they’re just being handed like a baton from one person to another ... And we wonder why it doesn’t work.

Professional

It’s very important [I continue working with people after they are accommodated] because … there is some form of attachment and to move somebody in and then just disappear, basically it’s abandoning somebody.

Coordinator

However, this led to the risk of people becoming dependent on the coordinator, and some professionals talked about risks of attachment. It was notable that several abandonments took place when the coordinator was on leave, and the coordinator stressed the importance of a full handover during these periods:

Having clinical supervision has really helped identify that there is some sort of attachment and that some of the clients become very dependent on me, and then I go on annual leave and they just feel abandoned … Which is possibly a drawback of just having one worker … I think instead of me just doing a handover when I’m going on annual leave, maybe the couple of weeks leading up to me going on annual leave we identify somebody to step in for me and we visit the client together, rather than just do a handover the day before I’m going away, saying, ‘If [this happens] somebody needs to do this.’ Plan it a bit more so the client feels a bit more secure.

Coordinator

Several people had additional support from sources other than the personalised budget coordinator, such as day centre staff, hostel key workers, and tenancy sustainment team (TST) workers. These were useful to people:

[I’ve got] a TST worker, she’s good. She told me about doctors, dentists, banks. She’s looking into the electric – you can get a lower rate if you’re on benefits.

However, most people said that support from the coordinator was necessary alongside this support. One TST worker explained why it was useful for their client to have ongoing support from the coordinator:

It was too early in our working relationship [to raise certain issues with the client] … I was still in the relationship building stage … [coordinator] knew him from a different job, so they had the basis of a relationship.

TST worker

The need for long-term support to maintain accommodation

Moves off the street were often precarious. The coordinator had supported several people to return to accommodation after abandoning. The most recent abandonment was by a person who had been in accommodation for eleven months; he later returned to his accommodation. People who have lived on
the streets for many years know that they can survive there, so if problems arise going back to the street is always an option:

I don’t know [if I’ll ever go back to the streets]. Ninety per cent I’d like to stay, but I know at the same time it wouldn’t take long to get back into the routine.

He seemed much happier in general with street life than your average rough sleeper … he did seem to think there was no hardship at all living rough and having no money.

Support worker on person who abandoned his accommodation

All the people with personalised budgets had experienced anxiety and a range of difficulties in the transition from the streets to sustaining accommodation. Steering group members believed that long-term support would be essential for most people to ensure that they sustain their accommodation. One thought this might only be necessary for 18 months, others thought that it should be longer term or even indefinite. As suggested in ‘ensuring consistency of support’ above, it was felt to be important that at least some of this support was provided by the coordinator:

I think keeping people under a roof will be very hard … They need someone outside the system to help them through the hostel system. Someone to act as a default, a pressure valve, to provide brokerage, who has a long-term interest. I’d like to see [coordinator] follow through [with individuals] for the next five years.

Steering group member

To sustain [the project outcomes] you need ongoing support … from the personalised budget coordinator and any tenancy sustainment team support that they can get as well … I would have thought for the first 18 months.

Steering group member

There needs to be somebody who’s consistent in maintaining them in their chosen direction … [The coordinator] over maybe six months, and beyond that somebody else takes over the case work. But there needs to be a significant, meaningful handover … I do think there needs to be an ongoing commitment, otherwise a lot of the investment that we’ve made will possibly come to nothing and actually leave us worse off, because then we’ve given people a taste of what they can have and effectively it’s gone.

Steering group member

I think as long as you’re careful and you’re very gradual about it, it is possible to take steps back so that [people are] less dependent. But I think [the length of time I continue working with them] is really down to the individual and what their needs are and how quickly they adjust.

Coordinator

Professionals interviewed were clear that support from tenancy sustainment teams (TST) alone would not be sufficient:

The [TST] model doesn’t work because the numbers are too great – too few workers, too large a brief, and too easy for workers to engage only with those that want to engage.

Steering group member
I got the feeling [TST worker] wasn’t engaging very well with him, he wasn’t really looking into things ... You need someone very experienced in dealing with [this group of rough sleepers].

Professional on person who later abandoned

It was important that the project commissioners recognised the need for continued support after people had gone into accommodation, and did not require the coordinator to start working with a large number of new people. However, the coordinator’s workload reduced as people settled into accommodation and required less support, which enabled her to start working with a small number of new people.

**Abandonment**

Factors thought to be related to abandonment with various people included:

- problems and anxiety related to benefits (this was thought to be a trigger leading to one person’s abandonment);

- anxiety about money (one person temporarily abandoned his hostel after receiving a rent statement; although he was told that the rent was covered by housing benefit, he was so anxious about the money incurred in his name that he abandoned);

- isolation – this was thought to be an important factor in the abandonment of one person who had moved to a new area;

- inappropriate accommodation and lack of flexible response by accommodation provider (see chapter 7, ‘Working with other services’); and

- undiagnosed support needs. The history of trauma which many people were thought to have had (see chapter 6, ‘Dealing with hidden trauma’) and unaddressed psychological problems relating to this could cause tenancy failures and abandonments. The person who was imprisoned after maintaining accommodation for several months had been encouraged by the coordinator to address his anger management problem but had not wished to, and was subsequently imprisoned for a violent crime. One person, whose drinking escalated to a level he found problematic after going into accommodation, was thought by the coordinator to have had an alcohol problem which he had not admitted to and which had not been apparent when he was on the streets; he later abandoned his accommodation.

**Disengagement**

Several people have disengaged (sometimes only temporarily) after abandoning properties or behaving in ways about which they felt a sense of shame:

[I disengaged because] I was ashamed for what I’d done … I regret doing it.

Person who temporarily disengaged with coordinator

Maybe [he abandoned and disengaged because of] the guilt, he thought he did something wrong … He didn’t like what he did. Maybe he wanted to go and bury everything.

Support worker
Working closely with just one person, which is a feature of this project, may increase the risk of people disengaging because they feel they have ‘let down’ the coordinator.

**Planning for a long-term future in accommodation**

All of the personalised budgets recipients interviewed for this evaluation (with the exception of one who subsequently abandoned) said they would like to stay in accommodation over the long term. Some in temporary accommodation described what sort of accommodation they would like in the long term:

*I expect to move on, I’m on the council waiting list. But I don’t need more than a room. Ideally I’d like to live in this area, so a room might be more available, or a studio flat.*

One person revised his action plan after several months in accommodation to make it into something he felt was more realistic:

*Now I’m comfortable in [hostel] and there’s the offer of a bedsit [attached to the hostel] when the next one comes up … With the bedsit, it gives me a bit more independence, what I’m capable for myself, so it’s a good thing. At one time, for me it had to be off the streets into a flat, it had to be that or nothing, but now I’ve slowed down a little bit … I’m breaking in easy.*
8 Expansion and replication

Summary

There was widespread agreement among project stakeholders that the personalised approach could be expanded to other rough sleepers in the City of London, particularly to those at risk of non-engagement with services and of continued homelessness.

The project has provided a basis on which to rethink the approach taken to helping people off the street. Central to this is asking people what they want rather than providing a standard offer that can be refused. This establishes a more equal relationship between them and workers and puts people more in control of their plans for moving away from the streets.

The context of an assertive approach to outreach with rough sleepers was a factor in the decision for some people to move away from the streets. It is not clear how the model would work in an area where there is less of an outreach presence. Within the City of London, ensuring that the personalised budget was genuinely distinct from standard outreach was crucial.

There were some issues with providing items of value to a drug user during the project, although this person is still in accommodation and is in treatment. The extent to which the approach was tested with drug users is limited.

The project worked with people who had a range of mental health problems and it is likely that people had had traumatic experiences which they did not discuss with the project coordinator. Obtaining mental health assessments for people was challenging to arrange. A strong multi-agency approach to cases where people have severe and enduring mental health problems is essential to ensure an appropriate service to this group.

Key features for replication in other areas are: support from the local authority including quick access to money; clarity about who is eligible and about what the budget is for; an action plan to give responsibility to the coordinator and the recipient of the budget; and an intensive and consistent approach to working with people.

The project has received additional funding to continue until March 2011, after which it will be mainstreamed within the work of Broadway’s outreach team in the City of London.

Expanding the personalised approach to more rough sleepers in the City of London

All of the people with personalised budgets interviewed for the evaluation said that they thought the personalised approach would work with other long-term rough sleepers:

*The personal budget is a good idea … You’re more likely to get people to want to go in, definitely, plus if there’s support there.*

*There’s some guys out there will jump at the opportunity, they’ve been out there long enough.*
There was general agreement among steering group members interviewed that the personalised approach should be rolled out to others who have been on the streets for some time and are at risk of continued homelessness. It was generally thought that the approach would not be appropriate for people who were new to the streets as this could encourage rough sleeping and because the existing provision is considered to be effective for this group:

They’re not necessary for everybody because some people can work through existing pathways really well and they don’t need this extra imaginative approach. But for some, that group in the middle that are being forgotten and are proving difficult to work with and for whom we’ve lost energy and ideas, they are a fantastic opportunity to approach work with those individuals differently.

Commissioner

Some thought that, as the numbers of long-term rough sleepers decrease, the nature of the personalised budget might change to something which helps people stay in accommodation:

It may be that we use it as an option to keep people in. So focus much more on what keeps you in, what activities can we help you engage in.

Steering group member

The experienced outreach workers interviewed warned that the project might over time provide a reverse incentive to stay or return to the streets, but believed that this could be managed.

A fundamental change in approach

Several steering group members said that the project had encouraged them to consider a fundamental change in their approach to working firstly with rough sleepers, and secondly with all homeless people. This change is related to asking what people want and need to help them off the streets rather than providing a standard offer. Asking this question is felt to engage people in a more ‘adult-to-adult’ way, putting them more in control of the support provided.

Some suggested that this way of working could be adopted in all outreach provision:

This is shifting the conversation to grown-ups, saying ‘what can we do?’ It’s a fundamental shift in how you see people … I’d like to see the approach rolled out to everyone [all clients of the service].

Homelessness service provider

It’s quite hard to just change overnight the way you’ve always approached this problem … These pilots give us the opportunity to talk differently, think differently, describe the problem differently … Once you know the personalised approach is worth doing … why can’t you build that entire approach into all of the clients you work with? The first thing you think to ask them is, ‘how can we help you off the streets, what do you need?’ … It just becomes part of your approach and part of your toolkit that you’ve got a devolved pot of money that you can order into for whoever needs it and you all have a personalised approach in terms of which worker they work with, not having to see them on the streets …

Commissioner

Working with drug users and people with mental health problems

Further work is required to determine how personalised budgets could work most effectively with people with drug or mental health problems.
There are very few drug users among the City’s rough sleeping population, and only one person engaged in the pilot had a serious drug problem. He moved into accommodation before his methadone script had been arranged, and bought a television with his personalised budget, but immediately sold this to fund his drug use. Professionals involved in the pilot thought that safeguards should be in place, for example people should be engaging in treatment before items are purchased which could be sold to fund drug use. The project coordinator is planning to explore further how personalised budgets could work with drug users.

Several people had mental health problems, and professionals involved suggested that most probably had histories of trauma which had led to them spending a long time on the streets. People spoke very little about their histories, which made addressing any issues difficult for the coordinator.

The coordinator tried to ensure that people she believed might have mental health problems underwent a mental health assessment before agreeing their action plans, but this was sometimes difficult, and getting necessary support from mental health teams was sometimes a challenge:

[Mental health teams have] seemingly given up on anybody who they label as having a personality disorder, which means it’s pretty difficult for us to work with them … [They should be] offering a full mental health service to people on the streets … CPNs [community psychiatric nurses] going out, meeting with people, getting them appropriate housing-related options, and following it through.

Professional

Other factors influencing outcomes

As previously discussed in this report, the City of London is taking a proactive approach to ending rough sleeping, and the personalised budgets pilot is one of several initiatives aimed at supporting people to come off the streets. These include a range of accommodation options, such as The Lodge, and an assertive approach to moving people on. Most professionals and many people with personalised budgets interviewed, believed that this was a factor in people’s decisions to engage with the personalised budgets project:

The personalised budgets probably can only work if it’s working alongside a lot of other proactive things. I could be wrong, but I think you need the accommodation options, you need the more assertive approach, and you need the partners on board.

Steering group member

[The personalised budget project] hasn’t worked on its own. It’s worked with an awful lot of persuasion elsewhere.

Steering group member

Replication

For successful replication, professionals involved with the project thought that the following were necessary:

- support from the local authority, including quick access to money and an understanding that delivering accommodation outcomes can take time;

- clarity about who is eligible for a personalised budget before the project commences;
• clarity with potential recipients of personalised budgets by explicitly telling them the purpose of the budget (to help them move off and stay off the street);

• accountability through planning items purchased in an action plan; and

• commitment to ongoing, intensive work with people.

Funding

Steering group members suggested that similar projects could be funded through the Homelessness Prevention Grant, Supporting People money or un-ring-fenced area-based grants:

This is something that a whole load of partners should contribute to because it’ll help around reducing offending, community safety, social care, ambulance carriages, delayed discharge off acute wards.

Steering group member

Mainstreaming and the future of the project

The pilot has received additional funding to continue until March 2011, following which it will be mainstreamed within the work of Broadway’s outreach team in the City of London.

The way in which the project will be mainstreamed has not yet been decided. However, most steering group members agreed that having a discrete post which works alongside the outreach team was beneficial. This ensures that the coordinator works in partnership with the outreach team while making it clear to people who are offered personalised budgets that the project is distinct from generic street outreach work.
Conclusions

• The personalised budgets project has exceeded the expectations of all involved. Seven of fifteen long-term rough sleepers, targeted because they were the hardest to reach with standard methods, remain in accommodation which they have maintained for between four and eleven months. An additional two people are making plans to move into accommodation.

• All six accommodated people interviewed for the project evaluation talk positively about their lives in accommodation, and have begun making plans for a long-term future in accommodation. This includes registering for courses, reconnecting with family, developing independent living skills such as cooking and paying bills, and addressing physical and mental health and substance misuse problems. This suggests that even long-term rough sleepers who say they do not want to go into accommodation can choose to go in when they are in control of the conditions for doing so.

• Five people are not engaging with the project; the project coordinator continues to try to engage them. Of these, one does not wish to claim housing benefit, one has refused a personalised budget and is sleeping rough in a different borough, one has refused a personalised budget but moved into accommodation, and two have disengaged following unsuccessful moves into accommodation.

• The personalised budget fulfils several roles: it facilitates engagement with the coordinator and helps establish trust; provides an incentive to go into and stay in accommodation; enables a flexible response to individual needs; helps maintain fragile moves by responding to crisis; and enables people to sustain change by developing a new lifestyle and identity, and planning for a future.

• The project has been successful because it has brought elements of choice and control to people not offered by standard offers of support, alongside intensive support from one trusted worker.

• Personalised support from one worker who is seen to care enables the development of a trusting relationship and supports people through anxieties and difficulties during their transition from the street to a settled life in accommodation. Central to this is the coordinator’s negotiation of flexible, personalised ways of working from other services (such as hostels and Job Centres), or support where other services (such as the benefits system) are not able to be flexible.

• Long-term personalised support after resettlement, provided by one dedicated worker, is seen by the people with personalised budgets and professionals involved as essential to maintaining tenancies. This needs to be over and above existing provision (such as tenancy support teams or hostel key workers). The importance of this is demonstrated by the high number of abandonments when personalised support has been temporarily withdrawn (despite handovers to colleagues) during short periods when the project coordinator has been on leave.
All those involved – both people with personalised budgets and professionals – believe that the personalised approach could work with other rough sleepers. However, a different way of working with personalised budgets may be required for people with drug problems and people with mental health problems.

Recommendations: providing personalised support to rough sleepers

This pilot project demonstrates that a personalised approach can be effective in supporting long-term rough sleepers to come off and stay off the streets. Providers of services to this group of people should explore how a personalised approach could be mainstreamed within their services.

The success of this project lies in its personalised approach, as much as in the provision of a personalised budget. A personalised approach delivers genuine choice and control to the recipients of services. It entails asking what people want (rather than offering pre-determined options), supporting them to develop realistic goals, and working with them to achieve these goals. Areas intending to adopt a personalised approach must base it on this understanding of personalisation.

There should be clarity about the aims and scope of any personalisation project among those commissioning and delivering the project. These should be explicitly communicated both to people receiving a personalised budget and to stakeholders, such as other service providers.

A focus on the longer term rather than pressure on a service to achieve quick outcomes is more likely to benefit long-term rough sleepers. People with a long rough sleeping history can need time to make major changes in their lives such as moving into accommodation. While the project consistently focused on getting people into accommodation it proved important for people not to rush into major changes in their lives. Moves into accommodation are fragile for this group and personalised support should be available for people after they move into accommodation to help maintain their tenancies. Some people may need this support for many years.

The close, trusting relationship between the person delivering the project and the person receiving the budget has been central to the success of this project. This has been facilitated by a small case load which enables the coordinator to spend long periods of time with budget recipients; the coordinator working alone; and the provision of support by the same person after people have moved into accommodation. However, it has raised potential issues around dependency and feelings of abandonment when the coordinator is on leave. Areas intending to adopt a personalised approach should ensure that the model adopted facilitates this trusting relationship. During periods of leave a full, planned handover is essential. Clinical supervision should be provided where the person delivering the project is working alone.

A process should be established ensuring that money can be quickly accessed. In this project, the coordinator had access to petty cash and a credit card, and the local authority was able to authorise requests for money within one day.

The support of the local authority is essential in delivering a personalised approach to supporting long-term rough sleepers. It is important to engage other service providers working with recipients of personalised budgets to ensure that they also adopt a flexible approach.

Further work is required to determine how personalised budgets could most effectively work with people with drug or mental health problems.
References


Communities and Local Government, Rough Sleeping England, Total Street Count 2009

In Control (2009) An introduction to self-directed support


Look Ahead Housing and Care and the London Borough of Tower Hamlets (2010) Choice, Control and Independence: Personalising Block Contracts in Supported Housing

Rough Sleeping England: Total Street Count and Estimates 2010
Appendix I

Methodology

Overall approach

The pilot personalised budgets project was evaluated using an action research approach. Action research, in this context, involves practitioners and researchers reflecting together on learning from a project while it is being delivered. This was felt to be the most appropriate framework for conducting a low-cost, low-impact evaluation. It was hoped that an action research evaluation would generate useful learning for the pilot project and beyond, and develop and embed monitoring systems and reflective practice within the core functions of the project team, without denaturing the pilot project itself with heavy requirements for research participation.

Action research offered the opportunity to systematically observe and reflect on the pilot project and its impact. In keeping with an action research framework, the research design evolved over the course of the project, through dialogue between the research team and those who delivered the project.

Aims

The overall aims of the research project were:

- to deliver a programme of research and evaluation in order to understand processes and outcomes associated with delivering personalised budgets for rough sleepers;
- to facilitate and harness practitioner learning and outcomes through action research and related activities; and
- to develop and disseminate learning and recommendations to inform the future of personalisation with homeless and vulnerable adults.

Key research questions were:

- What models of personalised support for rough sleepers are possible, and what are their implications?
- What do former and current rough sleepers, practitioners and commissioners think about these models and their implications?
- Which rough sleepers engage with the project, which don’t and why?
- How do planned processes work, how are they adapted during the project, and what are their strengths and weaknesses?
- What factors help or hinder positive changes for intended beneficiaries at each stage of the models developed?
- What are the outcomes of personalised support packages at individual and aggregate levels?
• Are there any differences in engagement with personalised support versus traditional service supports, and if so, why?

• What are the implications for replication and roll out beyond the pilot?

Research activities

There were a number of research activities:

(a) Meetings with the project coordinator to reflect on practice and service development
The lead researcher met with the project coordinator every three weeks. The meetings covered:

• models for delivery;

• strengths, weaknesses and possible adaptations in processes; and

• the progress of individuals, with a focus on reasons for change and barriers / resistance to change.

(b) Qualitative interviews with people with personalised budgets
Eight people with personalised budgets were interviewed for the evaluation. Seven of these were in accommodation at the time of their interviews. One person was interviewed a second time, six months after his first interview. Because people’s engagement with the project was precarious in the initial stages, the decision was made not to conduct interviews at these stages in case taking part in the research jeopardised people’s engagement with the project. Although the researchers sought interviews with people who had been offered personalised budgets but chose not to engage or subsequently disengaged, these could not be secured.

Interviews were semi-structured and aimed to explore people’s views and experiences of the pilot project in depth.

(c) Qualitative interviews with other project stakeholders
Semi-structured interviews were conducted with ten project stakeholders. These included:

• commissioners at the City of London Corporation and Communities and Local Government;

• managers involved with the project at Broadway;

• a tenancy support team worker, a day centre manager, a hostel keyworker, and a Clearing House worker who were working with some of the people with personalised budgets involved in the project; and

• a member of the outreach team operating in the City of London.

(d) Monitoring and support planning tools
The project coordinator regularly completed monitoring forms recording people’s levels of engagement with the project and with the process of change, their accommodation situation, and their support needs. Individuals’ action plans were reviewed as part of the evaluation.

(e) Attendance at steering group meetings
The project researchers attended each steering group meeting for the pilot project and encouraged the steering group’s reflection on information arising from the project.
(f) Involvement of people with experience of rough sleeping
A meeting with the project coordinator was facilitated by a researcher who had had experience of rough sleeping. The interview and the researcher’s own reflections on the project informed the analysis of the research data.

Analysis

Researchers and practitioners worked in partnership to analyse and present data. There were two phases to this work.

Firstly, ongoing analysis of information took place as part of the reflective cycle of action research. This was integrated into reflective meetings with practitioners and the steering group.

Secondly, the summative analysis of information at the end of the project required specific sessions to agree analysis frameworks and the process of coding and themeing data. Analysis sessions took the form of two half-day workshops. One was with the full research team, and the second also involved the project coordinator. At the analysis workshops, frameworks for analysis were developed and emerging models were explored and critiqued.

Ethical Issues

The project adhered to Social Research Association guidelines and was approved by the Ethics Committee at Lancaster University. Specific considerations included:

Informed consent of participants

Participants were clearly informed of the purpose of the research. Written consent was obtained for their information to be used in the study in the form of case studies, and verbal consent was obtained for participation in interviews. Clients were assured that if they did not wish to take part in the research this would in no way affect their ability to access the service delivery element of the pilot project.

Confidentiality

Interview data was confidential to the research team. The researchers were careful when writing the research report to remove all identifying information. Each of the people written about as ‘case studies’ in the report read their case study, had the opportunity to comment on it, and gave their written consent for it to be published.

Participant safety

Researchers were experienced at working with this client group, and had had Criminal Records Bureau checks. All participants had working relationships with the project coordinator with whom they could discuss any issues which interviews may have brought up, and researchers were prepared to refer people to other sources of support if this was necessary.

Researcher safety

Researchers sought advice from practitioners to ensure their safety when conducting interviews.
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Broadway’s research and evaluation projects focus on improving and developing services for vulnerable adults. They are aimed at practitioners and policy makers with a view to developing effective, quality services and promoting best practice. The team uses a range of methodologies including workshops, focus groups, interviews and surveys.

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Juliette Hough is the Research Officer at Broadway where she specialises in research with homeless and socially excluded people. She has recently conducted research into rough sleeping, street-based sex work, resettlement, and bullying and harassment in hostels. She has conducted evaluations of services for homeless people and sex workers. Her background is in research and policy around alcohol misuse.

Becky Rice works as Research and Information Manager at Broadway. She oversees a programme of research and manages the government-funded CHAIN database, which supports front-line work and provides extensive information about rough sleeping in London to policy makers. Becky has recently undertaken qualitative research with sex working women, women at risk of offending and people who have complex needs relating to substance misuse, mental health and offending.