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ARTEMIS ONE PROJECT

City of Westminster
Changing Futures

Multiple Disadvantage and the Criminal Justice System Project

Dom Williamson Consultants
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If you have any questions, comments or suggested amendments to this report, please email
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FOREWORD

Not Rocket science - why we called this project Artemis One.

We chose the name of this project – Artemis One – as a tongue-in-cheek reference to NASA’s current programme of the same name, which aims to put people back on the moon in the next few years.

On 16 November 2022, around the time that we were halfway through this project, the Orion unmanned spacecraft blasted off from NASA’s Kennedy Space Center in Florida and travelled around the moon, returning to earth and splashdown just as we started writing this report.



Figure 1 - View of earth and the moon from the Artemis One Orion spacecraft (NASA 2022)

Those of us working to improve outcomes for people experiencing multiple disadvantage often hear people say, *“I don’t understand why this isn’t fixed; I mean, it’s not rocket science is it?”*

But we have come to realise that the challenges we highlight in this report are perhaps even more complex than rocket science. For Gravity hasn’t changed since an apple fell on Newton’s head, and the moon is in the same orbit as it was when Neil Armstrong first stepped on it in 1966. In contrast, the ecosystem we are working in is unrecognisable from fifty years ago and is in a state of almost constant flux. Today there is a growing recognition that creating change in complex systems requires a radically different approach than the mechanistic and linear problem-solving approaches of the past. We hope that through our own Artemis Project we can contribute to finding a different way of doing things, one that will improve outcomes for people who may otherwise remain trapped in lives that are harmful to themselves and to communities. And perhaps by working alongside them we can make some progress even before people land on the moon once again.

As well as copying NASA’s project name, we take inspiration from the ambition of their Artemis programme to remind us what humans can do when we put our minds and resources together...

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PART 1 – EXECUTIVE SUMMARY

Introduction and method

- 1.1 This report is written for the Westminster City Council Changing Futures (WCC-CF) Multiple Disadvantage Partnership Group (MDPG) (formerly known as the MDSC). It sets out the findings and recommendations from the Artemis One project which ran from October to December 2022.
- 1.2 The project set out to explore whether there are opportunities to improve outcomes for people in Westminster who are experiencing multiple disadvantage and who are in contact with the criminal justice system.
- 1.3 Artemis One was conceived as the first phase of four-phased programme – diagnostic and recommendation. Subsequent phases, subject to approval, would include co-design and feasibility, implementation and testing, and hardwiring / scaling. These are describe in more detail below.
- 1.4 The project methodology involved establishing a project group, identifying and interviewing key stakeholders, running three workshops, including one with people with lived experience, conducting a national evidence review, and analysing local data. The findings were then analysed and we have made recommendations on a series of “experiments” to take the work forward.

Key findings and insights

- 1.5 Through our research and engagement with stakeholders across the different systems, our key findings are:
 - There are an estimated 400 to 500 people in Westminster who experience multiple disadvantage and contact with the criminal justice system, with perhaps 100 returning to Westminster from prison each year.
 - The available evidence base suggests that effective support for people experiencing multiple disadvantage would include coordinated and integrated services, an understanding of trauma, a highly empathetic approach and sufficient time to develop a trusting relationship.
 - While there are some services such as Starting Over and Minerva that offer at least part of this type of approach to some people in Westminster, we found that many people leaving prison have no effective support and face a confusing “mess” of services.
 - In fact we found that people leaving prison often face an impossible set of expectations and challenges and do not receive resettlement support in line with government guidance. The services they need are uncoordinated and operate in ways that create barriers to meeting people’s urgent needs.
 - Westminster’s statutory homelessness service includes a specialist worker who works with people leaving prison and on probation. However, obtaining suitable accommodation that is available to someone on the day of their release is very difficult.
 - The probation service is under extreme strain and any immediate improvements will have to be made without relying on their involvement. However, building stronger collaborative approaches with prison and probation services should be part of any longer-term strategy.
 - The situation we found in Westminster reflects challenges experienced across the country. Any improvements can draw on (the considerable amount of) national learning and good practice but will need to be bespoke to the context in Westminster.

- There are lots of services in Westminster and some real strengths and opportunities to build on, particularly the Changing Future programme and the potential for a new approach offered by the new administration's Future of Westminster Commission.
- New resources such as the forthcoming Community Accommodation Service – Tier 3 (CAS3) and OHID/DLUHC funding for SSMTR - Housing Support Grant – may help, though there is need for better coordination to maximise their impact.
- Any new approach will require strategic, commissioner and front-line understanding, commitment and flexibility.

Vision

- 1.6 The stakeholders we talked to believe that there is a real opportunity to improve the situation for this group in Westminster. Through the workshops we set out a vision together for how we want things to be different:

We want to improve the way services operate so that men and women experiencing multiple disadvantage and contact with the criminal justice system in Westminster receive a coordinated, integrated and personalised package of services including accommodation, support and treatment, so that it is much easier for them to address their immediate needs on leaving prison and then to begin and sustain their longer-term recovery journey. The evidence strongly suggests this could enable more people to live longer, healthier, and more fulfilling lives while reducing their reoffending, engagement in crime and ASB, homelessness, substance use and their expensive repeat use of crisis services.

Recommendations

- 1.7 Building on our findings in Westminster and a review of the evidence on good practice we are making the following recommendations for testing out new ways of working that could help move towards this vision. Adapting the approach recommended from Human Learning Systems (HLS) we are recommending four “experiments” that have potential to improve responses for the target group. They could be run as standalone projects or as a total package:
- **Experiment 1 – MD Strategic Coordination Team:** This experiment would involve establishing a ‘virtual’ team located within Westminster City Council (WCC) with the remit to coordinate services to create bespoke packages of support around individuals. The team would use multiple databases and consultation with stakeholders to identify a cohort of people who would be offered a more coordinated approach. They would then work to bring services together in new ways that better meets people’s needs.
 - **Experiment 2: Delivering bespoke, trauma-informed relational support:** This experiment focuses on ensuring that every person experiencing multiple disadvantage and contact with the criminal justice system is offered intensive wraparound support through a sustained relationship with a specialist support worker who has the skills, knowledge, time and support to build a relationship with the person before, during and after their time in prison. A project team would work with existing providers who provide this sort of support to develop and extend their offer to the target cohort.
 - **Experiment 3: Improving what happens on the day of release:** This experiment would focus on improving what happens on the day of release from prison, creating a more integrated response including accommodation and support. This would involve working with relevant partner providers and developing and testing new working arrangements to remove the barriers that people face in the first few days after release.

- **Experiment 4: Designing fully integrated housing, support and treatment pathways:** This experiment takes a more strategic, longer-term approach to meeting the challenges faced by people facing multiple disadvantage and contact with the criminal justice system. It would involve engagement with the range of commissioners of the relevant services within Westminster and then developing a process to explore what would need to be in place in order to create fully integrated housing, support and treatment pathways, building on the services already operating in Westminster. Through this process it would seek to influence future commissioning strategies, encouraging closer collaboration between different commissioning bodies and joint design and commissioning to better meet the needs of this group.
- 1.8 To give the best chance of success we recommend that each experiment or set of experiments proceeds through a three-stage process comprising co-design, implementation, and testing and adaptation.
- 1.9 There are also some potential quick wins that could be pursued without the need for a design and test approach. The project group wished to emphasise that these might help on a small scale but the impact would be very limited compared to the potential of the experiments set out above. Quick wins could include flexibility around identification by HSS; flexibility on first day requirements by probation (though this would involve engagement with probation that has to date proved challenging); and establishing a “single point of contact” in organisations such as the police.
- 1.10 Nationally, we recommend that the findings of this report are shared with the Changing Futures (CF) team at DLUHC, and that other CF areas are supported to undertake similar projects building on and learning from our approach.

Next steps, and building momentum for change

- 1.11 With this report, the first phase of this programme, Diagnostic and recommendations – is complete. However, we recognise the complexity of the ecosystem that we are exploring and the inevitability that we have not been able to consider every relevant factor or ongoing change. It will be important to continue to monitor these going forward and to be open to engaging more stakeholders who we couldn’t engage in this project. To help with this, we recommend that the report is shared widely among stakeholders and feedback is gathered and analysed to feed into subsequent phases. The MDPG strategic group will play an important role in disseminating and commenting on the report.
- 1.12 We envisage the next phases for this programme would be:
- Experimentation Co-design, feasibility and options appraisal, which would include the development of a high-level implementation plan
 - Delivery – test and learn
 - Experiment close-out – including scaling and transition to business as usual if successful
- 1.13 To undertake these phases we recommend that the following resources are identified:
- A lead commissioner to act as a senior champion
 - Project management
 - Delivery partner / subject expert consultancy.

PART 2 – INTRODUCTION AND METHODS

2. Introduction

- 2.1 This report is written for the Westminster City Council Changing Futures (WCC-CF) Multiple Disadvantage Partnership Group (MDPG - formerly the MDSC.)
- 2.2 In the summer of 2022, the MDSC decided to explore whether opportunities exist to improve outcomes for people experiencing multiple disadvantage who are in contact with the criminal justice system (CJS), particularly when they leave prison and return to the community. Feedback from stakeholders had suggested that current service arrangements fail to adequately meet this group's needs and that recent policy and structural changes in the CJS seem to be making collaborative working more difficult. As a result, people in this group was thought to be at increased risk of repeated episodes of rough sleeping, to be more likely to reoffend and in some cases to experience overdose and drug related deaths.
- 2.3 The Changing Futures programme commissioned Dom Williamson Consultants to develop and deliver a project to explore whether there is potential for making changes in the system which would improve outcomes for this group.
- 2.4 The approach we adopted in this project reflected the fact that we were seeking to understand and work across a number of complex dynamic systems. We were mindful that we could only ever achieve a partial picture of the whole ecosystem and that other stakeholders that we didn't manage to speak are likely to have access to different data or will have come to a different understanding of what the data means. Therefore our findings, insights and recommendations are offered with significant humility and in the spirit of inviting others to share what they know or understand, with the intention of building our understanding through collaboration and learning together.

3. Project goal, aims and objectives

Overall Goal

- 3.1 The overall project goal is:
 - To improve outcomes for men and women experiencing multiple disadvantage in Westminster who are in contact with the criminal justice system.

Project aims

- 3.2 It was recognised that this work would have to take several phases. The initial phase, the Artemis One project, aimed to:
 - Gather evidence of the nature and scale of the problem in Westminster
 - Learn about the systems that impact on the experiences of the target population
 - Learn from existing research and good practice
 - Improve partnership working and collaboration, enhancing relationships, knowledge and capability in the system
 - Make recommendations to the MDPG group about future work to design and test potential new ways of working and changes in the system.

Project objectives

- 3.3 The project objectives were to:

- Identify, engage and involve relevant stakeholders including people with lived experience
 - Collate and analyse existing sources of data or reports
 - Engage stakeholders in mapping and learning about the system
 - Identify existing services and the associated infrastructure, access points, pathways and outcomes
 - Identify ongoing and forthcoming changes in the system
 - Link the work to the other strands of the Changing Future’s programme including the specialist service, blue light and VAWG workstreams
 - Review the existing evidence to identify relevant lessons
 - Make recommendations for any quick wins and / or potential changes to the approach that can be designed and piloted in subsequent phases.
- 3.4 The expectation is that this project will inform the development of subsequent efforts that may involve:
- Co-design of new integrated services or pathways
 - Piloting and testing
 - Iteration and evaluation of these pilots.

4. Working in complex systems

- 4.1 The Changing Futures programme recognises that improving outcomes for people experiencing multiple disadvantage requires change in complex systems. The operating environment that we are engaging with is a human social ecosystem of interconnected “systems within systems”, with dynamic interactions between numerous elements including:
- People
 - Services
 - Physical places / buildings
 - Local policy and strategies
 - National policy, funding
 - Law
 - Organisational culture
 - Procedures
 - Resources
 - Information / data / knowledge
 - Symbols
 - Operating models
 - Financial flows
 - The wider political and economic context
 - Purpose, motivation, goals
 - Beliefs and attitudes
 - Power and politics
- 4.2 There is a growing body of knowledge that considers how we can approach some of the most difficult social problems by applying “systems thinking”. Work by Toby Lowe and others on Human Learning Systems (HLS)¹, by the Lankelly Chase Foundation², and books such as *Systems Thinking For Social Change* (Stroh, 2015) focus on the need to change the way we think about public services. These note that:
- The goal of public services is human freedom and flourishing
 - Outcomes for people emerge from an interconnected web of interactions among different actors and agencies over time

¹ E.g. [Human Learning Systems: A practical guide for the curious by Lowe, T & Padmanabhan et al](#)

² <https://lankellychase.org.uk/>

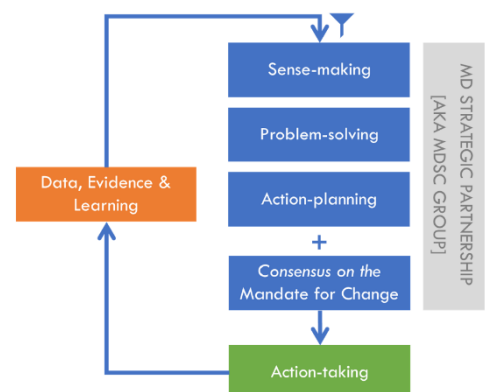
- Any individual in the ecosystem can only ever have a partial perspective on the whole
 - The ecosystem is dynamic, with continual and often unpredictable change.
- 4.3 While we are interested in effecting change in the local ecosystem of public services, we understand that the systems that make up this ecosystem extend outwards to the national level, where change is generated by political and global economic factors, and inwards to the “bio-psycho-social system” that is each service user, an individual with their own unique experience of previous interactions with services, their own identity, history, hopes and fears.
- 4.4 Our goal is to decide what change may be feasible and worth testing within this complexity, while avoiding the pitfalls of unintended consequence that exist in complex systems. The HLS approach recommends creating “learning cycles” at several levels, starting with encouraging “learning relationships” between frontline staff in public services and their clients or customers.
- 4.5 In applying learning from HLS and other sources we are adopting an overall strategy of learning. We recognise that the approaches we are applying are new and still developing. We therefore approach our task with humility, curiosity, and a desire to learn from and share with others. We hope that by setting out our methodology and reflecting on it we can apply it to other problems locally, or to the same topic in other areas. We readily acknowledge that a key insight from research on complex systems in public service delivery is that the context is critical, and something that works in one locality may not work in another.

5. Methodology

5.1 Building on these considerations, the methodology for this project has included the following:

- Proposal development and establishment of project group
- Identifying relevant stakeholders
- One-to-one interviews with selected stakeholders
- Workshop 1 – Interactive service mapping and problem identification workshop
- Workshop 2 – Exploring possible improvements and a vision for change –across the two workshops 25 individuals took part.
- Workshop with five people with lived experience
- Review of existing national evidence
- Desktop review of local evidence and data
- Analysis, reflection and development of outline experiments.

‘Spot the signals in the noise’, from trends (quantitative data), stories (evidence), and expert understanding (insights) of what's happening in the system



PART 3 – REVIEW OF THE NATIONAL EVIDENCE

6. Background and aims of the national evidence review

6.1 This review draws on learning from recent national research to enhance understanding and to inform the recommendations that will be made to the Westminster Changing Futures MDPG. We have assumed the reader has some knowledge regarding policy initiatives, reforms, systems and programmes that affect or target people experiencing multiple disadvantage and have not attempted to explain the background to these in this review.

What evidence and learning is included?

6.2 The review has included evidence from:

- Evaluations and learning reports from programmes supporting people experiencing multiple disadvantage (such as Fulfilling Lives³ and Making Every Adult Matter (MEAM⁴)), many of whom are in contact with the criminal justice system
- Reviews and studies focused specifically on multiple disadvantage as it relates to prison and leaving prison
- Papers focused on alleviating homelessness among those leaving institutions, which include prisons.

6.3 The review focuses on learning and recommendations that are relevant to local approaches rather than national policy.

7. The problem of multiple disadvantage and the criminal justice system

Scale and nature

7.1 Data suggests that annually, approximately 99,000 people in England have a combination of substance and offending issues, and 31,000 a combination of homelessness and offending. 58,000 have all three: homelessness, offending and substance use, or a rate of 1.5 people per thousand.⁵

7.2 The problem of people being released from prison without suitable accommodation is one that is widely recognised. In 2018-19 Her Majesty's Inspectorate of Probation (HMIP) found that 24% of prisoners were released to no fixed abode, including at least 22% of National Probation Service (NPS) cases, by definition the highest risk individuals, released without stable accommodation.⁶

7.3 Data from DLUHC's Rough Sleeping Questionnaire showed that 35% of people in London experiencing street homelessness in the second quarter of 2021 were leaving prison, an increase on the previous quarter⁷, with those living on the streets more likely to be leaving prison than new to sleeping rough (33% compared to 15%).

³ The £112m programme funded by the National Lottery Community Fund from 2014 to 2022

⁴ <http://meam.org.uk/>

⁵ Bramley, G and Fitzpatrick, S (2015) *Hard Edges: Mapping Severe and Multiple Disadvantage*. Lankelly Chase Foundation.

⁶ Her Majesty's Inspectorate of Probation. (2020). *Accommodation and support for adult offenders in the community and on release from prison in England*.

⁷ Department for Levelling Up, Housing and Communities. (2020). *Understanding the Multiple Vulnerabilities, Support Needs and Experiences of People who Sleep Rough in England*.

- 7.4 Those experiencing multiple disadvantage are likely to be over-represented among those who leave prison without suitable accommodation. This is because multiple disadvantage tends to be associated with persistent and low-level offending⁸ such as shoplifting and theft, often driven by addiction, which can lead to repeated short sentences. Data shows that 80% of those on the Fulfilling Lives programme had a history of reoffending when they joined and 32% spent time in prison while with the programme (on average 89 days in first year)⁹.
- 7.5 Among those facing multiple disadvantage, there are groups that are significantly overrepresented in their interactions with prison. As an example, although only 4% of the prison population in England and Wales is female, 29% of Fulfilling Lives beneficiaries who experience prison during their time with the programme are female¹⁰.

Experience in practice

- 7.6 While experiences are individual, there are clear, repeated and well-known issues with the current system that exacerbate the problems as people experiencing multiple disadvantage leave prison.
- **Lack of time to prepare:** repeated short sentences, including recalls to prison, give little time for staff to robustly assess needs and prepare people for release. This is amplified when release dates are issued at short notice, change, or aren't communicated well.
 - **Inadequate assessments:** lack of time, large caseloads among resettlement teams, and reluctance of people to engage can lead to those facing multiple disadvantage being released from prison without an adequate assessment of their needs.
 - **An intimidating to-do list on release day:** people leaving prison who experience multiple disadvantage have an intimidating list of essential appointments to attend (probation, housing, benefits, prescriptions etc), many of which they are expected to attend on the first day. Appointments are often uncoordinated, often requiring people to be in two different places at the same time, sometimes even in different borough and without enough time to attend, especially where appointments are long or can be delayed. This can be particularly problematic where prisons are in remote locations, where public transport is required, and for those released late in the day or on Fridays.
 - **Too few practical resources:** lack of finances (aside from the small discharge grant) and other practical resources such as ID, email addresses, phones and even season-appropriate clothing makes completing the various requirements very difficult.
 - **Unsuitable accommodation:** lack of accommodation that is safe, accessible and affordable in local areas is the highest priority among people leaving prison and the biggest challenge, especially for those who had unmet accommodation needs before entering prison. Domestic violence victims face particularly difficult situations and there is often a lack of appropriate accommodation for women with children.
 - **Negative support networks:** people leaving prison are not always able to avoid negative influences on them if they are released without any other support, such as former dealers who may wait at the prison gate. Other people can feel they have no choice but to rely on those negative support networks in order to have a meal or place to sleep that night.
 - **Poor coordination:** agencies often do not share information well or coordinate support plans, leading to inefficiencies and duplications. Different teams in and outside prison

⁸ *Ibid.*

⁹ Welford, JD, Milner, C. and Moreton, R. (2021) *Improving transitions for people experiencing multiple disadvantage: Prison release.*

¹⁰ *Ibid.*

leads to disengagement, as does treatment programmes being repeated in the community that people have already completed while in prison.

The consequences for individuals

- 7.7 The evidence shows that those leaving prison without suitable accommodation have poorer outcomes than those with settled housing. Figures from the Ministry of Justice (MoJ) in 2016 reveal that people leaving prison who become homeless are significantly more likely to reoffend. The more recent HMIP findings confirm this remains the case, reporting that in the sample of cases looked at, the proportion of service users recalled or resentenced to custody within 12 months of release was almost double for those without settled accommodation¹¹.
- 7.8 For those experiencing multiple disadvantage, analysis of the Fulfilling Lives data revealed that people who spent any time in prison during their first nine months with the programme had higher levels of need and risk and lower self-reliance, both when they joined the programme and after a year on the programme. They are also more likely to have lower levels of engagement with support services, and have worse levels of self-care, living skills, social networks and relationships after a year on the programme than those without prison experience over the same period. People who spent time in prison in the first nine months on the programme were less likely to move on to a positive destination, on average by nearly 9 percentage points, than someone without prison experience¹².

Considering the wider criminal justice system

- 7.9 Separately to serving short prison sentences, data from Fulfilling Lives show that people experiencing multiple disadvantage interact with the criminal justice system in different ways, including arrests (28%), cautions (8%), magistrates court proceedings (21%) and crown court proceedings (5%).¹³
- 7.10 There is little research focusing on the impact of interventions with those experiencing multiple disadvantage at these other interaction points with the criminal justice system. We include more information on opportunities for these at section 9.

8. Lessons to shape local approaches

Key messages

- 8.1 The evidence paints a consistent picture of the fundamentals (see below) needed to improve the experience of leaving prison for people with multiple disadvantage.
- 8.2 There are many examples of, and much learning from, delivery interventions that have succeeded in helping to deliver those fundamentals, as well as the supporting mechanisms that are needed for such interventions to be effective.
- 8.3 The focus and benefits of the delivery interventions aimed at people with experience of multiple disadvantage mostly extend beyond supporting a more satisfactory experience of leaving prison: they attend and contribute to improved outcomes in a range of areas including reducing future reoffending.

¹¹ Her Majesty's Inspectorate of Probation. (2020). *Accommodation and support for adult offenders in the community and on release from prison in England*.

¹² Welford, JD, Milner, C. and Moreton, R. (2021) *Improving transitions for people experiencing multiple disadvantage: Prison release*.

¹³ Number of participants with at least one interaction in their first quarter on the programme. Lamb, H. et al (2019) *What Has Fulfilling Lives Achieved? Method Notes*. National Lottery Community Fund.

- 8.4 Thanks to the coordinating efforts of programmes such as Fulfilling Lives and MEAM there are also emerging messages on how systems can change to better support this group.
- 8.5 There is little focus in research on why good practice is not consistently in place despite the range of policy initiatives and guidance attempting to address the issue. It is likely that the barriers include a combination of differing priorities, limited resources, and ineffective implementation. Organisations such as the Royal Society for Arts (RSA) suggest that design work needs to be augmented with systems thinking in order for innovations responding to social challenges to navigate barriers to change successfully¹⁴.

The fundamentals

Individualised planning and response

- 8.6 In their design and implementation, typical planning approaches often fail those with experience of multiple disadvantage. More robust pre-release assessment and plans need to be completed, with the necessary time built in to build a trusting relationship. Given the challenges of frequent short sentences experienced by this group, flexible approaches are needed that follow the person rather than being built around individual episodes of prison.
- 8.7 Individual planning is more than just recognising individual needs; it is also about understanding that typical responses often do not work for this group. For example, although the evidence is still patchy, studies suggest typical domestic violence responses do not work for women facing multiple disadvantage¹⁵. Similarly, multiple studies suggest that providing temporary accommodation in hostel-type accommodation is rarely appropriate and increases the likelihood of reoffending¹⁶.
- 8.8 Research has not yet provided insights for particular groups facing multiple disadvantage, such as people from minority ethnic backgrounds, LGBT+ people, and those with disabilities.

Co-production and where to focus support

- 8.9 Plans that are co-produced so they meet the person's goals have been shown to aid better engagement and improve outcomes. This takes real skill, especially when an individual's goals are not in line with the priorities of supporting organisations and institutions with enforcement responsibilities.
- 8.10 The motivation needed to work towards a fulfilled life requires more than just addressing basic needs and that over time with the right support those experiencing multiple disadvantage can increase participation in positive social, cultural and wellbeing activities¹⁷. This aligns with desistance theory¹⁸, which describes people moving beyond simple cessation of offending to develop a positive, non-offending identity.

¹⁴ https://www.thersa.org/globalassets/pdfs/reports/rsa_from-design-thinking-to-system-change-report.pdf

¹⁵ Sharpen, J. (2018) *Jumping through hoops: How are coordinated responses to multiple disadvantage meeting the needs of women?* London: AVA, MEAM, Agenda and St Mungo's.

¹⁶ E.g. Homeless Link (2018) *The Future Hostel: The Role of Hostels in Helping to End Homelessness*; Revolving Doors Agency (2015) *Comprehensive Services for Complex Needs: A Summary of the Evidence*; Evans A (2015) *Homelessness and complex needs in Glasgow*. Glasgow Homelessness Network and the Oak Foundation; McHardy F (2010) *Out of jail but still not free: Experiences of temporary accommodation on leaving prison*. EPIC/The Poverty Alliance.

¹⁷ Lamb, H. et al (2019) *What Has Fulfilling Lives Achieved?* National Lottery Community Fund

¹⁸ <https://www.justiceinspectorates.gov.uk/hmiprobation/research/the-evidence-base-probation/models-and-principles/desistance>

Planning before release

8.11 All the research is clear that it takes time to develop robust release plans. While current guidelines suggest this begins a minimum of 12 weeks prior to release¹⁹, this is sometimes interpreted as a maximum. Sentences of less time, short notice of release dates and releases being brought forward exacerbate the difficulties of effective and timely planning.

Joint working

8.12 People experiencing multiple disadvantage who are leaving prison require the involvement of a large number of systems including probation, accommodation, benefits, and health. The necessity for joint working between agencies, with clear lines of accountability, is vital for ensuring that people are not neglected and that plans are coordinated and realistic.

Addressing underlying trauma

8.13 There is a large amount of evidence suggesting that attempting to solve multiple disadvantage without addressing the underlying trauma is unlikely to be successful.²⁰ Symptoms of trauma such as drug use, behavioural problems, and staying in violent or abusive relationships continue to be seen by some services as ‘lifestyle choices’ and lead to people being refused assessments.²¹

8.14 The evidence base on trauma-informed interventions for those experiencing multiple disadvantaged tends towards descriptive accounts of practice rather than critically evaluation or theorising such approaches and their effectiveness.²²

8.15 The evidence on Psychologically Informed Environments (PIEs), while practice-based rather than from academic studies, suggests that they are effective for people facing multiple disadvantage and with histories of compound trauma as well as helping the staff working with them to remain empathetic and effective.²³

Delivery interventions

8.16 A number of delivery interventions have been described and evaluated for people experiencing multiple disadvantage and they are often used concurrently. These include:

Intensive support models

8.17 Intensive support models have shown demonstrable impact in improving outcomes for people with multiple disadvantage as they experience critical transitions in their lives such as leaving prison²⁴. These include:

- Keyworker models – such as those used by Fulfilling Lives.

¹⁹

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1110407/resettlement-and-pre-release-planning-guidance.pdf

²⁰ Hopper, E.K., Bassuk, E.L. and Olivet, J. (2009) Shelter from the Storm: Trauma-Informed Care in Homelessness Services Settings. *The Open Health Services and Policy Journal*, 2, pp. 131-151.

²¹ CFE Research and The University of Sheffield (2020) *Improving access to mental health support for people experiencing multiple disadvantage*. London: The National Lottery Community Fund.

²² McCarthy, L. Parr, S. Green, S. Reeve, K. (2020) *Understanding Models of Support for People Facing Multiple Disadvantage: A Literature Review* CFE Research Sheffield Hallam University

²³ Cockersell, P. (2016) *PIEs five years on. Housing, Care and Support*, 20 (4), pp. 221-230.

²⁴ Sheikh, S. and Teeman, D. (2018) *A Rapid Evidence Assessment of What Works in Homelessness Services*. Social Care Institute for Excellence.

- Assertive Community Treatment²⁵ models – an approach used in community mental health service delivery where the whole team works with everyone on the programme.
 - Critical Time Intervention - often delivered as a nine-month programme coordinated by a single caseworker supervised by a mental health professional.²⁶
- 8.18 Keyworker or link worker models can focus on or be a combination of direct practical and emotional support, navigation and advocacy. They employ staff with knowledge of different support services, understanding of referral processes and criteria and who can build and maintain good working relationships with other professionals. Staff have small caseloads and flexible working arrangements (in terms of timescales and performance targets) that allow them to build relationships and spend considerable amounts of time with people before, during and after release. The role requires staff to be persistent and available as it can take time for someone to trust and accept help.
- 8.19 Models such as Prison Navigators and Through the Gate services focus specifically on the issue of people leaving prison without suitable accommodation and with other needs. Keyworker models have a broader remit, working with people before, during and after prison, as well as people who will not be in prison at all.
- 8.20 As recently as 2020 there was no evidence that Through the Gate services had improved the number of people leaving prison without suitable accommodation (performance against the relevant indicator had not improved). The HMIP inspection also found large unexplained performance in different areas, and very few service users reporting good experiences.²⁷
- 8.21 There is some evidence that where support is separate from (and additional to) probation and prison services this can help to gain trust, as does being clear that support is optional.²⁸

No Wrong Door models

- 8.22 No Wrong Door models aim for more joint working, so wherever a person presents they will be assisted to access appropriate services (more than just signposting). This aims to respond to the issue of people being turned away or disengaging due to having to repeatedly tell their stories to multiple agencies.
- 8.23 Within No Wrong Door models there has been some trial of single assessments across providers. This has led to some complex legal, technological and financial challenges.
- 8.24 The size and complexity of networks also presents a challenge, with evaluations concluding that it may be better to pilot the approach with a small number of organisations first then growing to include others. Where such pilots are developed, it is suggested that organisations are selected taking into account who is deemed most important to those facing multiple disadvantage.
- 8.25 A further challenge to this model is that it does not on its own reduce waiting times to access much-needed services, or create extra capacity within systems.

²⁵ <https://dualdiagnosis.org/co-occurring-disorders-treatment/assertive-community-treatment/>

²⁶ Rodriguez-Guzman, G. Argodale, S. Bartholdy, N. and Gray, T. (2022) *What Works Evidence Notes: Institutional Discharge* Centre for Homelessness Impact

²⁷ Her Majesty's Inspectorate of Probation. (2020). *Accommodation and support for adult offenders in the community and on release from prison in England*.

²⁸ Welford, JD. Milner, C. and Moreton, R. (2021) *Improving transitions for people experiencing multiple disadvantage: Prison release*.

Protocols

- 8.26 There are positive examples where some local authority housing options services operate protocols with prisons to clarify responsibilities and prevent homelessness. When implemented well they have been found to avoid poor practice.²⁹ However these can still be challenging when the person isn't in priority need or if a local connection is disputed.
- 8.27 HMIP similarly found positive examples of local prison release protocols that set out the responsibilities of probation providers, prisons and local authorities and help to implement the Duty to Refer. There were initiatives by some local authorities where housing officers visited prisons, or conducted assessments by telephone or video link, which enabled the local authority to organise housing more swiftly on release.³⁰

Bespoke mental health support

- 8.28 Several of the Fulfilling Lives partnerships across the UK have created in-house, bespoke mental health services. Pilot projects demonstrate that, when designed appropriately, clinical services can engage and effectively support people experiencing multiple disadvantage. Beneficiaries have received vital psychological support to help them manage mental health conditions and past trauma, allowing them to stabilise their behaviours and cope better day-to-day.³¹

Peer support

- 8.29 Peer support has been particularly welcomed by those experiencing multiple disadvantage and has been shown to have significant potential in supporting people with multiple needs.³² This enables people to build trusting relationships based on shared experience as well as offering a role model for change. The role of peer supporters can vary, with some offering emotional support, helping to create daily routines, and connecting people with community opportunities. There are differing opinions about the best time to offer peer support, with some feeling it is most useful to build trust at the start of a relationship and others seeing more benefit later when support can focus on social activities.
- 8.30 Feedback among providers is that peer support works best when supporters are paid, though it is acknowledged that volunteers can add much-needed capacity. It is clear that developing good peer support takes considerable investment in recruiting, training and support. Staff can be wary of peer supporters and this barrier can be particularly difficult to overcome when different organisations employ the keyworkers and run the peer support programmes.³³

Personal budgets

- 8.31 Many keyworker models use personal budgets to help people with costs around leaving prison and more generally as part of their support. Amounts and how it is spent varies considerably between services, but there is anecdotal evidence that suggests it aids engagement and helps to stabilise and enable choice. In addition, analysis from one of the Fulfilling Lives areas shows

²⁹ Rodriguez-Guzman, G. Argodale, S. Bartholdy, N. and Gray, T. (2022) *What Works Evidence Notes: Institutional Discharge* Centre for Homelessness Impact

³⁰ Her Majesty's Inspectorate of Probation. (2020). *Accommodation and support for adult offenders in the community and on release from prison in England*.

³¹ CFE Research and The University of Sheffield (2020) *Improving access to mental health support for people experiencing multiple disadvantage*.

³² The Young Foundation (2016) *Saving Lives, Saving Money: How Homeless Health Peer Advocacy Reduces Health Inequalities*.

³³ Welford, JD. Milner, C. and Moreton, R. (2021) *Improving transitions for people experiencing multiple disadvantage: Prison release*.

that 91% of beneficiaries who received personalisation funds showed progress towards self-reliance compared to 61% of those who didn't receive funding.³⁴

- 8.32 At least one local evaluation suggests that personal budgets can be used by keyworkers to 'plug the gaps' in services. Defaulting to using personal budgets in this way means that problems are circumvented in the immediate term, but it could also lead to a failure to begin to address systemic root causes. The researchers concluded that, "It is important that analysis of the use of personal budgets is used to direct attention to system failures that the Fulfilling Lives programme aims to address."³⁵

Accommodation

- 8.33 There is growing evidence that traditional forms of emergency accommodation for this group, such as hostels, are not appropriate and may in fact reinforce earlier traumatic experiences and increase the likelihood of reoffending.³⁶
- 8.34 Alternatively, mainstream accommodation with holistic support has been shown to reduce reoffending.³⁷ The Housing First model³⁸ has a large body of evidence demonstrating its effectiveness. Where Fulfilling Lives partnerships have used the Housing First approach it has resulted in a high level of tenancy sustainment as well as improved physical and mental health and reduced substance misuse and other risky behaviours.³⁹
- 8.35 The biggest challenge to delivering Housing First is the lack of affordable, suitable housing in the right areas. Location of accommodation is of significant concern for people leaving prison, and it is important for them to be away from negative influences and close to those that are positive.⁴⁰ Evaluations make pragmatic suggestions, such as focusing the model on particular groups of people.
- 8.36 Outside of Housing First, the MoJ and DLUHC have been piloting schemes for accommodating homeless individuals leaving custody. These are beginning to show that, for many who are serving short sentences, the move into privately rented accommodation is not easy, and many need somewhere to stay before they can progress to more long-term accommodation.⁴¹

Supporting mechanisms

- 8.37 It is clear from the evidence and learning that the delivery interventions described above can only be effective if they are supported through a number of mechanisms. These are as follows:

³⁴ Moreton, R., Welford, J., Mulla, I and Robinson, S. (2018) *Promising Practice: Key findings from local evaluations to date* CFE Research.

³⁵ *Ibid.*

³⁶ E.g. Homeless Link (2018) *The Future Hostel: The Role of Hostels in Helping to End Homelessness*; Revolving Doors Agency (2015) *Comprehensive Services for Complex Needs: A Summary of the Evidence*; Evans A (2015) *Homelessness and complex needs in Glasgow*. Glasgow Homelessness Network and the Oak Foundation; McHardy F (2010) *Out of jail but still not free: Experiences of temporary accommodation on leaving prison*. EPIC/The Poverty Alliance.

³⁷ Rodriguez-Guzman, G. Argodale, S. Bartholdy, N. and Gray, T. (2022) *What Works Evidence Notes: Institutional Discharge* Centre for Homelessness Impact

³⁸ <https://hfe.homeless.org.uk/>

³⁹ Moreton, R., Welford, J., Mulla, I and Robinson, S. (2018) *Promising Practice: Key findings from local evaluations to date* CFE Research.

⁴⁰ Crisis (2019) *Criminal Justice and Homelessness: Introductory Briefing for Prevention Review Group Scotland*

⁴¹ Her Majesty's Inspectorate of Probation. (2020). *Accommodation and support for adult offenders in the community and on release from prison in England*.

Information sharing

- 8.38 Finding ways to share information more quickly and easily between partners, with consent, is a key component of enabling support. It also reduces the likelihood of people disengaging due to having to constantly repeat their stories.
- 8.39 As discussed at 8.26, some local authorities have had success developing and implementing protocols that aid information sharing. This has helped to increase referrals to local housing teams through implementation of the Duty to Refer that was established in the *Homelessness Reduction Act 2017*. However, as the number of people referred is substantially lower than the number who are released and end up homeless, there is not yet good evidence that protocols are widespread or effective enough.⁴²
- 8.40 Similarly, we highlighted at 8.23 that some partnerships in the Fulfilling Lives programme are trialling single assessments across providers. Developments such as this take a considerable amount of time and involve complex legal, technological and financial challenges. Some partnerships have found enabling access to data systems for others an easier way to share data than establishing joint systems.
- 8.41 Others have improved information sharing through developing referral pathways, taking time to develop relationships and formal mechanisms such as secondments.

Understanding needs

- 8.42 For partners to create systems that work for people experiencing multiple disadvantage, they need to understand the needs and goals of the client group as well as the priorities and limitations of other providers.
- 8.43 Effective methods of increasing this understanding can come through workforce development programmes, awareness-raising campaigns and communities of practice. The understanding needs to permeate all levels of organisations from strategic and leadership to front-line delivery officers.

Shared approach

- 8.44 Building on the better understanding of the needs of people with multiple disadvantage, responses then need to be developed based on a shared approach among partners.
- 8.45 Recognising that responses need to be trauma-informed and have a psychological underpinning has been shown to be important. Commitment and support to PIEs or other psychological frameworks is needed from senior and strategic managers and includes practical changes such as providing dedicated time and space for reflective practice, training, and psychological support to aid staff resilience.
- 8.46 Developing this shared approach together can provide a common purpose and language that spans diverse organisations and sectors. Research suggests this may provide a key mechanism for reducing 'silo' working.⁴³
- 8.47 Part of this shared approach needs to be discussing and acknowledging what is realistic to achieve with people who are experiencing multiple disadvantage. The evidence shows that relapses and setbacks are normal, and must be accepted as the reality of the work. This does not mean having low aspirations - over a third (37%) of those leaving the Fulfilling Lives

⁴² Rodriguez-Guzman, G. Argodale, S. Bartholdy, N. and Gray, T. (2022) *What Works Evidence Notes: Institutional Discharge* Centre for Homelessness Impact

⁴³ Moreton, R., Welford, J., Mulla, I and Robinson, S. (2018) *Promising Practice: Key findings from local evaluations to date* CFE Research.

programme has been positive, with a lower drop-out rate than some other projects working with less complex needs.⁴⁴

Coordination

- 8.48 Ensuring that support is coordinated, avoiding conflicting appointments and impossible schedules, is seen as a key element of effective support as people with multiple disadvantage leave prison.
- 8.49 The most successful way to achieve good coordination is through holding multi-agency groups around the support of individuals, with clear action plans and accountability. Developing clear and flexible referral pathways among partners is also effective.

Strategic collaborations

- 8.50 Joined-up systems on the ground have limits, and strategic collaborations are necessary to ensure the most success with people facing multiple disadvantage.
- 8.51 In particular, whatever intervention model is in place, a clear and well-known mandate is needed for it to coordinate services across agencies. Strategic leaders need to be clear about the authority the intervention has and how it fits with other organisational priorities.
- 8.52 Strategic leaders can also give approval to more flexible approaches within their agencies, clarifying when and where typical restrictions can be eased.

Realising the potential for systems change

- 8.53 Two recently published reports analyse the learning around systems change for people experiencing multiple disadvantage.⁴⁵ They provide a range of examples of systems change in practice and draw similar conclusions as to what enables such change to happen.
- 8.54 The reports define systems change as below, while recognising that systems change is not a fixed point but that systems need to stay dynamic and flexible.

“Changes to the people, organisations, policies, processes, cultures, beliefs, and environment that make up the system. They ARE beneficial, sustainable in the long-term, and transformational. They are NOT tokenistic, doing the same thing under a different name, overly reliant on key individuals.”

- 8.55 There is emerging evidence that systems change is being achieved across a number of domains: culture; leadership; coordination of support; flexibility of support; infrastructure, pathways and processes; strategy and commissioning; and co-production. For examples, see Figure 9 in Cordis Bright (2022) *MEAM Approach evaluation: final report*.
- 8.56 There is clear learning that systems change is difficult and requires considerable resource and time to achieve. In particular, the Fulfilling Lives evaluation notes that changes have not been achieved across all areas and are especially challenging within the statutory sector.
- 8.57 Three broad categories of factors that have been found to enable systems change are:
- Activities and approaches that harness pre-existing knowledge or innovations within the system to bring about systems change.
 - Factors that create the space and capacity to think about and catalyse systems change.

⁴⁴ Lamb, H. et al (2019) *What Has Fulfilling Lives Achieved?* National Lottery Community Fund

⁴⁵ Cordis Bright (2022) *MEAM Approach evaluation: final report* and, CFE Research (2022) *Creating systems change: Evaluating the contribution of the Fulfilling Lives programme*.

- Having the “right” leadership in place.
- 8.58 Learning suggests that it is vital to recognise that systems change needs to be driven from both strategic and operational levels with effective feedback loops between the two to make connections. There is a need for longer-term programmes of workforce development support as well as training courses to encourage culture change within services.

9. The opportunities beyond prison

- 9.1 There is little research evidence describing practice or the impact of interventions with people experiencing multiple disadvantage as they relate specifically to other interactions within the criminal justice system. There are however several interventions designed around the needs of specific groups and at particular interaction points that may be worth considering further in this project. These include:
- 9.2 **Diversions initiatives at the point of arrest:** most commonly used with young people but with an increasing evidence and practice base for adults⁴⁶. Recent changes to the Out of Court Disposal Framework may be an opportunity to trial a targeted intervention for those experiencing multiple disadvantage.
- 9.3 **Creative use of community sentencing:** an alternative to custodial sentences that could take learning from options such as Integrated Offender Management (IOM),⁴⁷ Intensive Community Programmes,⁴⁸ and problem-solving courts. The Ministry of Justice is currently trialling five such courts: three drug courts in crown court, one domestic abuse court and one women’s court in magistrates’ court.⁴⁹
- 9.4 **Court-based advice:** such as referrals to housing options teams being automatically triggered at sentencing or housing advisors being present in the court building. The court may provide a particularly appropriate place for the families of people who have been given a custodial sentence to seek housing advice. This might include work to avoid the family losing a home where the person going into prison is the tenancy holder, or help to prevent homelessness by paying rent on someone’s behalf or temporarily taking over a tenancy.

⁴⁶ See e.g. <https://justiceinnovation.org/areas-of-focus/adult-diversion>

⁴⁷ <https://www.gov.uk/guidance/integrated-offender-management-iom>

⁴⁸ <https://www.justiceinspectorates.gov.uk/hmiprobation/research/the-evidence-base-probation/specific-types-of-delivery/intensive-community-programmes/>

⁴⁹ <https://www.gov.uk/government/publications/police-crime-sentencing-and-courts-bill-2021-equality-statements/problem-solving-courts-pilots-in-the-police-crime-sentencing-courts-bill-equalities-impact-assessment>

PART 4 – FINDINGS IN WESTMINSTER

10. The “ecosystem” in Westminster

10.1 In this report we use the term “ecosystem” to mean the set of overlapping and interrelated systems and subsystems that are relevant to our investigation. The boundaries of this ecosystem are not well defined, and there are some factors within particular systems that are more relevant than others to the lives of people with multiple disadvantage.

10.2 As we consider each system – for example the criminal justice system or the homelessness system – we find that it has its own subsystems, goals, ways of working and flows of information, power structures and relationships. Within these systems there are dozens of organisations, services and hundreds of individual members of staff and managers. The following table is not comprehensive but illustrate the point.

Political decision making	Criminal justice system	Statutory homelessness
<ul style="list-style-type: none"> • WCC Cabinet • Department • Strategic boards e.g. Health & Wellbeing Board • Reducing Adult Reoffending Board • Mayor of London/GLA • National government 	<ul style="list-style-type: none"> • Ministry of Justice • MOPAC • Prison e.g. HMP Wandsworth • Police - including IOM • Courts • Probation • Criminal Justice charities 	<ul style="list-style-type: none"> • DLUHC • National housing policy, law and regulation e.g. Homelessness Reduction Act 2017 • Commissioning • HSS service
Rough sleeping system	Housing system	Health system
<ul style="list-style-type: none"> • Rough sleeping pathway • Commissioning team • Commissioned services e.g. outreach, CHAIN • Partnerships e.g. WHP • Charities such as The Passage and St Mungo’s 	<ul style="list-style-type: none"> • DLUHC • Supported housing • Council pathways and allocation scheme • Private rented sector including Westlets • Social housing providers eg housing associations 	<ul style="list-style-type: none"> • DHSC and NHS England • Integrated Care System (North West London ICB) • Mental health • Primary care • Hospitals • Prison based healthcare
Substance misuse system	Welfare benefit system	Immigration system
<ul style="list-style-type: none"> • DHSC / OHID • Combating Drugs Partnership. • Public Health • Treatment providers in the community and prison • Drug and Alcohol Wellbeing Service • Insight (young people's drug and alcohol service) 	<ul style="list-style-type: none"> • DWP • Job centre plus • Welfare advice charities 	<ul style="list-style-type: none"> • Home Office • Border force • Immigration advisers • Refugee charities

- 10.3 In this section we set out the most important findings from our exploration of this ecosystem. These are based on the following sources:
- Published reports or other written information
 - Observations by professionals working in the system, reported in the interviews or workshops
 - Observations by people with direct lived experience of the system.
- 10.4 In exploring these findings, we have been looking for repeated patterns of events which suggests that something is more than a random or one-off occurrence. The project group met to reflect on our findings and we have sought to triangulate statements from different places to build our confidence on the salience of each statement. We try to make it clear in the way we set out the statements whether we think there is a pattern of events, or whether an event is exceptional or unusual. For many observations, stakeholders are reporting seeing local manifestations of patterns that are seen across the region or the country, which are part of wider systemic issues, some of which we have explored in the earlier evidence review.
- 10.5 Stepping back to take a broad view of this landscape, we need to acknowledge the context in which we are undertaking this work, in particular the challenges faced by many of the stakeholders that we had to engage, including:
- The overall financial pressures on public services in the UK including those commissioned by local authorities resulting from a decade of austerity and underinvestment.
 - Resulting uncertainty among providers, many of whom have not received contract uplifts in line with inflation.
 - The increasing demand on services, for example levels of rough sleeping and a rising prison population.
 - The impact of the COVID 19 pandemic, which disrupted services and added pressure to health and social care providers.
 - The impact of the reforms such as the splitting up and privatisation of probation followed a few years later by the renationalisation and reunification, which has caused acute staffing issues.
 - The impact of political changes and instability, for example Labour taking control of Westminster Council in the May 2022 local elections, and the impact of the change of PM and subsequent ministerial reshuffles.
 - Inflation and the cost-of-living crisis.
 - Industrial action across the public sector.
- 10.6 While these realities, driven by global, macroeconomic, and national political factors, are beyond the scope of this analysis, they are the forces that move the tectonic plates that continually shape the landscape we are exploring.

11. People facing multiple disadvantage

What do we know about people experiencing multiple disadvantage in contact with the CJS?

- 11.1 The Changing Futures programme builds on two decades of development and learning from previous programmes such as the National Lottery's Fulfilling Lives⁵⁰ programme, Making Every Adult Matter (MEAM)⁵¹ and the Adults Facing Chronic Exclusion pilots. It aims to

⁵⁰ <https://www.fulfillinglivesevaluation.org/>

⁵¹ <http://meam.org.uk/>

improve outcomes for the most excluded adults locally – those experiencing multiple disadvantage including three or more of the following five: homelessness, substance misuse, mental health issues, domestic abuse, and contact with the criminal justice system. This group place a high demand on local response services, but for whom current systems of support are not working.

11.2 While everyone has their own unique story, experience and context, the following experiences have been frequently reported among people who meet the definition above, documented by organisations such as Revolving Doors Agency⁵² and the organisations involved with the Fulfilling Lives programme. In the lived experience workshop for this project many of these factors were mentioned:

- Lack of a positive family connection or support network
- Experiences of adverse childhood experiences (ACEs) including relational trauma
- Childhood poverty extending into chronic adult poverty and unemployment
- Experiences of domestic violence and disruption
- Experiences of exclusion from school / education
- Experiences of the care system
- Lack of trust in services and authority figures
- Difficulty in relationships – ongoing abuse / violence
- Poor mental health often different diagnoses, e.g. psychosis, personality disorder, anxiety and depression
- Use of drugs and/or alcohol – self medication
- Involvement in acquisitive crime to fund drug use – or begging
- Repeat contact with the CJS
- Unrecognised neurodiversity such as autism, or undiagnosed neurological or developmental conditions including acquired brain injury, learning disability and speech and learning challenges.

11.3 Supporting people effectively with these experiences requires an understanding of trauma, a highly empathetic approach and sufficient time to develop a trusting relationship.

How many people in Westminster?

11.4 There is no easy way to discover how many people experiencing multiple disadvantage are in contact with the CJS in Westminster. For this project we have produced an estimate by collating and comparing data from different sources. These include:

- Homelessness applications to the Housing Solutions Service (HSS)
- CHAIN data on people sleeping rough in Westminster
- Probation data from Westminster and Kensington & Chelsea.

11.5 CHAIN is a database used by street outreach teams across London to record information about people they find sleeping rough. It is funded by the GLA, which published regular reports including trends in demographics, needs and other details⁵³.

11.6 As shown in Table 1 and Table 2, HSS data reveals that in 2021-22, 72 individuals who completed a homelessness application had their last settled address recorded as 'departure

⁵² <https://revolving-doors.org.uk/wp-content/uploads/2021/02/The-Knot-The-interconnectedness-of-poverty-trauma-and-multiple-disadvantage-FINAL.pdf>

⁵³ <https://data.london.gov.uk/dataset/chain-reports>

from institution: custody'. This figure rises to 104 when those with a 'support need relating to offending' are included.

Table 1: Homelessness applicants where 'last settled address' is 'departure from institution: custody'

Year	Q1	Q2	Q3	Q4	Total
2022-23	22	18	11	n/a	51 (ytd)
2021-22	18	19	15	20	72

Table 2: Homelessness applicants with a 'support need relating to offending'

Year	Q1	Q2	Q3	Q4	Total
2022-23	28	20	20	n/a	68 (ytd)
2021-22	21	22	25	36	104

- 11.7 These figures are for those who have successfully made an application and completed an assessment with the HSS. Stakeholders have explained how there are significant barriers for many on the first day out of prison, so these figures provide a sense of the minimum number returning to the community from prison and the real figure is likely to be somewhat higher.
- 11.8 From CHAIN we can see what is recorded about different cohorts of people sleeping rough. This suggests that there are relatively few people who come to sleep rough for the first time in Westminster who have come out of prison (just 3% (15 cases) of those seen sleeping rough for the first time in 2021/22 had prison recorded as their 'history prior to rough sleeping', similar to the previous year (2.6%, 11 cases.) However, when we consider everyone found sleeping rough in that year, 401 (35%) had experience in prison recorded as one of their support needs relating to institutional history. By comparison, 4% had experience of the armed forces, and 13% of care.
- 11.9 CHAIN also reveals the extent to which multiple disadvantage is found among this population, with 34% having at least three or more of the indicators of multiple disadvantage (homelessness is one of them - all have been seen sleeping rough.)

Table 3: CHAIN Westminster report 2021/22

Support needs	No.	%*
Alcohol only	63	6%
Drugs only	49	4%
Mental health only	213	19%
Alcohol and drugs	33	3%
Alcohol and mental health	86	8%
Drugs and mental health	163	14%

Alcohol, drugs and mental health	139	12%
All three no	352	31%
All three no, not known or not assessed	45	4%
All three not known or not assessed	555	
Total (excl. not assessed)	1143	100%
Total (incl. not assessed)	1698	

***Note: total excluding not known or assessed is used as base for percentages**

11.10 From these figures we might hypothesize there is a small flow of new people into rough sleeping in Westminster from prison, and the greatest number coming out of prison into the borough are those facing multiple disadvantage that were already in the borough.

Reaching an estimate

11.11 The most comprehensive mapping across England to date (see 7.1) suggests that 1.5 people per thousand are expected to experience three of the indicators of multiple disadvantage at any one time, including offending. If Westminster was typical, we would therefore expect that 379 people would meet these criteria. However, given that the borough has the largest number of people sleeping rough, with significant numbers of people who have moved off the streets and are living in hostels and supported housing in the borough, the actual number is likely to be somewhat higher.

11.12 From CHAIN we saw how 388 people a year who meet the criteria for multiple disadvantage were seen sleeping rough and a third of all rough sleepers had had experience of prison at some point. Finally, figures we received from the HSS show around 100 people a year are leaving prison or have support needs around offending.

11.13 Taking all of these into account, a reasonable estimate of the number of people in Westminster who experience multiple disadvantage and contact with the CJS is in the region of 400 to 500 people, with at least a quarter of these returning to Westminster from prison each year, i.e. 100 to 125.

What is the impact?

11.14 The following points are from the *Safer Westminster Partnership Strategic Assessment* January 2022:

- While the number of resident offenders is declining in Westminster, those that remain are responsible for a considerable proportion of crime and have the highest re-offending rate across London, which has been slowly increasing over the last 5 years.
- Individuals dependant on opioids and/or crack cocaine are responsible for an estimated 45% of acquisitive crime. In the last year in Westminster that would equate to 10,772 recorded crimes at the cost of £36 million.
- Using the Home Office study on the economic and social cost of crime, with unit costs uplifted using a Gross Domestic Product deflator showed, the impact of crime in Westminster from October 2020 to September 2021 cost £225 million.

11.15 In addition, the Office for National Statistics reveals that there were 10 deaths related to drug misuse in Westminster in 2020 and 11 in 2021⁵⁴.

12. Experiences of prison

In prison

- 12.1 In the workshops we heard that people in prison should get support 12 weeks prior to their release to arrange housing and that a resettlement plan should be put in place. This is the expectation in the HMPPS document *Resettlement and Pre-Release Planning Guidance*⁵⁵. Stakeholders reported that in their experience this often does not happen, and even when it does, the housing element of the plan merely states that the individual should go to the council's homelessness service and make an application.
- 12.2 We heard that remand prisoners do not even receive this service, although HMPSS guidance says that unconvicted people should receive the same resettlement service. In addition, their release date is uncertain and so planning is made more difficult. The number of people in prison on remand and awaiting trial has grown and some remand prisoners end up inside for months, which can put their accommodation at risk, especially with no support to resolve this.
- 12.3 We also heard that prisoners can sometimes be reluctant to admit to prison or probation officers that they are homeless, believing this may slow their release. Furthermore, on leaving prisons we heard about cases where people had been urged by prison or probation staff to provide any address even if they couldn't really stay there, the implication being that this improved the statistics on the number being released homeless. While these points are difficult to verify, if true they indicate that the actual level of homelessness among prisoners may be even higher than current Ministry of Justice estimates suggest.
- 12.4 Stakeholders told us that there are also challenges with substance misuse services within prisons. Problems included a lack of join up with services in the community, making continuity of treatment difficult. Within the time for this project we were not able to engage with any of the providers of prison-based substance misuse services, but this is an area where further work could be fruitful, to improve continuity of treatment and support.

Leaving prison

- 12.5 In both the stakeholder and the lived experience workshops we repeatedly heard that people leaving prison face an almost insurmountable set of challenges that prevents them from accessing the basic things they need in the first day or two following release.
- 12.6 We are very confident that the cases we heard about were not one-off exceptions in a system that is working for most people. On the contrary, it is evident that there is no organised effort to try to make leaving prison the start of a positive experience towards stability and recovery and therefore people in this situation return to the community facing a confusing array of services and expectations each of which makes demands on them that they cannot meet and none of which are coordinated with the others.
- 12.7 As well as the requirement to report to probation, men and women experiencing multiple disadvantage face other significant challenges. Again, despite the existence of resettlement

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<https://www.ons.gov.uk/peoplepopulationandcommunity/birthsdeathsandmarriages/deaths/datasets/drugmisedeathsbylocalauthority>

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https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1110407/resettlement-and-pre-release-planning-guidance.pdf

and housing teams in prison, we were told that is virtually impossible for there to be accommodation arranged for the person to go to if they are homeless on release. They are usually instructed to “go to the housing” which in effect means approaching the local authority and making a statutory homelessness application. While we did hear of a case where the HSS was able to place someone into the Rough Sleeping Pathway (see 14.19) this was not felt to be typical.

- 12.8 Given this, people experiencing multiple disadvantage face a confusing, worrying and frustrating experience. They find themselves facing a myriad of services, each with their own criteria, referral processes and restrictions and each requiring them to “jump through hoops” before they can get the help they need. For many, the prospect of not being able to fulfil all these requirements can result in the person failing to comply with the terms of their licence and they can face recall to prison. We heard of cases where this had interrupted and frustrated efforts to get on a path to recovery.

13. Contributing challenges

Crisis in the criminal justice system

- 13.1 The probation service is under severe pressure due to staff shortages, making collaboration difficult. The challenges the service faces in London were described in a recent report by HM Inspectorate of Probation, which rated it as inadequate across all criteria⁵⁶. This situation was confirmed by stakeholders: we heard how the service is really struggling, with phone calls often going unanswered and people not being allocated a named probation worker. Our own experience tallies with this: despite numerous attempts and chasing we were only able to get one meeting with probation during this project. Actions agreed at that meeting were not followed up despite further chasing.
- 13.2 Prisons are also under pressure and teams in prisons such as housing, health and substance misuse have large caseloads and don’t communicate well between themselves and with agencies in the community.
- 13.3 The number of prisoners on remand is growing and these prisoners can’t access some of the help that is available to other prisoners and the uncertainty over their release date makes planning impossible. We heard about a case of a woman in prison who was on remand and who was therefore not referred to the housing team.
- 13.4 There are a number of prisons that release prisoners to Westminster including Wandsworth, Brixton, Thameside, Pentonville, Wormwood Scrubs, Bronzefield. Like the whole prison system, these prisons are under severe pressure. In addition, in November the Ministry of Justice activated Operation Safeguard, a scheme to use police cells to ease overcrowding in prisons⁵⁷. We also heard that due to gang tensions and other issues within many London prisons, prisoners are locked up in their cells for the majority of the day.
- 13.5 Through the project we also found it difficult to engage with the housing teams in prison. We heard that high levels of sickness made it difficult for people to get involved. We do not know if this was a short term or more endemic issue.
- 13.6 Our conclusion from this is that whatever solution is developed responding to the target group, it will have to be done without collaboration from the probation service, at least in the

⁵⁶ <https://www.justiceinspectorates.gov.uk/hmiprobation/media/press-releases/2022/10/london-trio-inadequate/>

⁵⁷ <https://www.theguardian.com/society/2022/nov/30/uk-government-requests-urgent-police-cells-male-prisoners>

short term. However, building stronger collaborative approaches with prison and probation services should be part of the longer-term strategy.

System issues impacting experience

Reporting to probation

- 13.7 Most people leaving prison are required to report to the probation office on the first day of release. For people coming back to Westminster the relevant probation office is located at Askew Road, Shepherd's Bush, in Hammersmith and Fulham, some five miles from The Passage, in Victoria, where the relevant Housing Solutions Service (HSS) is located.
- 13.8 At the lived experience workshop the participants all told us how they had left prison with instructions to report to a probation office in a different area, with no ticket, no map, no phone and no idea how to get there. If they did manage to get there - inevitably late - they were then "told off" by the probation officer even though it had been impossible for them to be on time. They said that this got the relationship with probation off to a very negative start.

This story was repeated by stakeholders in Westminster including the police officers working in the IOM team who sometimes meet the people they were working with at the prison gate and try to help them on their first day out. Despite their support, they said, getting everything done on the first day is extremely difficult.

Case study

At one of the workshops a police officer explained how a man who was released from prison homeless and with just a bin bag with a few possessions had no idea where to go. The weather was cold and wet and he didn't have adequate clothing.

He immediately went to a nearby shop, smashed the window, and waited for the police to arrive so he could be arrested and taken back into the warm.

Housing and homelessness

- 13.9 We heard that it was difficult if not impossible to reserve a room in a hostel or other temporary accommodation for people coming out of prison ahead of their release. Therefore, the HSS service and other pathway managers or outreach teams have to rely on what they can secure once the person approaches them on the day of release.
- 13.10 Also, theoretically, a homelessness application could be made while the person is in prison 56 days prior to their release so that efforts could start to relieve their homelessness started by the HSS team. However, they face the same challenge of not being able to reserve accommodation prior to the day of release.
- 13.11 We heard from some stakeholders that the lack of appropriate identification documents can slow down the processing of a homelessness application and they reported that the HSS team would not accept the prison discharge papers as valid ID.

Substance misuse

- 13.12 People who have an opiate addiction are usually provided with a prescription (known as a "script") of methadone on release from prison, but they will need to go to see a doctor or a drug service to get their next script. This will be a high priority for their first day out of prison.

- 13.13 In our lived experience workshop, we heard how the participants felt that it was critical to get this right in the first 24 to 48 hours following release. One participant explained how he had been released from a prison sentence “in a bit of a rush” and was given the wrong methadone script, leaving him experiencing symptoms of withdrawal within hours of stepping out of the gate.
- 13.14 We heard also that the risk of overdose in the period immediately leaving prison is very high. People who have been on methadone in prison are likely to turn to street drugs if they are not able to get a prescription in the community within the first day out.
- 13.15 Dame Carol Black’s Review of Drugs highlighted the challenges for those who have spent time in custody, noting the significant problems with the transition to community treatment on release.

Mental/physical health

- 13.16 For some people leaving prison, rapid access to other medication or healthcare will be critical. We heard that a change in the way that people are registered for primary care while in prison can make it more difficult when they come out. In Westminster there are a number of specialist health services, including primary care, aimed at homeless people, including Great Chapel Street and Dr Hickey’s surgeries. Furthermore, health resources have been brought into some of the other services, such as hostels, to improve access to appropriate treatment. Alongside these services, Groundswell provide Peer Health Advocates who can accompany people to appointments, helping people overcome some of the barriers to healthcare experienced by this group.
- 13.17 People experiencing multiple disadvantage are often dealing with the impact of complex trauma and other mental health problems. A fully integrated support package should be trauma informed and people should be able to access to appropriate talking therapy to support their recovery.
- 13.18 We also heard that some people may have experienced a brain injury or have some other neurological or communication need, which are often unrecognised but which can lead to people not receiving the services they need.

Case study

We heard from a GP of a recent case where someone came to his surgery on the day that he was released from prison and had four appointments for different and essential services all scheduled for the same time. He was well aware that the the fact that he had come to see his doctor for medication meant that he would undoubtedly miss his probation meeting and would be liable to recall to prison.

Strategic and operational coordination

- 13.19 Through our exploration of the ecosystem we found lots of different services but very little by way of coordination. There may be an assumption that people in this situation are being assisted by the probation service, but the reality that we found is that the immediate expectations of the probation service hinder rather than help efforts to secure accommodation and to address other urgent needs.
- 13.20 As far as we could tell, no one is taking overall responsibility for ensuring that people get the package of practical and emotional support they need.

- 13.21 Part of the challenge is that systems operate on different geographic footprints. For example, the local probation unit covers Westminster, K&C and Hammersmith & Fulham. Public health is bi-borough: Westminster and K&C. The relevant NHS Integrated Care Board (ICB) (NW London) covers eight boroughs. Some services are commissioned by MOPAC, which covers the whole of London. IOM covers three boroughs. And we heard that the forthcoming CAS3 accommodation has been commissioned on housing subregions, even though for Westminster this means that it does not align with the probation business unit footprint.
- 13.22 Given that accommodation is among the most pressing needs, we think that the right place to put together the solutions for people leaving prison is at the local borough level. The Changing Futures programme provides a good opportunity and mandate for changing things at the borough level too.

Data and information sharing

- 13.23 There are enormous challenges in getting an overview of what is happening to people as they move into and out of the criminal justice system and the other services they come into contact with in the community as information about these interactions are recorded on a myriad of different information systems, including:
- HSS – HOPE
 - Probation – OASys – Generates the Offender Group Reconviction Scale (OGRS)
 - Prison – nDelius
 - Homelessness services – mostly in-house CRMs often using Homeless Link’s Inform
 - Rough sleeping – outreach use CHAIN
 - Health – patient data system / carenotes
 - Substance misuse
 - Police
 - ASB E-CINS database (Council)
- 13.24 Furthermore, every service records information from its own subsystem perspective. For example, probation and IOM assess and record people’s “criminogenic needs” applying assessments based on criminological theories of reoffending. The HSS is required to assess whether people meet the criteria set out in the Housing Act which sets out their responsibilities to assess applications. Substance use services apply national frameworks in their assessment and recording. Homelessness services assess people’s needs in relation to housing.
- 13.25 There are two significant consequences of this. One is that people approaching these services are expected to repeat their story to a myriad of professionals over and over again, often having to describe distressing events or reveal intimate personal information. Some stakeholders suggested that this re-traumatizes people and puts off some people from seeking help. Some services have committed to try to undertake assessments in a trauma-informed way, or by focusing on people’s strengths as a starting point, but we are far from confident that this is happening in most relevant services.
- 13.26 The second consequence is that once the information is recorded by each service it is difficult to share this information in any systematic way across different systems. There have been attempts in Westminster to improve this on a small scale – for example in the rough sleeping sector, the Shared Westminster Search project is seeking to allow workers at CSTM and the Passage to see and share information from their in-house CRM systems with CHAIN which is used by the street-based outreach teams. However, this and other projects to share or integrate information systems are complex and slow as the parties seek to overcome multiple

challenges such as data protection policies, consent issues and security concerns, notwithstanding the potentially significant costs of the technological requirements of data integration.

High risk individuals

- 13.27 We heard from stakeholders that some high-risk individuals are among the hardest to help. This potentially results in perpetrators of sexual assault or domestic abuse remaining homeless with subsequent problems of engaging them in treatment or recovery support.
- 13.28 Some people who have a history of sleeping rough have been excluded from accommodation in the rough sleeping pathway due to previous behaviour such as aggression or violence. The council has used reciprocal arrangements with other local authorities to try to place people into appropriate accommodation in other areas, but we heard of one case where this had been denied and the person ended up sleeping rough.

14. Local assets, strengths, and opportunities

- 14.1 While the challenges are significant, Westminster does have significant assets, strengths and opportunities that could be built on to bring about change. These include:
- The Changing Futures programme, which brings senior stakeholders together across every part of the system, creating a potential critical mass of the willing.
 - The new administration's Fairer Westminster Commission creates an opportunity to get local political support for efforts to tackle multiple disadvantage.
 - There are potential new resources that may soon be available to Westminster including new accommodation being commissioned by the Ministry of Justice for ex-offenders (CAS3) and new funding for housing support for people with substance use needs from the OHID. We are waiting to hear the details of both programmes.

Strategic and multi-agency working

- 14.2 As well as these opportunities, there are strengths within the existing system. For example, Westminster has a number of established multiagency arrangements at strategic and operational levels, bringing together people together within the area. These include:
- The Health and Wellbeing Board (bi-borough)
 - Adult and Children Safeguarding boards
 - Reducing adult reoffending board
 - Westminster Homelessness Partnership
 - Enhanced vulnerability forum
 - Safer Westminster Partnership (our community safety partnership)
 - Combatting Drugs Partnership
 - Strategic West End Crime Reduction Group, chaired by the CEO of the Safer Business Network.
- 14.3 There are good partnerships between different providers – for example, there are medical beds with NHS nursing staff located within hostels, psychologists from SLAM working in the rough sleeping housing pathway and meetings such the fortnightly Westminster Homeless Health Partnerships Catch Up, which brings clinicians working across the specialist services together with other homelessness service providers.

Commissioned services and pathways

Integrated Offender Management (IOM)

14.4 The Safer Westminster Partnership Strategic Assessment 2022 described IOM as: “a multi-agency partnership approach that brings together key partners to supervise, manage and positively impact on the criminal activity of offenders within the community. The most persistent and problematic offenders are identified and managed jointly by partner agencies, in particular the police and probation. A new pan-London IOM framework was launched on 11th January 2021. The aims of the new framework are to reduce the disproportionately high level of reoffending committed by the most persistent offenders; promote a consistent focus across London on persistent, violent offenders; maintain a focus on priority acquisitive offences; and to be able to demonstrate the impact and effectiveness of this work and generate an evidence base for what works in this area. The key change is there is now a focus on persistent violent offenders, but the model allows local discretion by each IOM panel. The shift in focus on more violent offenders has resulted in a decrease in the cohort size in Westminster. As of the end of September 2021 Westminster were working with 71 offenders. Over the last year they had a re-offending rate of 18%.”

Starting Over - Turning Point

- 14.5 To supplement the IOM team, the MOPAC Crime Prevention Fund has been used since 2013 to commission the Starting Over project through the Drug and Alcohol Wellbeing Service (DAWS). Starting Over is a reducing re-offending service that operates across Westminster, Kensington & Chelsea and Hammersmith & Fulham, working in partnership with the IOM Teams and Probation Service.
- 14.6 Starting Over originally provided a period of intense assessment and support to these most complex adult, male IOM Offenders in order to stabilise them in preparation for access to mainstream or voluntary sector housing pathways which to date have been beyond their reach. Female offenders are supported by Advance Minerva (see 14.20).
- 14.7 Following a change in priorities for IOM which moved their target cohort away from repeated acquisitive crime towards more serious violent crime, the criteria for the Starting Over service was updated and referrals can now be made by other agencies for people who meet the criteria but not involved with IOM.
- 14.8 The support provided by Starting Over includes:
- Agreeing a plan with each clients to address issues that puts them at risk of reoffending
 - Building a therapeutic alliance with the clients
 - Referring clients to appropriate support agencies
 - Attending appointments with clients
 - Meeting clients in prison prior to release
 - Meeting clients at the gate on release from prison.
- 14.9 Housing and substance misuse are the most pressing needs that the service’s clients face.
- 14.10 We heard that Starting Over have several service users who are “revolving door” service users who despite their assertive and repeated work across multiple episodes are consistently too chaotic to engage successfully in meaningful reducing reoffending work. Typically, these service users are homeless and find it hard to engage beyond the day of release from prison.

Starting Over – David’s story

David* is in his forties with an offending history of almost twenty years, mainly burglary and shoplifting. He had been homeless for seven years and a heroin and crack cocaine user for the past twenty years, which he often funded by shoplifting in Westminster. He had been referred to Starting Over several times but he’d found it difficult to engage as he kept getting recalled back to custody shortly after release for either not attending probation or committing a further offence.

Eventually David was referred to the service a few months prior to release, which gave us time to start to build a rapport with him. We contacted his substance worker in prison and arranged to meet him at the gate on the day of release. That first day is so critical. We were able to take him to his probation appointment that morning, which was the first time he had actually made it to an appointment with them in five years.

Spending this first day together meant we could build on the relationship we had started while he was in prison. David’s most pressing needs were for housing and his substance misuse. We accompanied him to make a homelessness application at the Housing Solutions Service, where he was assessed and offered temporary accommodation in a semi-supported hostel. Eventually he was offered his own tenancy. For the first time he was showing real motivation towards change, engaging with both Starting Over and other agencies. We provided him with a mobile phone so he could keep in contact with us and with the other services he needed.

With our support, David continued to maintain his accommodation, breaking the seven-year cycle of being in and out of homelessness hostels, on the street and in prison. He also engaged with substance use services and has been able to maintain abstinence from drugs. From the start of this episode of engagement with both Starting Over and the IOM scheme there had been no reports of further offending.

David has been discharged from Starting Over successfully but he continues to engage with other services, attends therapy appointment to support with his mental health and engages in a peer mentor program connected to DAWS.

**Not his real name*

The Drug & Alcohol Wellbeing Service

The Drug & Alcohol Wellbeing Service (DAWS) is a partnership between Turning Point, Build on Belief, London Friend and Advance.n DAWS’s new Community Engagement Team brings together its outreach, brief interventions and assessments as well as its Get Connected team under a new Partnership Manager. The Core Treatment Team includes specialist LGBTQ+, VAWG, Women’s, and D&I roles, Opiate and Non-Opiate Teams. DAWS works with other agencies to develop integrated pathways improving access for service users.

Changing Futures specialist service

- 14.11 Changing Futures Specialist service works with people aged 18 – 25 and is currently funded to run until March 2024. The team is trauma informed and has small caseloads, so they have got the time to work intensively with the young people. We heard, for example, of how the support workers were able to stay with a young person for five hours when they were experiencing suicidal ideation, perhaps preventing hospitalisation or worse. The support workers’ paygrades reflect the expected level of skill and knowledge in working with attachment trauma.
- 14.12 Where this team can identify and engage with young people who are at risk of experiencing multiple disadvantage in adulthood, there is a chance of diverting away from a path that leads

to years of crisis and crime, with all the harm to themselves and to society that might result. We heard that access to housing is a major challenge, particularly due to the restrictions on benefits for people under 35 and the shortage of private rented sector accommodation.

Rough sleeping and homelessness sector

- 14.13 Westminster has always been the borough in England with the largest number of people sleeping rough, currently around 250 people each night. More than half are non-UK citizens from Eastern Europe and there is a significant group of Roma people from Romania.
- 14.14 Over the years, organisations and the council have developed services and pathways to respond to these needs, and there are well established organisations working to tackle the problem. These include charities that are solely based in the borough, such as The Passage and CSTM, and others that are larger regional or national organisations that run services that have been commissioned by Westminster City Council (WCC), such as St Mungo's, Lookahead and SHP.
- 14.15 WCC has a Rough Sleeping Team based within the housing directorate that commissions and coordinates services. The relevant services include:
- Street outreach (SOS, Compass team, SET)
 - Assessment centres – such as Harrow Road
 - Emergency accommodation, including hotels
 - Hostels and supported housing
 - Housing First
 - Specialist provision for women
 - Specialist medical practices including Great Chapel Street
 - Specialist mental health services, including the JHT and the Psychology in Hostels project
 - Employment and training
 - Migrant services including advice and reconnection.
- 14.16 The service providers and the council have established the Westminster Homelessness Partnership (WHP), which aims to enhance collaborative working to end rough sleeping. The WHP brings people together at strategic, operational and frontline levels to promote joint working and to identify and resolve issues.

Housing Solutions Service

- 14.17 Local authorities have statutory responsibilities to respond to people who are homeless or threatened with homelessness. Since 2001 the statutory homelessness service in Westminster – known as the Housing Solutions Service (HSS) – has been outsourced to RMG, which is part of the Places for People group. The service was redesigned in 2017 to respond to the requirements of the Homelessness Reduction Act and now the service is delivered through a partnership with homelessness charities Shelter, which provides prevention advice to families, and The Passage, which provides the prevention and relief service to single homeless people.
- 14.18 HSS aims to provide “one front door” for people who need help, with a phone number, an online enquiry form – and directions for single people to The Passage. The HSS employs a specialist worker for people leaving prison, who has strong links to probation, including being based in probation’s office one day a week. She takes referrals from probation and prisons for people who are leaving prison homeless.

14.19 People who meet the criteria and who require immediate accommodation are placed into temporary accommodation in several different pathways depending on the level of needs. These include:

- Riverside – who offer different pathways including a transitional unit, semi-independent accommodation and high support needs
- An accommodation pathway for ex-offenders scheme with a route into the private rented sector along with a navigator who helps match clients to properties via the Westlets PRS scheme
- Rough sleeping pathway – If the HSS identifies that the person has a history of rough sleeping they make a referral to the WCC Rough Sleeping pathways manager.

Case study - HSS specialist criminal justice worker

Jim* was recently seen by the HSS specialist criminal justice worker at the HSS service. While he was in prison, both the prison and probation service got in touch about him through their Duty to Refer under the Homelessness Reduction Act 2017. This was on the Wednesday, and he was due to be released on Friday.

When we received the Prison Release Referral Form it was clear that Jim had an extensive history of rough sleeping in Westminster. I got in touch with the colleague in the rough sleeping team who oversees access to the rough sleeping pathway. From the form I could see that the client used to be at the St Mungo's Assessment Centre.

I discussed the case and we agreed that it would be appropriate for him to go back there, and a referral was made. Fortunately, on this occasion there was an immediate vacancy and Jim was able to move in straight away on his first day out of prison.

*Not his real name

The Advance Minerva WrapAround service

14.20 Advance Minerva is a service for women who experience multiple disadvantage and who are at risk of reoffending, a partnership with London's Mayor and the Mayor's Office for Policing & Crime (MOPAC)⁵⁸. The service is described as a "whole system" response and operates across 24 London boroughs including Westminster. It offers "enhanced wrap around, holistic support" to women and girls, aged 15 and above, with multiple and complex needs who have committed crime and those at risk of re-offending. Referrals come from the probation service, local authorities, health providers, voluntary sector agencies and self-referrals. The offer includes "one-to-one keywork sessions and group work as well as support on a range of issues such as benefits and debt advice, housing, substance misuse and emotional wellbeing, along with signposting to other community services. The service also runs a womens centre in Hammersmith with a range of activities and facilities.

14.21 While it aims to offer a strong one to one service, the expected caseloads are high – at 30 clients per keyworker – compared to the recommended levels for working with people experiencing multiple disadvantage. Furthermore, the support is only offered up to 12 months.

⁵⁸ <https://www.advancecharity.org.uk/what-we-do/criminal-justice-services/london-minerva-wraparound-service/>

National policy developments

- 14.22 The Government has launched a 10-year drug strategy 'From harm to hope'⁵⁹ which is underpinned by the findings of the Dame Carol Black review. The government will be investing an additional £900 million of funding over the next three years. With the aim of offering 54,500 more treatment places and preventing 1,000 deaths and close over 2,000 more county lines. In addition to aiming to break drug supply chains and improve treatment and recovery, the government aims to achieve a generational shift in demand for drugs. This will include early intervention with families and schools.
- 14.23 The Strategy has announced that all local authorities will receive enhanced treatment funding and continuation of the public health grant to improve access to treatment for offenders over the next three years.

⁵⁹ <https://www.gov.uk/government/collections/from-harm-to-hope-a-10-year-drugs-plan-to-cut-crime-and-save-lives>

PART 5 – TOWARDS A SHARED VISION FOR THE FUTURE

15. How do we want the system to work?

15.1 In our second workshop, participants used a “postcard from the future” method to develop and share their ideas on what a future would look like where things worked well for people experiencing multiple disadvantage and contact with the criminal justice system in Westminster. We built on this discussion at the lived experience workshop, asking participants what would have made their journeys easier. Bringing these insights together with the findings of the evidence review, we have set out a vision for how things could be improved in Westminster.

Our vision for the future - five years' time

15.2 Our suggested vision statement says:

- We want to improve the system so that in the future, men and women experiencing multiple disadvantage and contact with the criminal justice system in Westminster receive a coordinated, integrated and personalised package of services, including accommodation, support and treatment, so that it is much easier for them to address their immediate needs on leaving prison and then to begin and sustain their longer-term journey towards recovery. Evidence shows that if we can achieve this, people will live longer, healthier and more fulfilling lives, reduce their reoffending, escape homelessness, reduce substance use and avoid expensive repeated use of acute public services.

15.3 We want to test this vision statement with the MDPG to begin to build a shared idea of the change we want to see in Westminster.

Principles

15.4 Stakeholders at the workshops also suggested some principles that should guide how this vision is put into practice. The new approach should:

- Offer real hope and opportunities
- Challenge stigma
- Provide continuity of care, support and treatment
- Be based on relational and trauma-informed support
- Be personalised around each individual's recovery journey, building capabilities from stability to recovery
- Be proactive rather than reactive in engaging people
- Be gender informed, meeting the needs of women who are a minority in the CJS.

The experience we are seeking to create

15.5 The vision we have would transform people's experiences so they feel:

- More supported – like someone cares
- More listened to
- Less overwhelmed and anxious
- Less “appointment fatigue”
- Not re-traumatised
- More trust in services, and therefore more likely to seek help earlier in the future
- More motivated to achieve change

- Excited for the future – with a plan.

Expected outcomes

- 15.6 In the HLS literature Toby Lowe suggests that the underlying purpose of all public services is to “*maximise people’s freedom and flourishing*”. Alongside this top level expression of our purpose, it is also helpful to identify the specific outcomes that we hope to improve through this work. The following list was also generated by the stakeholders at the workshops:
- Increased wellbeing and life satisfaction
 - Increased self-reliance
 - Improved physical and mental health
 - Tenancies sustained
 - More positive relationships
 - Reconnection to family and friends
 - Reduced drug / alcohol use
 - Reduced reoffending
 - Reduced anti-social behaviour
 - Fewer arrests and prison sentences
 - Reduced homelessness and rough sleeping
 - Cost savings to the taxpayer
 - Safer communities.
- 15.7 We note that the HLS approach advocates a focus on learning from outcomes data on rather performance management and we will consider how this can be build in to the experiments during the co-design phase.

16. Potential experiments for Westminster

- 16.1 The Changing Futures programme offers an opportunity to test out some different ways of doing things to see if we can move from the current situation towards the vision we have suggested above.
- 16.2 Our findings highlight the need for shared strategic accountability and responses to multiple disadvantage at local authority level and we hope the evidence in this report will strengthen the work to embed Changing Futures work in Westminster and nationally.
- 16.3 The following assumptions and limitations have guided our recommendations:
- That the challenges that we have described above imply that any solutions we try to create will, in the short-term, must work without the active involvement of the probation service. While we will seek to engage them during the design phase, we will not rely on this.
 - That gaining support from the Westminster City Council leadership and cabinet for our vision will help to secure buy-in across the different parts of the council and this should be on the agenda for the Changing Futures team and MDPG.
 - While influencing national policy was outside the remit of this project, nonetheless the Changing Futures programme in Westminster might endeavour to influence relevant policy and thinking, where the levers of change are at the national levels.
- 16.4 Adopting the approach recommended by the HLS guidance, we are recommending a series of “experiments” at different levels of the system through which proposed changes can be

designed and tested. We recommend that the MDPG agree to a next stage of development in which we would undertake the full design, feasibility and business case development of these experiments. We set out initial ideas for what these experiments might include below.

Experiment 1: A virtual Coordination Team

- 16.5 This experiment would involve creating a 'virtual' team with the purpose of coordinating existing services so they can offer bespoke packages of support for a defined cohort of individuals. We envisage the team being made up of managers from within Westminster City Council and other parts of the system whose existing roles are linked to the different services needed. These managers would commit to working together for a period of around a 18 months and would need support from their senior managers to free up some of their capacity to work in the team. We will consider how many hours a week would need to be committed to the team in the design phase.
- 16.6 The team would work with partners to identify a cohort of people in Westminster who would be offered the more coordinated approach. The cohort could be identified by bringing together information from the different databases used by services including CHAIN, HOPE and the IOM database. Partners agencies could also suggest individuals who should be part of the cohort. We expect that the cohort would initially be around 50 people although this could be expanded later if the approach was found to be effective.
- 16.7 In the design phase we will need to consider how the team can be accountable to and supported by a strategic level body that can engage stakeholders across the different relevant service systems and influence policy and practice across the whole ecosystem. We would also need to consider where they would be located within the departmental structure, given that they would need to be able to work effectively across disciplinary boundaries.
- 16.8 The team should be led by someone with strong competencies in influencing beyond authority. They should have experience of working with senior commissioners and providers to align different services.
- 16.9 We would suggest that one member of the team has a role a bit like an "air traffic controller". They would be responsible for keeping track of which organisation has the primary relationship with each person in the cohort and is therefore taking the lead in supporting that person through their recovery journey. This person would also track changes in each person's situation to gather evidence for the effectiveness of the approach. Others in the team would work more directly with the designated support workers and other services to help them to create a bespoke integrated service offer.
- 16.10 Finally, the team would gather qualitative and quantitative information about what is happening with the individuals in the cohort in order to identify individual or systemic barriers which need to be addressed through engagement with other stakeholders.

Experiment 2: Delivering bespoke, trauma-informed relational support

- 16.11 Our second recommended experiment would involve developing and testing a process that ensures that every person experiencing multiple disadvantage and contact with the criminal justice system is provided with support built around a sustained relationship with a specialist keyworker. There are a number of services in Westminster that work in this way at least to some extent, and some which already have a remit to work with people experiencing multiple disadvantage.
- 16.12 This experiment could be an add-on to experiment 1 and undertaken by the Coordination Team with some additional support. Alternatively, it could be run as a distinct experiment.

- 16.13 We would need to work out the detail of this working with stakeholders during the design phase, but we envisage the main steps including:
- Appointment of a project manager and establishment of a project group / task and finish team (unless this is an add on to experiment 1)
 - Identification of potential provider organisations / services that are already offering part or all the proposed support model and that are interested in being partners in the experiment
 - Identification of a cohort of people
 - Assessment of extent to which people in the cohort already have a relationship with any of the partner providers
 - Agreement with providers to provide an enhanced service to individuals in the cohort based on the recommended model. We assume that many of the providers would see this as being largely within their existing remit and funding by reorganising caseloads in existing teams, but if a budget was also available then spot purchase of additional capacity or enhancement of the service offer could be considered.
 - Matching of cohort to providers. Engagement by providers.
 - Tracking of levels of engagement and outcomes
- 16.14 Based on the evidence review and discussion with stakeholders during this project, the essential features of this support would include:
- A keyworker with the skills, knowledge, time and support to build a relationship with the person before, during and after their time in prison
 - An approach that is strengths-based and trauma informed
 - A co-production ethos, so the person feels empowered and involved in the work
 - Coordinates a “team around the person” approach – ensuring that information is shared between different systems to reduce need for repeated assessments
 - Low caseloads per worker, to allow for intensive work and regular contact – maximum 6 per case worker.
- 16.15 Existing services including Starting Over, Minerva, The Passage and CSTM offer many of these features and we would want to work with them and other services to determine what additional enhancements would be required to create sufficient capacity for the whole cohort.
- 16.16 As well as providing a core relationship with the client, the support would focus on working alongside individual to support them to access:
- Accommodation appropriate to needs and stages of recovery – Housing First / Supported Housing / Independent
 - Primary health care, mental health support and substance use treatment
 - Connecting the client to meaningful activity, perhaps through peer workers
 - Realistic routes to education, training and employment
 - Peer support and peer mentors.

Experiment 3: Creating a bespoke “one stop shop” experience on the day of release:

- 16.17 A third experiment could also be run as an add on to experiment 1 or as a standalone project. This focuses on creating a bespoke “one stop shop” experience for people on the day of release from prison.

- 16.18 We have seen how people currently face a chaotic situation when leaving prison, where the lack of coordination among services makes it very difficult for people to get their immediate needs met. This experiment will aim to transform the experience on the day of release from prison so it becomes a positive start in their journey towards stability and recovery.
- 16.19 We expect the experiment to include the following steps:
- Appointing a project manager to lead the project (unless this is run as an add-on to experiment 1, in which case the team could share the tasks.)
 - Identifying and engaging senior and frontline managers from the range of services and providers that would need to be involved
 - Running a series of workshops to co-design adaptations to current service arrangements
 - Gaining agreement from different services and their commissioners to provide a more flexible and person-centred approach to the target cohort
 - Drawing up new operating procedures and service level agreements
 - Testing and iterating the new approach, working closely with the services and clients to identify possible improvements and adaptations
 - Gathering evidence to inform rapid learning about how the service is working to feed into long term arrangements at the end of the experiment.
- 16.20 The manager and the partner service providers would work together to create an integrated service that would offer the following package of support to the targeted cohort:
- Introduction to a keyworker who will support the person at least through the first week or two after release
 - A "through the gate" or at least "meet at the gate" service
 - Guaranteed accommodation on day of release – avoiding placing people into hostel settings where they would be alongside active drug users
 - Rapid rehousing pathways into stable longer-term accommodation along with resettlement support
 - Flexibility about the requirement to report to probation of the first day with initial meetings done by phone or video call, or postponed to a few days later once the person has settled into their accommodation and had other needs met
 - Healthcare and treatment for substance use including immediate access to GP / nurse care and medication, particularly ensuring that the person is secure in their treatment journey through immediate access to substitute scripting
 - Specialist mental health support / nurse / counselling service
 - Personal budget for essentials such as clothes and travel
 - Benefits – help to establish benefit claim
 - Family services / mediation – helping people rebuild relationships with family members
 - Clothes, phone, equipment
 - Identification and establishing a bank account.

Experiment 4: Designing fully integrated housing, support and treatment pathways

- 16.21 This experiment takes a more strategic, longer-term approach to meeting the challenges faced by people facing multiple disadvantage and contact with the criminal justice system. It would involve engagement with the range of commissioners of the relevant services within Westminster and then developing a process to explore what would need to be in place in order to create fully integrated housing, support and treatment pathways, building on the

services already operating in Westminster. Through this process it would seek to influence future commissioning strategies, encouraging close collaboration between different commissioning bodies and joint design and commissioning to better meet the needs of this group.

- 16.22 Both the evidence review and our own discussions with stakeholders emphasized how people's needs are interconnected and that they change over time. Therefore, to effectively support recovery over the long term, people need access to a personalised "package" of support, treatment and housing that can be adjusted and developed in collaboration with the individual as their needs change.
- 16.23 For many people with this pattern of needs, one of the most effective long-term solutions is the Housing First model⁶⁰, ideally delivered in a social rented tenancy. However, access to Housing First programmes are limited and some people prefer other forms of supported, semi-supported or independent accommodation. Furthermore, for those at risk of sleeping rough, there will be a need for immediate short-term accommodation while a person's longer-term options are considered.
- 16.24 In Westminster many people facing multiple disadvantage can remain for significant periods in high support environments such as homeless hostels. This experiment would aim to create more personalised and more effective housing, support and treatment pathways that accelerate people's recovery and their capacity to move towards greater independence.
- 16.25 For some people who have substance use needs, a period in a residential detox and rehab will be critical but will need to be followed by access to appropriate accommodation and support. Rapid engagement with meaningful activity can help avoid boredom and a drift back to old negative social circles and patterns of behaviour.
- 16.26 This experiment seeks to engage strategic commissioners in developing an approach to commissioning the housing pathways in Westminster that would ensure that each individual can then take a personal integrated housing, support and treatment pathway towards from stability to recovery and sustainable learning and work opportunities.
- 16.27 As with the others, the detail of the process for this experiment will be developed during the design phase. However, we envisage it to including the following steps:
- Alignment with Westminster's *Changing Futures Programme: Sustainability and System Change Plan* – and in particular the sections on cross partnership strategic development
 - Initial consultation and scoping with commissioners to understand recommissioning strategies and timetables across different service types.
 - Appointment of a senior strategic leader to oversee the project, along with project management
 - Workshops with commissioners to develop the concept and design for Fully Integrated Housing Support and Treatment pathways
 - Development of joint commissioning intentions documents
 - Consideration of innovative commissioning arrangements such as alliances to bring providers and commissioners together
 - Business plan development.

⁶⁰ <https://homeless.org.uk/areas-of-expertise/housing-first/>

17. How to run these experiments

- 17.1 To give the best chance of success we propose that each experiment or set of experiments should proceed through a three-stage process as described below. Suggested timescales are indicative and open to discussion. If extended recruitment, tendering or decision processes are required, these timescales would probably need to be extended.

Stage one: Co-design and feasibility (three months)

- 17.2 This will involve:

- Identification of internal team and/or appointment of consultants
- Convening the relevant stakeholders needed for the experiment
- Clarifying the aims, outcomes and monitoring framework for the specific experiment
- Rapid prototyping of the proposed model, or aspects of it to inform design
- Stress testing and feedback on the model
- Agreeing what resources would be needed to deliver the model
- Agreeing what steps and resources would be needed to put the model in place
- Producing a feasibility analysis and business case.

Stage two: implementation (three months)

- 17.3 This will involve:

- Securing approval to proceed with the experiment
- Producing relevant partnership/service level agreements
- Setting up procedures/systems for monitoring and learning
- Securing/preparing resources such as funding, locations
- Agreeing a launch date
- Promoting the experiment to relevant stakeholders

Stage three: test and adapt (Up to 18 months)

- 17.4 This will involve:

- Delivering the experiment
- Regularly learning and adapting in line with the monitoring framework
- Formally reviewing twelve months learning
- If successful, agree how experiment can be mainstreamed / hardwired into system.

18. Possible “quick wins”

- 18.1 Alongside these experiments, we believe there are some potential “quick wins” that could be pursued without the need for a design and test approach. The project group agreed that these might help on a small scale, but the impact would be very limited compared to the potential of the experiments set out above.

- 18.2 These include:

- Flexibility on the type of identification required by HSS to see if prison release documents could be acceptable

- Negotiating flexibility about the requirement to attend probation on the first day of release
- Creating a Single Point of Contact in the police and / or in probation service to help support services to stay in touch will people who are arrested or in prison
- Engagement with prison-based housing and resettlement teams to explore how to improve communication and joint work
- A focus on improving drug treatment and access to rehab for remand prisoners when they come out of prison.

18.3 These actions could be taken on by the Changing Futures project manager, or delegated to existing partnerships or workstreams and monitored by the MDPG.

19. National recommendations

19.1 We recommend that the findings from this report are shared with the Changing Futures team at DLUHC. We also believe that this project has pointed to some developments in national policy that are worth considering further.

National policy responsibility for prison leavers

19.2 This project has thrown a light on the chaos that people can face in the transition between prison and the community. Based on the evidence base and recommendations from local stakeholders and people with lived experience, we have suggested experiments that might help improve this for people experiencing multiple disadvantage. At a national level more could be done to encourage the development of effective solutions: better coordinated and integrated housing, support and treatment services in the community.

19.3 However, because people have the label of “ex-offender” or “prison leaver”, there is an assumption that policy to address these challenges should sit in the Ministry of Justice and with agencies in the criminal justice system, especially probation. This fails to recognise that the solutions actually lie within the remit of other government departments or within the responsibilities of local authorities. Criminal justice agencies on the ground don’t have the reach or the capacity to build the partnerships or to do the strategic work needed to deliver solutions. Commissioning by criminal justice agencies has attempted to fill these gaps but fails to deliver the strategic systemic change that is needed. Furthermore, because the responsibility for finding solutions is widely seen as the remit of MoJ, local government and other government departments may fail to provide the leadership that is needed from them to bring these effective solutions together.

19.4 A better approach would bring relevant government departments together led by DLUHC but including local authorities, the MoJ, the Department of Health and Social Care and DWP to jointly contribute to an approach led by local authorities and their partners across health and criminal justice.

Developing effective systems learning approaches to address multiple disadvantage

19.5 This project has offered one approach to the challenge of bringing about change in complex systems in order to improve outcomes for people facing multiple disadvantage. The tools to undertake this work are emerging from the Changing Futures programme and predecessor programmes and from the efforts of MEAM, Revolving Doors Agency and others.

19.6 The National Changing Futures team should consider how it can draw learning from these different approaches to produce frameworks and toolkits that can be used by local areas to

create change. These tools could be tested and further honed through projects within and beyond Changing Futures areas.

Prison health registration

- 19.7 We heard that changes in the way that people are registered by health services within prisons is creating problems when they try to register with a GP in the community. Discussions with NHS England, who commission health services in prisons, are needed to better understand this problem and to see if there are alternative ways of registering people while they are in prison.

20. Conclusion - and building momentum for change

- 20.1 Through the Artemis One project we have thrown a light on the experiences of people with multiple disadvantage who are in contact with the criminal justice system. Given the complexity of the ecosystem of services involved, we have applied a methodology recommended by Human Learning Systems, including identified a number of potential experiments that together or alone could lead to system change and improve outcomes for people experiencing multiple disadvantage.
- 20.2 With this report, the first phase of this programme, Diagnostic and recommendations – is complete. However, we recognise the complexity of the ecosystem that we are exploring and therefore the inevitability that we have not been able to consider every relevant factor or ongoing change. It will be important to continue to monitor these going forward and to be open to engaging more stakeholders who we were not able to engage in our exploration. To do this, we recommend that the report is shared widely among stakeholders and feedback is gathered and analysed to feed into subsequent phases. The MDPG strategic group will play an important role in disseminating and commenting on the report.
- 20.3 To undertake the next phases that we have set out above we recommend that the following resources are identified:
- A lead commissioner to act as senior champion
 - Project management
 - Delivery partner / subject expert consultancy.
- 20.4 The endeavour to find effective ways of bringing about lasting and meaningful change within complex systems is increasingly recognised as essential in addressing some of the “wicked problems” societies face. Improving outcomes for people facing multiple disadvantage is one of these challenges and we hope that by sharing our approach and learning in this project we can contribute to the growing body of knowledge that will help accelerate this change going forward. If we are successful, the impact for people who currently face extreme exclusion from society – and for communities more widely – could be considerable.

APPENDIX A

A brief history of the idea of multiple disadvantage

- 20.5 Since the 1990s there has been a growing recognition in the UK that specific patterns of experience have pushed some men and women to live on the margins of our society. For these individuals mainstream service models seem inadequate and the challenges they face exacerbate each other, often putting them in repeated contact with acute public services such as police, A&E, homelessness services and prisons. The label we use for this pattern has changed over time from “multiple and complex needs” to “multiple disadvantage” or “severe multiple disadvantage”.
- 20.6 This pattern has been described in research (e.g. *Clients with Complex Needs* by Jan Keene (2001), policy documents (e.g. *Reaching Out – An action plan on social exclusion* (2006), and led to the establishment of organisations (e.g. the Revolving Doors Agency in 1993) and the development of programmes (e.g. Adults Facing Chronic Exclusion programme (2007 – 2010) MEAM (2009 onwards) and the Fulfilling Lives Programme (2012 to 2022). Learning from these programmes and pressure from organisations like Revolving Doors, MEAM and others led to the government creating the national Changing Futures programme which was launched in December 2020.

Learning and working within complex systems

- 20.7 Alongside these developments there has been a growing movement of academics, commissioners and others who have adopted a critique of the existing paradigm of commissioning of public services – New Public Management (NPM). They argue that “outcome commissioning” is futile when human outcomes emerge from complex systems.
- 20.8 Fundamental to this approach is the recognition that human lives are unique, relational and complex. Furthermore, the context within we live is also complex and dynamic and can be considered at a myriad of levels, from the psycho-socio-biological to the family, community, place, national or global. Human Learning Systems⁶¹ is an approach to engaging with complexity in public services and has inform our approach in this project.

21. The Changing Futures programme

- 21.1 The Gov.uk website says: “Changing Futures is a three-year, £64 million programme aiming to improve outcomes for adults experiencing multiple disadvantage – including combinations of homelessness, substance misuse, mental health issues, domestic abuse and contact with the criminal justice system. The programme is funded through £46m from the government’s Shared Outcomes Fund with almost £18 million in aligned funding from The National Lottery Community Fund. Working with 15 local partnerships across England, Changing Futures is testing new ways of bringing together public and community sector partners to help people change their lives for the better.”
- 21.2 The programme was announced in 2020, began work in local areas in July 2021 and will continue until the end of March 2024. It aims to deliver improvements at the individual, service and system level:
- to stabilise and then improve the life situation of adults who face multiple disadvantage
 - to transform local services to provide a person-centred approach and to reduce crisis demand

⁶¹ <https://www.humanlearning.systems/>

- to test a different approach to funding, accountability and engagement between local commissioners and services, and between central government and local areas.

21.3 The programme will be accompanied by a robust evaluation, building the evidence base to underpin future work to support people facing multiple disadvantage. The programme is being delivered by DLUHC on behalf of government, working alongside all relevant departments and the National Lottery Community Fund.”⁶²

Westminster Changing Futures Programme

21.4 From a City of Westminster (WCC) committee report: “In July 2021, Westminster was awarded three years funding of £3.28m to deliver the Changing Futures Programme. Westminster’s bid centred on a programme of work that achieves a more joined-up, person-centred approach to local delivery, commitment to making long-term and sustainable change that delivers improved outcomes for individuals experiencing multiple disadvantage – improving both outcomes and value for money, by addressing issues early and in a joined-up way.

21.5 The delivery of Changing Futures will put in place a significant programme of operational activities designed to help improve the lives of people in the city who experience severe and multiple disadvantage. Further development of this work is expected to realise the significant benefits of improving the lives of vulnerable people and the avoidance of serious negative outcomes, e.g., in relation to health, homelessness, offending, etc, as well as helping to manage demand for reactive interventions, e.g., emergency homelessness responses, hospital attendances, etc. and reduce the overall associated costs across the public sector.

21.6 Changing Futures funding will enable capacity for WCC to work in partnership with statutory and voluntary services at both strategic and operational levels to redesign the system, taking a whole-person, whole-systems approach that will improve outcomes at an individual, service and system level.

21.7 Westminster will deliver several pilots with each activity setting out how it contributes to the overall programme objectives. Through our work we will support our ambitious systems change plans by setting up the infrastructure that will lead to sustainable change in the way our system operates for people experiencing multiple disadvantage.”⁶³

21.8 A key element of this work is the Changing Futures (WCC-CF) Multiple Disadvantage Partnership Group (MDPG) (formerly Multiple Disadvantage System Change (MDSC)) Strategic Group. The group’s mission is:

Seeing the whole person [not just single issues], and the whole picture [not just a single service’s view]; looking at the whole interconnected web of services, support, and need, to identify the opportunities to better meet the needs of people experiencing Multiple Disadvantage (MD) and improving their quality of life.

⁶² <https://www.gov.uk/government/collections/changing-futures>

⁶³ <https://committees.westminster.gov.uk/documents/s46403/CF%20Update%20-%20PS%20Committee%209%20March%202022%20Final.pdf>

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