



**Birmingham Changing Futures Together Evaluation**  
**Wider activity supporting people experiencing multiple disadvantage in Birmingham**

Lauren Bennett, June 2022



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## Acknowledgements

Thank you to everyone who took the time to participate in the research and share their insights.

## About Revolving Doors

Revolving Doors is a national charity that champion’s long-term solutions for justice reform that tackle the root causes of reoffending and support people’s journeys towards better lives. We advocate for a humane approach that responds to people’s unmet needs and works with them to reach their full potential and to thrive.

We focus on the ‘revolving door’ group of people, those who have repeat contact with the criminal justice system whose behaviours are largely driven by unmet health and social needs. These include combinations of substance misuse, homelessness, mental ill health and domestic abuse often referred to as ‘multiple disadvantage’.

We advocate for a system that recognises and addresses the drivers of contact with the criminal justice system, namely trauma, poverty and discrimination. Our approach involves empowering the voices of people with lived experience and conducting high quality research and evaluation to influence policy, make services more effective and innovative and offer alternatives.

## Summary

This report is part of the Birmingham Changing Futures Together (BCFT) evaluation. It provides an overview of the different activities taking place in Birmingham and the wider West Midlands to support people with experience of multiple disadvantage that ran alongside the National Lottery Community Fund BCFT programme.

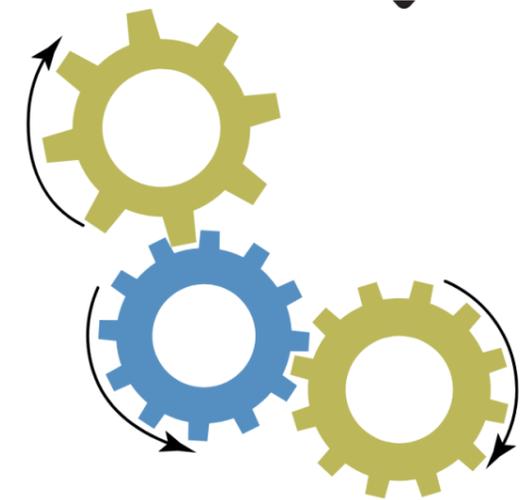
Programme staff and wider partners acknowledged that a key success of the Birmingham Changing Futures Together programme has been the ability to share learning and good practice with external partners to inform new initiatives aimed at or benefiting people experiencing multiple disadvantage. Additionally, [BVSC](#) has been able to build on their experience of delivering the BCFT programme to deliver and/or support further provision for this group.

For example, BVSC has:

- Been the Strategic Partnership Manager for the West Midlands Combined Authority **Housing First Pilot**, which was targeted at people with experience of homelessness and other complex needs.
- Developed a set of **Exempt Housing Quality Standards**, which has helped to drive up the quality of accommodation and care, support or supervision received by residents of non-commissioned supported accommodation, many of whom have current or previous experience of multiple disadvantage.
- Been the designated Project Manager for the Birmingham City Council **Rough Sleeper Initiative**, which aims to reduce the number of people rough sleeping and length of time people spend on the streets.
- Supported Birmingham City Council to undertake a **domestic abuse needs assessment** that captured views and experiences of domestic abuse survivors and practitioners to inform the implementation plan for future domestic abuse services in the city.
- Developed the **Commitment to Collaborate toolkit** in partnership with St Basils and the West Midlands Combined Authority Homelessness Taskforce. The toolkit aims to prevent and relieve homelessness through providing information that will support local organisations think about actions that they can take.

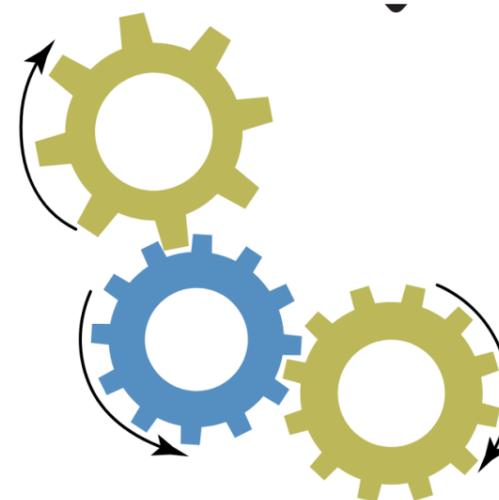
BVSC are now also developing a Lived Experience Strategy – in recognition that many organisations are or want to involve staff and volunteers with lived experience in the design and delivery of their services. It is hoped that this document will help to raise awareness of opportunities and create consistency in practices so that they are good quality.

“BVSC have run a number of initiatives and are really good and carry out their research, evaluation reflecting upon what works and what does work so we are always keen to gain the learning from them, especially around their challenge of getting better alongside [the good practice].” (Birmingham City Council Commissioner)



“There was a lot of trust because of the different programmes we were delivering that we could do that [additional work]. So yeah, I think that’s been a lasting thing.” (BVSC staff member)

“It’s been instrumental in making us a key partner, not just in terms of delivery, but in networks and commissioning...we have played a key strategic role in the city” (BVSC staff member)



## 1. Background

This report presents findings from a small piece of research exploring wider work targeting people experiencing multiple disadvantage in Birmingham. It intends to outline other projects and initiatives that aim to improve support for this group in the city, and show, where relevant, how such activity links back to the Birmingham Changing Future Together programme.

### About Birmingham Changing Futures Together

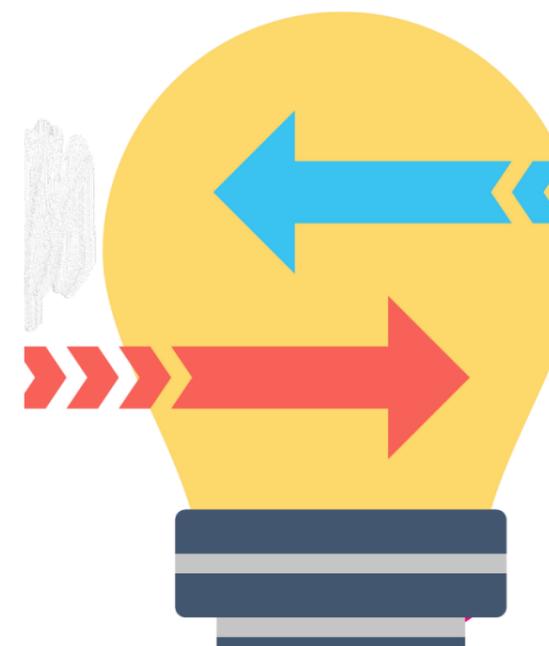
Birmingham Changing Futures Together (BCFT) was one of the Fulfilling Lives programmes. Fulfilling Lives: Supporting People with Multiple Needs, provided funding for eight years to improve the lives of people experiencing multiple disadvantage across 12 different delivery sites in England. In Birmingham, the programme began in 2014 and clients began accessing support in 2015. It ended in June 2022.

BCFT defines multiple disadvantage as people experiencing two or more of the following: homelessness, problematic substance use, risk of offending and mental ill health. Importantly, the programme has focused on service and system change, aiming to ensure that models and approaches pioneered during the project become mainstream.

Revolving Doors has led the local evaluation of BCFT since 2018.

The programme had four systems change priorities:

1. Services for people experiencing multiple disadvantage are accessible at the right place, at the right time.
2. People who design and deliver services are reflective of the community they service, respectful of the value of lived experience and have the skills and empathy to work effectively.
3. Services are committed to long-term connection, collaboration, and change.
4. Birmingham is invested in a forward-thinking strategy that addresses, responds to and prevents multiple disadvantage.



### About this research

Two key methods were implemented to better understand wider activities that have supported people experiencing multiple disadvantage in Birmingham, and how these built on BCFT workstreams and learning. The first was a document review of existing research and evaluation reports as well as grey literature such as policy papers and strategic documents. The second was five interviews with key staff involved in the delivery of these wider pieces of work to identify the key learning and links back to BCFT.

### This report

The remainder of this report provides background detail on the different initiatives that have also supported people experiencing multiple disadvantage during the BCFT programme period, how they linked in with the programme or used learning from this, and the outcomes identified to date.

## 2. Exempt Housing Quality Standards

### Background

BVSC developed a set of [Quality Standards](#) for registered providers of non-commissioned exempt accommodation in 2019, after being approached about this by Birmingham City Council. The overall aim of the standards is to improve housing in the city. The work formed part of a wider government funded [pilot](#) that sought to explore how the provision of supported housing in Birmingham could be improved.

Exempt accommodation is defined as that provided by a non-metropolitan county council, housing association, registered charity or voluntary organisation, which also provides support or commissions somebody else to provide support on its behalf. Providers are expected to provide 'care, support or supervision' but are exempt from licensing and management regulations. Hence, the local authority has limited control and oversight over such provision, and the standards were intended to address some of the challenges presented by this growing sector.

To achieve the Quality Standard, providers must score 70% or above against three assessment areas. Leadership and Management and Referral Assessment and Supervision cover organisational capabilities, and Residents focuses on whether the support provided is person-centred. Providers will either not meet the pass mark or will receive a quality mark of bronze, silver or gold. This is accompanied by a report highlighting good practice and any areas for improvement. The record of awarded providers/those in the process of developing is then used by Birmingham City Council and other referring agencies across Birmingham. This is intended to advantage them in the market.

### The link with Birmingham Changing Futures Together

Most of the exempt accommodation in Birmingham is occupied by individuals who have current or previous experience of multiple disadvantage or different needs such as mental ill health, domestic abuse, contact with the criminal justice system or problems with drugs and/or alcohol. This is because this accommodation is often used by people that have few other housing options. So, like BCFT, the standards aimed to improve the experiences of vulnerable Birmingham residents that are under-represented in services.

In addition, it was felt that the reputation that BVSC had established through delivering different workstreams as part of the BCFT programme, and the organisational experience of developing [quality standards](#) for the No Wrong Door approach meant that BVSC were well placed to deliver this piece of work. The No Wrong Quality standards were developed in collaboration with Birmingham City Council to promote effective and high-quality services for vulnerable people.

**"I don't think [BVSC] would have been commissioned to do that, had it not been for the support Quality Standards that had been done previously as part of the No Wrong Door network stuff... I think that that laid the foundations and there was a lot of trust because of the different programmes we were delivering that we could do that. So yeah, I think that's been a lasting thing."** (BVSC staff member)

**"BVSC have developed the quality standards with our knowledge from the Changing Futures programme but also with accommodation providers that are committed to raising the standards in Birmingham."** (BVSC staff member)

Lastly, Experts by Experience and Involvement Champions from the BCFT Every Step of the Way workstream were involved in developing the Quality Standards and a Charter of Rights to help individuals in supported accommodation be aware of their rights and the support options available.

**"It was a critical friend role really, reminding us that this is about the residents...they were absolutely fantastic..."** (External partner)

### Why this is important

Birmingham has been [described](#) as the 'capital of exempt accommodation' with the number of claimants rising from 3,679 in 2014 to more than 22,000 in 2021.

[Research](#) published in 2019, estimated that 11,000 vulnerable people in Birmingham were living in potentially unsafe and unsuitable non-commissioned exempt accommodation. As there is little accountability, residents sometimes received support that was too high or too low for their support needs, and they often did not know their rights around the level of support they should be receiving. The high rents can also become unaffordable for many. The research also identified issues including that exempt accommodation residents felt that they had no choice or control over what sort of accommodation they were put in nor the type of level of support they would like to receive, and that they often felt isolated and unsafe.

Therefore, efforts to improve resident experience and the standard of exempt accommodation more generally are vital to address these problems and increase consistency and transparency in practices and provision.



### Achievements to date

Birmingham now has over 40 providers that have signed up to the Quality Standards and some agencies have agreed to only refer to providers that have signed up to this. This has also offered transparency to individuals accessing accommodation.

**“The quality mark will enable potential residents and referrers to make an informed decision about the accommodation they use.” (BVSC staff member)**

The number of organisations who have signed up has meant that the standards have been able to impact many people in the city through trying to make positive changes to their accommodation and type of support provided. This was considered an important legacy for the BCFT programme because the initial No Wrong Door Quality Standards were felt to have laid the foundation for this piece of work.

**“The fact that the Exempt Quality Standards came out of it as well, is a really positive thing for thousands of people potentially in Birmingham, there's 20,000 units of Exempt Accommodation in Birmingham, so that's an awful lot of people and you know we have got 40 organisations signed up now and that's potentially over 10,000 units, so I think that's a really amazing thing to be able to try and impact the quality of the services that they provide.” (BVSC staff member)**

There has been interest in this work from the Department for Levelling Up, Housing and Communities as well as the Regulator of Social Housing.

### Going forward

BVSC want to be able to involve people with lived experience in the Quality Standards work in the future. This has always been part of the plan, but staff changes and the shift to remote working caused by Covid-19 has delayed this. As part of this staff are developing a strategy to do this, considering training requirements and expenses and reward processes.

A data sharing protocol was also suggested as something that would supporting joint working between Birmingham City Council and BVSC and prevent delays in the application/assessment process. As data sharing processes are currently under-developed final award decisions miss out on some local authority input, which would be beneficial.

Lastly, there was a desire for greater investment and commitment from Birmingham City Council to enable the programme to be as effective as possible. For example, concerns around funding and sustainability meant that a coordinator role was not filled, impacting service delivery. Linked to this, it was felt that if applying to receive the Quality Standards was free for organisations, it would be easier to quality assure more local exempt accommodation provision. The cost involved, which is currently based on the number of units an organisation is responsible for, was felt to reduce the incentive to go through this process.



### 3. Housing First Pilot

#### Background

The Ministry for Housing, Communities and Local Government (MHCLG, now DLUHC) Housing First pilot ran between 2018-2021 in Greater Manchester, Liverpool City Region and West Midlands Combined Authority regional areas. West Midlands Combined Authority was awarded an allocation of £9.6m.

Housing First supports people experiencing homelessness as well as other complex needs to access and maintain independent housing. Originally developed in the United States, it is an approach that places people directly in independent long-term settled housing, with personalised, flexible and non-time-limited support. Unlike traditional 'staircase' interventions there are no preconditions around 'housing readiness' or participation in treatment and those accessing the service have a choice over the housing and support provided. Hence, secure housing is considered to offer a stable platform from which other issues might be addressed.

Birmingham City Council were the accountable body for the pilot, and BVSC was Strategic Partnership Manager. Consequently, BVSC supported preparatory work including developing a common tendering process, a service specification and job descriptions for support workers.



#### Link with Birmingham Changing Futures Together

BCFT No Wrong Door organisations, Shelter, Trident Group and Cranstoun were involved in delivering the Housing First pilot in Birmingham. An evaluation of the role of BVSC in supporting the WMCA Housing First Programme and Rough Sleeper Initiative (explained more on p.8) concluded that the team's involvement in supporting the development of the programme and sharing learning from the BCFT programme with the different local authorities was important. This included staff's understanding of key elements such as Psychologically Informed Environments (PIE).

Prior to the tendering process for the Housing First pilot being released, Shelter and BVSC developed an early adopter phase to think about what was needed and how the expertise developed through the Lead Worker Peer Mentor (LWPM) programme could be built upon. This involved working with around 25 clients, some of whom had been supported by LWPM, who would have been suitable and benefited from the Housing First programme, with the idea that the learning could then feed into the main programme.

**"We" talked about having like an early adopter service, which would use the kind of the expertise I suppose really that had been developed through the lead Worker Peer Mentor service to start the ball rolling because nobody quite knew what was needed and knowing that I think there was going to be a bit of time required for the tendering process."** (BCFT partner)

When the contracts were awarded some staff who had previously worked on LWPM joined the Housing First team at Shelter. In addition, Shelter aimed to replicate the LWPM model and have peer mentors as part of the Housing First team, after seeing the success of this. However, to meet the fidelity requirements and ensure that staff had small caseloads, Shelter had to remove the peer worker aspect of the model to recruit more Navigators within the budget available.

**"So, it was very much, this is a Housing First holistic offer, but the offer was just from a Navigator. There wasn't everything else that come with it. We wanted to apply the Lead Worker Peer Mentor but then we had to review the numbers, within the cost of the Contract, so very quickly the Peer Mentor roles were removed from our Contract to give us the funds to get more Navigators so that we could hit our target numbers."** (BCFT partner)

Shelter have continued to replicate and have success with peer mentoring roles through Liaison and Diversion services within NHS Trusts.

#### Learning from the Housing First pilot

Staff reflected that peer mentors would play a valuable role in engaging potential Housing First clients and getting to know them and their needs as this is something that Navigators struggle to do. However, it was also acknowledged that having an engagement period to build relationships and support stability went against the fidelity of the Housing First model.

**"When I reflect on it, if I was to re-do the model of Housing First, I see peer mentors as being fundamental within that service but within two real areas. One is around the engagement side, so we could work with somebody for six months and actually not know their issues because they are not willing to talk to us... so I think peer mentors have got a really clear role in that engagement. Before we start talking about [house keys] that engagement, I think that's where the Peer Mentors really sit, not being support workers, not going in with KPI's, not looking for certain outcomes."** (BCFT partner)

It was also highlighted that Housing First clients in Birmingham had entrenched histories of rough sleeping and multiple, interrelated needs and so the Housing First model did not always work with this group, who did not always 'want a house'. Therefore, respondents felt that commissioners (in local and national government) assumed that the people who would enter the pilot had less needs or not as complex histories as was realised. This was felt to contrast to the National Lottery Fulfilling Lives programme that understood and specifically funded support for the multiple disadvantage group. There were also felt to be benefits in this funding not being affected by local and national political aims.

**"I think the theory of the model that Birmingham applied was we put our Housing First Navigator in, after a few years, everyone will be fine and then they can just keep the turnover of the staff and I think that was quite naïve in its thinking. It might have worked in other areas across the country nationally, internationally, but I think when we look at our demographic and the support needs within Birmingham and the lack of other pathways, personality disorder, dual diagnosis, length of entrenched rough sleeping, we are not talking people who have been on the streets for two years,**

we are talking about people that have been on the streets for 20 years, they don't want a house, they want to live on their island because that's all they know, that is their norm, that fear and I think all of those factors into achieving a successful programme wasn't necessarily thought through from a humanistic approach and I think that's probably the reason why it would fail in terms of the model." (BCFT partner)

The intense support required was found to be a challenge, when the organisations delivering the pilot were housing/homelessness focused, but had to help clients address multiple needs, such as mental health and problematic substance use.

"You are saying to the client, this is your one person, and they are going to give you everything that you need, they are a Navigator, they are not mental health, they are not substance misuse, and we don't have the infrastructure to support that..." (BCFT partner)

Another suggestion was that there needed to be a direct pathway from Housing First into rehab, because as also highlighted by the RSI initiative, very long waiting lists has prevented people from achieving outcomes. There was also a desire for a mental health worker within the team, which was included in the initial tender but did not materialise.

"I think it is recognising that Housing First isn't like a 3, 4-year programme, it probably is multiple years or recognising that the systems that need to be in place... our project is the last chance saloon for the majority of people, so we needed that multi-disciplinary team, all we had was 15 Housing Navigators, many of which had lived experience." (BCFT partner)

The lack of wider community floating support was discussed as a wider issue that risked tenancy outcomes not being sustained, and the need to provide a minimum number of hours of support to fit within the Housing First fidelity model went against some delivery organisations desire to deliver person-centred support.

"We would say when do you want me, where would you like to meet, not we are meeting here, for this amount of time, to do this because that's not the way that we work, so yeah, I think it's a shame because it could have been a fantastic service." (BCFT partner)

### Going forward

There has been a move towards the Rough Sleeper Accommodation Programme, which is trying to find accommodation for more people, but does not necessarily provide the same intensity of support.

It was felt that there should be a framework across multiple disadvantage commissioning to provide operational quality assurance. Such a framework was considered important because it would contractually oblige services to adhere to a standard of delivery and promote continuous improvement.

Respondents also wanted to see more cross sector collaboration because without this, person-centred support was limited.

"We are still seeing you know health and housing and education, all as very separate things. The person isn't at the centre." (BCFT partner)



## 4. Rough Sleeping Initiative

### Background

The Government's [Rough Sleeping Strategy](#) was released in August 2018. It set out a vision to halve rough sleeping by 2022 and end it altogether by 2027. The Rough Sleeping Initiative (RSI) intends to help bring about this vision through providing funding to local areas with high numbers of people sleeping rough to deliver projects and targeted support to reduce this.

**"It's seeing what interventions are required within each area to supplement what is already being provided to achieve that target." (BVSC staff member)**

These areas are also supported by sector practitioners and policy officials from across local and regional government and the third sector.

Birmingham City Council utilised the funding for the RSI to commission a range of services to complement existing outreach provision in the city. This included targeted specialist services to support the most entrenched rough sleepers, enhanced addiction and health on street provision as well as first stage accommodation and options for longer-term solutions. For example, people sleeping rough have been offered a Befriending service to help them to stay in accommodation and manage the transition into housing. The service will help with cooking, shopping, utility management, and access to benefits.

BVSC is the Project Manager for the Birmingham City Council commissioned Rough Sleepers Initiative.

### Key activities

As part of the funding, Birmingham is contributing to wider research to understand, per 100,000 people what does minimal or no rough sleeping look like, how can the length of time people are on the streets be as short as possible, and how can local areas ensure that people do not return to the streets, once they have been supported into accommodation.

As with the aims of the No Wrong Door approach in the BCFT programme, through RSI, the lead wanted to reduce silo working between rough sleeping services in Birmingham.

**"There was a lot of silo working there, there was a lot of rough sleeper initiatives in place, there was a lot of previously non-RSI commissioned, some statutory services and they weren't really talking to each other..." (BVSC staff member)**

A way to address this, was to introduce Multi Agency Recovery Review meetings where frontline staff come together to discuss specific cases as well as wider systems change activity. These meetings proved particularly important to ensure that people who had been housed were able to stay there, and to ensure that people's recovery plans were still suitable and meeting their needs. As staff time was often taken up trying to get people into accommodation, these meetings helped to ensure that such outcomes were sustained.

**"There's the client focus because those meetings are specifically to discuss specific cases, and these were people who were falling by the wayside because a lot of hard work was being done getting people into accommodation and I wouldn't say they were forgotten but we got a bit complacent**

**that they were in accommodation. So, the recovery reviews were just to catch people before they started to slip or if someone noticed maybe this isn't going right so review their recovery plan. And then if there was common learning from those, that was fed back." (BVSC staff member)**

Daily handover meetings have also been introduced so that the rough sleeping outreach teams at each organisation can update one another on progress and concerns. These meetings run alongside weekly service lead meetings that a partner attends and regular frontline team operational meetings to plan next steps that day. The purpose of these meetings has been to bring different organisations together rather than to plan and review on an organisation-by-organisation basis, and to create a joint outreach approach with constant communication.

**"Every Navigator, every service, if they see someone out there, they should know who that person is, they should know what the plan for that person is and any action they take should be in line with supporting that plan....so everyone knows where they are and an appropriate person approaches that person, of course if there is a safeguarding or health issue then anyone does but the idea behind that is what you don't get is four different services going through the same person, the same day, how are you, what can we do, can we help you, they should know what needs to be done..."(BVSC staff member)**

A new self-neglect pathway is also being trialled for those individuals who are assessed as having the mental capacity to understand the course of action they are being asked to take, but who remain on the street and see their physical health decline.



There's a lot of rough sleepers out there who aren't, they are passing the capacity test, but they remain on the street without treatment and their condition, physical health is getting worse and worse and worse to getting to a point where some have got Sepsis and then it's been critical" (BVSC staff member)

In addition, a navigator service has been funded by RSI. This service is delivered by local organisations including St Basil's and Trident, and the navigators provide practical support to enable people to get back onto a positive pathway, into accommodation and linked in with wider services, such as mental health and substance use support. An example of an activity a navigator will do with a client is a housing needs assessment. Some organisations work with under 25s and others work with over 25s, and navigators with lived experience are allocated to people with experience of entrenched rough sleeping.

A Befriender also worked alongside Navigators to provide more informal support, and a listening ear, and this was felt to be a success.

"It was someone who as the phrase says, a befriender, a listening ear, someone who would have no axe to grind, not trying to get them into services, just someone to sit there and talk to them. And I think that really, really worked." (BVSC staff member)

People who are allocated an RSI Navigator sometimes then enter the Housing First programme, so that navigator will work together with the Housing First Navigator to ensure a smooth transition. Support is not time limited – so it can be tailored based on individual need.

"Whether it is exempt or whatever, wherever they go, the Navigator will carry on that support until the person is settled and that is key to RSI as well." (BVSC staff member)

Birmingham have also been able to use the RSI initiative to obtain more funding to support clients with their wellbeing, and to try out new hobbies and fulfil their wider ambitions, through a wellbeing fund and personalisation fund. This has proved important as they found that many people were returning to the street after being housed, because this was where their social life was, so funding wider positive activity helped to show them alternatives. Examples of how this fund have been used include for gardening and kickboxing.

"We have got more well-being funding as well and personalisation fund so basically they have got resources as well and so the befriending was more getting people settled, you know, seeing what their interests, hobbies are because a lot of the time we found it was boredom that was taking them back." (BVSC staff member)

"Befriending was more helping them you know to settle in, what their interests are and making money available to actually further those interests." (BVSC staff member)

### [Link to Birmingham Changing Futures Together](#)

The RSI manager in Birmingham sat within the same team that were delivering the BCFT programme, so was able to easily learn more about programme activity and learning.

"A lot of Changing Futures, it makes sense, in some ways it's pretty well obvious in terms of No Wrong Door putting clients at the centre of services, wrapping services around them, making people working together..." (BVSC staff member)

"Basically, the way that RSI service are working and structured now can link to the learning from Changing Futures as a whole, there's a lot of parallels there." (BVSC staff member)

A respondent who had worked in the homelessness sector for many years reflected that the BCFT programme had brought organisations supporting people rough sleeping together and shown what barriers were preventing progress, knowledge and ways of working which supported the RSI programme. They now wanted to see this joint working extend beyond particular areas of work to wider sector and cross-sector partnerships.

"It [BCFT] has helped us to identify barriers and bring people together...I can see that difference in talking and speaking together and feeling as one, I think the network has done that. I think the RSI has come together. It has gone leaps and bounds but as an area of business, not as part of the sector... it is now how are we bringing the sector together." (Partner organisation)

Another important piece of learning coming out of RSI – which also reflects findings on the BCFT programme - was the link between trauma, Adverse Childhood Experiences and multiple disadvantage. For example, bereavement was a common theme emerging from case reviews of people being supported by RSI in Birmingham.

"The other thing that was missing was in terms of when you are looking at people with multiple disadvantage, we weren't going back far enough, the trauma, things like ACEs, the strength based – slightly befriending but that is linked to the strength-based approach...we weren't looking at the journey properly." (BVSC staff member)

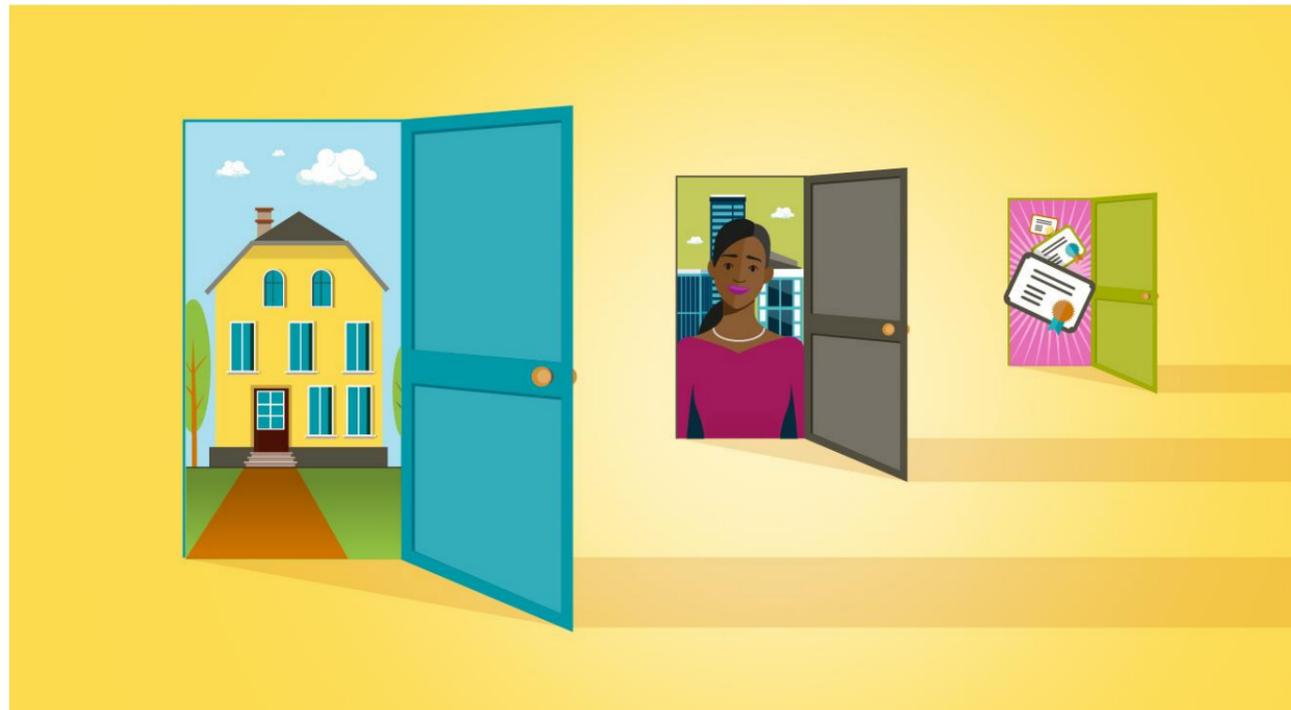
When the Befriender role was piloted, a member of the BCFT team with lived experience filled this, and the positive findings from this pilot enabled Birmingham to obtain RSI funding to make this a paid, rather than voluntary, post.

"The befriender we used was from Changing Futures. And that was when I piloted it. They went onto another post, so there was a bit of a gap there, but we used the pilot findings and basically befriending now is in the next three years of the RSI funding, as a paid post." (BVSC staff member)

It was also written into the navigator contracts that organisations should aim for around half of the posts to be filled by people with lived experience, building on evidence from the BCFT programme about the benefits of having staff and volunteers with lived experience delivering services for people experiencing multiple disadvantage.

Lastly, the experience of the No Wrong Door approach showed the benefits of having a space for frontline staff to come together and discuss their work, rather than just focusing on service lead and manager meetings.

**“Multi Agency Recovery Review meetings, which is through learning from Changing Futures and that is more so for frontline staff.” (BVSC staff member)**



## Going forward

Some of the RSI funding will begin to be phased out as the programme moves towards the latter period, with the hope that the services trialled through this will be mainstreamed. This was felt to be important in ensuring that such ways of working become 'business as usual'.

There is also a focus on the issue of dual diagnosis because this remains a barrier in supporting people experiencing homelessness and other needs in achieving positive outcomes. As highlighted by the BCFT programme and national Fulfilling Lives evaluation the issue of dual diagnosis, whereby mental health services will not work with people who are experiencing problems with drugs because they want to see 'stability' first, prevents people from getting the support needed to help them to address their problematic substance use.

**“There are some areas where the system is just broken and one prime example of that, that we are working on at the moment, is dual diagnosis, which I still don't think we have got to the bottom of and there's still loads of barriers.” (BVSC staff member)**

**“The dual diagnosis, you know, that is a big, big thing basically because there's people out there who are falling by because they can't get the dual diagnosis support that they need. I think that is a big area.” (BVSC staff member)**

Another area where BVSC are trying to influence systems change, so that RSI can achieve more sustainable outcomes is around the processes required for someone to enter rehab. People supported by both the BCFT and RSI programmes have highlighted the lengthy procedures people are expected to go through, to prove that they are 'ready' for this.

**“This is learning from lived experience, from our meetings, our experiences, with clients, with detox rehab and some of the commissioned services, the lengthy process people have to go through before they are accepted. Again, we talked about introducing Housing First so you do not have to prove you are housing ready but with detox rehab, clients still have to prove they are ready and what you should be doing is grabbing that window of opportunity, as soon as someone says I'm open to or reaches out, you should make it as easy as possible for that person to access, of course there's pathways to follow but that's a way too long and then when you are looking at system improvement, that's where that comes in.” (BVSC staff member)**

## 5. Domestic Abuse Needs Assessment

### Background

In the summer of 2021, BVSC were commissioned by Birmingham City Council to undertake a comprehensive assessment of need in relation to domestic abuse in Birmingham. This assessment enabled those affected by domestic abuse and services that work with people affected by domestic abuse, to share their views and experiences. By doing so, survey respondents helped to shape the Domestic Abuse Needs Assessment, its recommendations and the Implementation Plan for the city.

This piece of work followed the [Domestic Abuse Act 2021](#) that sought to provide further protections to people who experience domestic abuse and strengthen measures to prevent and tackle perpetrators. Under this Act, local authorities received funding to provide the required support. Birmingham City Council received £3.2 million.

BVSC were able to build on the relationships developed through the programme and their partnership working during the Covid-19 pandemic to raise awareness of this work and share the findings.

### Key findings from the needs assessment

Survivors of domestic abuse who responded to the survey were positive about services when these were found to be helpful or useful. Examples of helpful support included being advised on how to identify and understand signs of abuse, help with trauma, feeling listened to, and receiving beneficial practical and emotional assistance. The result of such support led to respondents feeling happier, empowered and more confident.

However, most practitioner respondents thought that there were gaps in domestic abuse provision. The most frequently cited gap was lack of provision for housing (37%). There was a concern over poor quality of the housing (10%), with safety a major concern, and a feeling for some that Birmingham City Council does not check whether the housing is suitable. Some respondents felt that this resulted in clients returning to living with the perpetrator. Furthermore, just over 50% of survivors of domestic abuse who completed the survey said that they had needed housing at one point.

In the practitioner survey, lack of resources and support for specific demographics was another frequently cited issue (35%), particularly for men, children, young people, and families. More than half of respondents from the survivor survey (53%) felt that there are gaps in children's support services, mainly because children's mental health and the trauma they faced because of domestic abuse was not being recognised, and that there was little or no follow-up care. 40% of survivors of domestic abuse who responded to the survey and had children said that their children had not received support.

Practitioners also had concerns about increased workloads (22% of respondents) and concerns around financial constraints within organisations.

Refuge and housing support was a common reason why domestic abuse organisations referred to other services. Positive examples of partnership working included improved communication, particularly regarding general information-sharing, sharing best practice, expertise and learning from each other, and regular/frequent contact. 15% of respondents felt that partnerships helped to improve support and quality of services for the victim/survivor.

However, just over a quarter (26%) of practitioner respondents felt that there was poor communication between organisations exacerbated by a lack of information sharing and silo working. Likewise, 21% of survivors of DA who had responded to the survey said that multiagency support and inter-agency collaboration and communication was an important issue (21%), and that the lack of a holistic approach to supporting DA victims was a gap in support.

The biggest issue identified by respondents to the survivor survey was the lack of understanding of domestic abuse issues in society and in services (25%), interlinked with the stigma and disbelief that domestic abuse victims face when trying to escape their situation.

The practitioner survey asked respondents whether their organisations offer training. 60% said training was provided for all internal staff; 26% said that training is provided to some staff depending on role; 27% said they provide training to external organisations. 13% said they didn't know if training was provided and only 3% said training was not provided.

The survey also asked about training needs. It showed that there is demand for domestic abuse training on a wide range of topics. Examples of areas where training was desired included:

- 'Honour-based violence' training (68%)
- Training on the Domestic Abuse Act (61%)
- Local provision and how to refer (61%)
- Safeguarding (56%)
- Working with children who are experiencing domestic abuse (56%)
- Legal remedies (e.g., injunctions) (50%)
- Coercive control (50%)



### Why this work was important

The surveys helped to improve understanding of the experiences of people experiencing domestic abuse, and their views of services. It also gave frontline staff an opportunity to highlight what is going well and where issues need to be addressed. For example, it created a 'starting point' for Birmingham to try and address data gaps so that they could better link up different areas such as housing and domestic abuse.

**"It gave us a really nice picture to draw some conclusions from." (BVSC staff member)**

A respondent also felt that domestic abuse was an important issue that affected many of the other multiple disadvantage domains, such as homelessness, substance use and mental ill health, but that it did not always get the prominence required. Therefore, this work was considered useful in moving domestic abuse up the agenda.

**"It helped push forward domestic abuse an important issue where things needed to change...it tends to be put in at the end...or they're doing it over there...but it goes across all areas, it impacts rough sleeping for example – it needs a heightened focus." (BVSC staff member)**

The mapping work and needs assessment was also felt to help to elevate the status of organisations, especially non-commissioned services, where respondents had highlighted the importance of the support received.

**"Services exist but are absolutely running on a shoestring – they are at risk of closing down imminently – even when those that are nationally recognised, well-respected projects." (BVSC staff member)**

There is also a new post focusing on violence against women and girls, which sits within multiple disadvantage focus at BVSC to progress local efforts in this area.

### Going forward

In response to the research, 29 community grants were allocated to help fill gaps identified through mapping exercise. Therefore, this exercise was considered important in developing an evidence base to push for change.

**"The interim report has come out; some gaps have been identified and to fill some of those gaps, Birmingham City Council have gone out and then 29 community grants have been moderated at the moment to fill those gaps and the final report is due [in June] and then there will be another round of community grants to fill any more gaps." (BVSC staff member)**

There were three main areas that Birmingham City Council funded:

- Provision of support within safe accommodation
- Projects that fill gaps found in the needs assessment
- Projects that support prevention or early intervention

An example of an area that the community grants sought to address was support for people who are disabled and experiencing domestic abuse, as this was found to be a gap. There was also found to be a limited amount of specialist support for Chinese women and Gypsy, Roma and Traveller women. Providing the resources for local organisations that specialised in delivering domestic abuse services was felt to be important as they could build on their existing knowledge, experience and relationships.

**"The Council, employ a team internally to work on domestic abuse when actually, the time and effort it takes to create specialism within a statutory agency is huge, in my opinion and you have got that in the market place, you have got specialist organisations operating well and delivering services, so if you partnered better with those services, you could probably meet your goals and actually it wouldn't cost you as much as it does..." (BVSC staff member)**

Furthermore, it was recognised that many domestic abuse services were in very precarious financial situations, with limited funding, which made it difficult to meet the demand. Such grants were hoped to address this challenge.

## 6. Commitment to Collaborate

### Background

The Commitment to Collaborate (C2C) to Prevent and Relieve Homelessness Toolkit was developed by the WMCA Homelessness Taskforce in partnership with BVSC and St Basils.

C2C utilised St Basil's Youth Positive Pathway Framework as a model. Taskforce officers and St Basils worked together to refine and test the approach so that it could be applicable across all groups affected by homelessness, such as families, and women fleeing domestic abuse.

The toolkit is intended to support organisations and partnerships across the region to think about what actions they can take to prevent and relieve homelessness. For example, it aims to educate users on homelessness in its widest sense and get them to consider how they could prevent homelessness at the earliest opportunity, including when the presenting issue is not identified as having an obvious link to homelessness.

**"It can therefore assist partnerships and organisations to review how they can make their universal domain more inclusive and how they can work better to keep people in, know when they may be in difficulty and take action early to help them remain in the mainstream; deal with crisis quickly and effectively and support recovery, move on where necessary and settled home. It's a tool to enable system improvement." (Partner organisation)**

### Link with Birmingham Changing Futures Together

Although it is not explicitly about people with experience of multiple disadvantage, the toolkit aims to encourage organisations to think about how they can work together to prevent homelessness, which is one of the needs that fall under this umbrella term. It also had the shared ambition of creating systems change so that the positive difference created could be sustained.

BVSC was awarded the contract to turn the approach into a toolkit that could be used as a self-help tool by organisations and partnerships. They were able to build on the existing framework and feedback gathered in the development phase to do this.

It was noted that BVSC's knowledge of the multiple disadvantage and experience of designing and delivering support for this group was one of the many influencing factors that fed into the C2C toolkit.

**"In the context of developing a toolkit that needed to be widely applicable across all groups affected by homelessness, and the threat of homelessness, BVSC's previous experience of working with people experiencing multiple disadvantage did help shape the final outputs of the toolkit." (Partner organisation)**

### Key activities

Organisations, partnerships and networks can be awarded the Commitment to Collaborate logo which they can use in their internal and external communications to show their commitment to addressing homelessness locally. To do this, they must have developed clear pledges that partners are signed up to and an action plan on how they will deliver their commitment to collaborate to prevent and relieve homelessness. Templates are available on the WMCA website to support organisations to create pledges and an action plan, and to log discussions about this.

The WMCA Homelessness Taskforce will keep a record of those organisations, partnerships and networks that have successfully completed the C2C process and will regularly review and follow up with those awarded the logo to track progress and impact.

The model intends to improve understanding to identify what is already being done to prevent homelessness, where the gaps are, and what might be done to address those gaps. It intends to identify and enhance universal protective factors which prevent homelessness (such as good health and secure employment), whilst targeting homelessness prevention at the earliest opportunity. It also shows how activities can be targeted at particular individuals to address specific problems, and how they can then support recovery and move-on once someone has been housed so that outcomes can be sustained.

Two different methods have been designed to support organisations to receive the Commitment to Collaborate logo and take steps towards positive change. Firstly, the [roundtable approach](#) is intended for staff and stakeholders who have a good knowledge of the issues surrounding homelessness. It enables such individuals to come together to consider current activity aimed at the prevention and relief of homelessness.

The other [case study approach](#), aims to support organisations to begin conversations with staff and potential/existing partners. It intends to support organisations to think about how they can collaborate to help stop homelessness. It presents case studies that will help individuals learn more about how homelessness affects people so that they can think about solutions to address the complex issues presented.

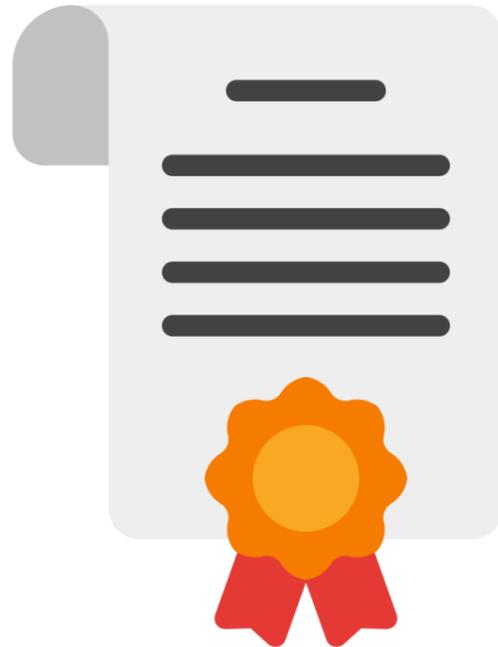


## 7. Lived Experience Strategy

BVSC are currently undertaking an exercise to develop a lived experience strategy. They want this to become the document that organisations and people with lived experience refer to when thinking about and delivering lived experience involvement. It is hoped that this document will link in with a volunteering charter also being developed by BVSC, but that it will include specific guidance around lived experience involvement.

Learning from BCFT and wider work has shown the need to identify organisations including people with lived experience in the design and delivery of services, and to create shared understanding of where opportunities are and how to access them. It is apparent that many organisations in the city are interested in or already undertake lived experience involvement activities, but that these are not always known about by individuals who would be eligible to participate.

*“Linking everything together because we do it with everything else, we try to, so why don’t we do with lived experience...” (BVSC staff member)*



BVSC are commencing a mapping exercise to understand what lived experience involvement activities exist in Birmingham, and how this is defined and understood across different organisations. It is hoped that this will help to link up opportunities and enable organisations to share learning.

*“As a starting point we are going through a mapping exercise of what is there out there in terms of lived experience, you know, what are people doing because a lot of people are working independently, a lot of good work being done, it’s not structured, it’s not tied together, there’s no direction.” (BVSC staff member)*

The aim of the strategy is for organisations in Birmingham to know how they can involve people with lived experience in their work, and for people with lived experience to know what they can expect from such opportunities. It is also hoped that this will mean that there is a greater breadth of good quality opportunities for people with lived experience to get involved in.

*“To get the best out of it I think we need whether you want to call it a prospectus, a charter for the person with lived experience, so in that they know what they are committing to, what the outcomes are, what support and training they will get and they have the opportunity to because again like service users, like people in service with lived experience, like you and me, everyone is different, so give them the opportunity to pitch in their value, their worth, to what they want to and then provide the sufficient training and support for them to do that.” (BVSC staff member)*



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