

Feedback on the Housing and Mental Health Agreement 2022 Frameworks

Homelessness NSW is a not-for-profit organisation that operates as a peak agency for its member organisations to end homelessness across NSW. We exist to build the capability of people and the capacity of systems to end homelessness. We have a vision for a future where there is enough quality and safe housing and support services to ensure no one is homeless in NSW. Our 190 members include specialist homelessness services, allied organisations and services working to end homelessness. We work with our members, people with lived experience and broad network of partners to understand drivers of homelessness, advocate for solutions, build skills and knowledge, and scale innovation.

Every night in NSW, tens of thousands of people go to sleep without a safe place to call home. Having a mental health condition significantly increases a person's risk of experiencing or being entrenched in ongoing homelessness. The intersections between mental health and homelessness are well documented. Homelessness NSW welcomes the efforts for improved coordination and a broader systems approach applied through the HMHA.

In January 2023 Homelessness NSW coordinated a HMHA consultation with specialist homelessness services. Over 95 people attended. This summary draws out the key themes from this consultation and is also informed by broader work with people with lived experience, sector representatives, allied services and member organisations.

Homelessness NSW supports the intent of HMHA 2022 to increase coordination, governance and accountability for outcomes across housing, homelessness and mental health. This submission highlights areas that could be further developed to support these aims, and also raises sector issues relating to the practical implementation of the frameworks, under four themes:

1. Effective governance at local, regional, and state levels
2. Key policy gaps
3. Service delivery challenges
4. Other key issues for Specialist Homelessness Services

Relevant HMHA consultation questions are referenced in each part of the response.

1. Effective governance at local, regional, and state levels

The below feedback relates to question five in the consultation questions: *Do you have any feedback about the District Implementation Planning process or requirements?*

Local services often function well together at a local level but need regional oversight of the totality of the local work and connection to other local services. This should be considered in the District Implementation Planning process. Understanding the challenges as they relate to operational and systemic barriers is critical to understanding the priority areas of focus for the steering committee.

It is unclear from the Framework where the accountability for implementation will sit and how the various stakeholders will be held accountable for engaging fully at all levels. Mobilising local providers and agencies to implement the HMHA will be key to achieving the desired outcomes for the community.

Homelessness NSW recommends a localised learning approach to support the delivery and success of the Agreement. This could involve local learning labs where key information on current barriers or what is working well is discussed to support the establishment of local implementation groups.

Specific recommendations from the sector include:

Clarity of communication channels

Include clear communication channels to direct stakeholders to the best points of contact when they need clarification or to escalate a local issue with broader impact. For example, there could be a template for local communication which specifies who is represented and who needs to be communicated with when changes occur.

Support existing networks

Reinforce existing opportunities for shared knowledge locally. Through the localised governance groups identify key sector forums for homelessness and health services to work together. In the case of District Homelessness Implementation Groups, there is varying levels of engagement from health services reported. There is opportunity to link these local forums to support more formal coordination groups.

Scaling innovation

The governance framework should support and champion the sharing of innovation within local areas and include a mechanism to share what works for potential implementation at scale.

2. Key policy gaps

The below feedback relates to question twelve in the consultation questions: *Are there any other key stakeholders, policies, programs or other interrelationships you think should be highlighted in the document using any of these features?*

The challenges for services and people experiencing homelessness and mental health issues exist across many service systems and require an inter-sectoral approach to the coordination of effective support. Homelessness NSW strongly advocates for a systems change approach to ending homelessness which includes shared accountability and KPIs across government departments including; health services, alcohol and drug services, corrective services and homelessness services through a whole of government approach. While the HMHA advocates for a policy of 'no exits from government institutions into homelessness', in reality, this remains a critical challenge for Specialist Homelessness Services and their clients.

Services report large cohorts of people entering the prison system with mental health conditions and being released into homelessness, as well as significant numbers of clients entering and exiting mental health services into homelessness.

In some regional and remote areas, services report that it is almost impossible with current resourcing to be able to prevent exits into homelessness. The Specialist Homelessness Sector needs additional resourcing to manage the complexity of this cohort of clients and to be able to provide the level of support described in the HMHA.

3. Service delivery challenges

The below feedback relates to question fourteen in the consultation questions: *Do you have any other comments you would like to make about the HMHA 22 Service Delivery Framework?*

Homelessness NSW received detailed feedback from services about the challenges they will experience in delivering services according to HMHA frameworks within existing program and service funding. Some key challenges for service delivery include:

- The lack of availability of mental health services in some regional and remote areas, which will preclude services from meeting the requirements of the HMHA, for example, in regional/remote areas without psychologists or counsellors, psychologists are fly-in fly-out and many specialist counsellors (e.g. victim/survivor counsellors) are over-subscribed and unable to take new referrals.
- The allocation of Housing and Accommodation Support Initiative packages are insufficient in many areas and unable to meet demand.
- Funding models need to be flexible to enable services to meet individual needs. One example is the Together Home program, which is time-limited in its support for the highest needs group.

4. Other key issues for Specialist Homelessness Services

The below feedback relates to question twenty in the consultation questions: *Do you have any other final comments you would like to make about the any of the HMHA 22 supporting frameworks or their implementation?*

Homelessness NSW received comments from members on other key priority issues for the HMHA Frameworks and implementation. These include:

- The relationship to sustaining tenancies, including the link between policies such as the social housing three strike policy and the HMHA frameworks.
- The alignment of the agreement with other partners, for example, philanthropic funders of mental health programs. The relationship between HMHA governance structures, Specialist Homelessness Services and philanthropic funding should be clarified in the HMHA.
- The HMHA focuses on mental health support in social housing, but there is a real need for support at the entry point into the homelessness sector, before people reach a crisis point.
- Investigate the implementation of embedding a screening and data collection tool at NSW Health on the experience of homelessness and exits from hospital and health services into homelessness, and make this data available to inform priority areas and services.
- Training should be provided to health services to better engage with Specialist Homelessness Services and develop opportunities for critical prevention and intervention points. This can be supported by Homelessness NSW.

Engage specific cohorts

Homelessness NSW also recommends the specific engagement of key cohorts impacted by homelessness and mental health challenges to ensure that the governance, service delivery and outcomes frameworks meet the needs of diverse communities. This includes engagement with the following specific cohorts:

- Aboriginal and Torres Strait Islander community groups
- Victim/survivors of domestic and family violence and their families
- Young people experiencing domestic and family violence or in the 16-18 age group who have limited housing supports available
- Culturally and linguistically diverse people, particularly where visa status is precarious due to relationship breakdown
- Older people
- People impacted by natural disasters
- People with companion animals
- LGBTQIA+ young people in regional areas