



St Pat's | Community Support Centre



This evaluation has been provided with a grant from the City of Fremantle



BACKGROUND TO THE 20 LIVES 20 HOMES PROGRAM

The **20 Lives 20 Homes (20 Lives) program** is a local place-based Housing First response to ending homelessness.¹ Established in Fremantle in late 2019, with the generous support of philanthropic donations, 20 Lives builds off the 50 Lives 50 Homes Housing First program¹ that operated in Perth from late 2015-late 2020, and now morphed into the **Zero Project**. LotteryWest have been solely funding the program since January 2021.

20 Lives commenced in November 2019, with the initial aim to support and find housing for 20 of the most vulnerable street present people in Fremantle, as identified by the Vulnerability Index-Service Decision Assistance Tool (VI-SPDAT).² At its core are two highly experienced Outreach Case Workers who are based within St Patrick's Community Support Centre (St Pat's), a key organisation in the WA homelessness sector located in the heart of Fremantle. Backbone support was provided through Ruah Community Support Services, with additional wrap around support provided through the After-Hours Support Service (AHSS). When the program commenced, a private rental brokerage initiative funded by WA Department of Communities via Foundation Housing was trialled in response to the shortage of social housing and affordable rentals in the Fremantle vicinity.

20 Lives has now been running for over two years, and St Pat's is providing the backbone support, in close collaboration with Ruah as well as the outreach work and case management. As a collective impact initiative, connecting people to other supports and existing services is an important aspect of 20 Lives. Particularly, as developing cooperative relationships and referral pathways with other Fremantle and south metropolitan health and social support organisations has been critical to enabling people to connect with their communities.

WHO HAS 20 LIVES SUPPORTED?

(Up to 1 November 2021)

27 PEOPLE SUPPORTED IN TOTAL:



59% MALE
41% FEMALE



44 YEARS AVERAGE AGE
(RANGE: 23-63)



70% ABORIGINAL AND/OR TORRES STRAIT ISLANDER

TIME SPENT HOMELESS:



6 YEARS

ON AVERAGE SPENT HOMELESS PER PERSON

equivalent to

59,708 NIGHTS

COLLECTIVELY SLEEPING ROUGH

(At the time of undertaking the VI-SPDAT²)

THE 20 LIVES MODEL

Housing First principles drive the aims of 20 Lives, prescribing safe and permanent housing as a priority, provided prior to, and not conditional upon, addressing other health and well-being issues.³ Housing of choice is also important, to ensure people remain in control of their lives.

A Lodging Protocol has been developed to assist staff to assess a persons housing of choice i.e. lodging, private rental, social housing. Other elements of support provided by 20 Lives include referrals to other support agencies, assistance with housing and personal ID documents, and household items.



This snapshot has been prepared as part of the independent UWA evaluation of the 20 Lives 20 Homes project

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THE UNIVERSITY OF
WESTERN AUSTRALIA

WRAP-AROUND SUPPORT PROVIDED



People supported by 20 Lives often have multiple psychosocial needs they require support with, including health, mental health and/or alcohol and other drugs (AOD) issues. Providing wrap-around support is a critical element of the *Housing First* model and supporting individuals to settle in and sustain their tenancies.

While St Pat's is now providing the backbone support to the 20 Lives program, Ruah has continued to support 20 Lives in various ways including through a close connection with its Zero Project team and by providing access to home visits and support through the AHSS as well as whitegoods and vouchers for basic needs. Supporting people to access health services in the community has been a key area of support for the 20 Lives program and support partnerships from local services has been crucial to the successful outcomes with clients. Other health services 20 Lives have referred their clients to include Silver Chain, Homeless Healthcare, Street Dr, Alma St Mental Health, Crossroads, Palmerston & Wungening AOD Services.

27 PEOPLE* SUPPORTED - WHERE ARE THEY NOW?



2 people are in social housing lodging
6 people are in private lodging



4 people have received support but no longer require assistance from 20 Lives



3 people are in private rentals through a St Pat's rental subsidy
(1 tenancy and 2 License to Occupy)



3 people are couch surfing – 1 entering rehab, 1 self-selected to live with family, now priority listed for long term housing



2 people housed with Housing Choices Ltd
5 people are in public housing through the Dept. of Communities



1 person has passed away



6 people have reunited with family



1 person is incarcerated and no longer in the 20 Lives program

***Note: Some people experienced more than one outcome i.e., received support to get housing and no longer require assistance. Some have been housed and have now reunited with family.**

CASE STUDY ON SUPPORT RECEIVED THROUGH 20 LIVES

Background

Amy* is an Aboriginal woman who has been sleeping rough in the Fremantle area for approximately 7 years. She has a long history of family violence, substantial debt, and has children in care. Amy has sustained considerable bone damage due to physical assaults and untreated injuries and struggles with her mental health and AOD misuse.

Interventions undertaken by 20 Lives

The 20 Lives Outreach Case Workers engaged with Amy over a long period to gain her trust. They assisted her with documentation, housing applications and access to legal advice and have connected her with a GP. The 20 Lives workers liaised with the Department of Communities regarding her debt and supported her to receive a debt discount.

Amy was housed in a 2-bedroom private rental in 2020, that enabled her grandchildren to come and stay and to re-establish a relationship with her family. Amy was provided a rental subsidy to support the arrangement financially. 20 Lives brokerage funding was used to source whitegoods, furniture and vouchers.

Current Situation

There have been no issues with Amy's tenancy, rental payments and tenancy have been well maintained over 12 months. The 20 Lives workers continue to advocate for Amy and she has been priority listed on the Priority Housing waitlist. Amy continues to engage in case management with the 20 Lives Outreach Case Workers and with AHSS ensuring she receives appropriate medical support as well as AOD support.

SUPPORTING HEALTH & OTHER COMPLEX NEEDS

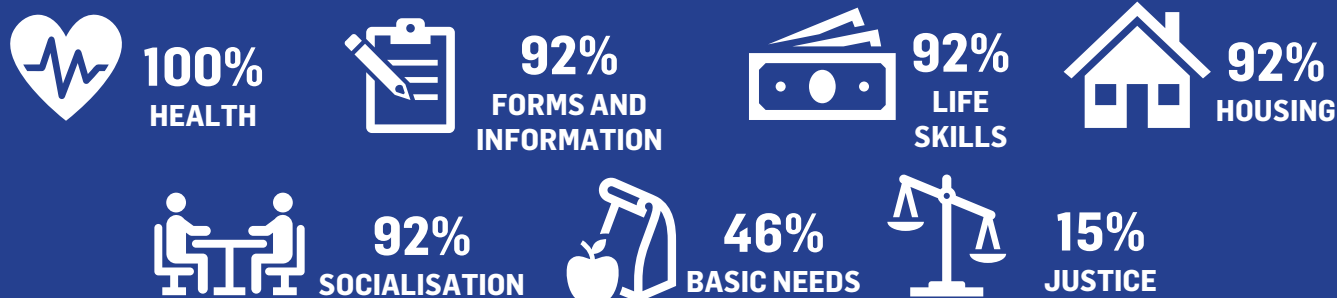
WORKING WITH AFTER HOURS SUPPORT SERVICE TO IMPROVE OUTCOMES

The 20 Lives Outreach Case Workers work with each person to develop a case management plan that identifies goals, re-connection to community, activities and opportunities. It is imperative that case management encompasses and identifies areas of interest to start building a life beyond homelessness.

A large component of this is achieved by engaging with the AHSS. The AHSS is a collaboration between Ruah and Homeless Healthcare that provides both nursing and psychosocial support on evenings, weekends and public holidays to people housed through the Zero Project. The AHSS supports people in developing skills to manage a tenancy through direct tenancy support, developing independent living skills, health, social and emotional issues and meaningful use of time.³

Of the 27 individuals in the 20 Lives program, 48% (n=13) have received support from the AHSS between January 2020 to October 2021, the following diagram describes the types of support and the percentage of the 13 clients who received each type of support offered by the AHSS.

OF THE 13 PEOPLE SUPPORTED BY AHSS, THE TYPES OF SUPPORT PER PERSON INCLUDED:



Health includes contacts related to medication management, AOD support, physical health, mental health, and Family Domestic Violence (FDV). Forms and Information includes undertaking the VI-SPDAT and Outcome Star, completing a health plan or Housing Authority application. Life skills include managing money, self-care, and motivation. Socialisation includes meaningful use of time, relationships and peer work. Basic needs include support with toiletries, clothing, food hampers, blankets and household items, vouchers and transport.

CASE STUDY: IMPACT OF HAVING AFTER-HOURS SUPPORT

Background

Cathy* is an Aboriginal female in her mid-thirties who has been rough sleeping, couch surfing or incarcerated for over 10 years. She has a long history of family violence, mental health issues, and long-term AOD misuse. Cathy has stated that the trauma she experienced set her on a path of “self-destruction” and feeling like she did not “belong” anywhere.

Support Provided by 20 Lives

The 20 Lives Outreach Case Worker liaised with the AHSS to provide support for Cathy, a case management plan was completed with her which included an initial home visit. Working closely together on coordination, the support workers from 20 Lives and AHSS have provided a genuine wrap-around support for Cathy with home visits, case management plans and telephone support.

Support Provided by the AHSS

Cathy has said that “she often felt overwhelmed at night-time” and that having support outside of traditional office hours has assisted her immensely i.e., she telephoned 20 Lives in a highly anxious and distressed state. Specialist support was organised via Alma Street Mental Health Service. Additionally, 20 Lives arranged an AHSS telephone support call for Cathy and put in place AHSS home visits. Cathy stated that the support she received from the AHSS team was “life-saving”.

The AHSS team increased their visits to support Cathy during difficult times and put in place further appointments for counselling and mental health services ensuring she attended. Cathy also stated that even during the mandated COVID 19 lockdowns, support continued via telephone calls from them. The AHSS continues to provide support to Cathy to help provide her the best outcomes and thrive emotionally.

*Not her real name

CASE STUDY: COLLABORATION BETWEEN SUPPORT PROVIDERS

Background

Nikki* was referred to Primary Care at Home (PCAH), by her 20 Lives Outreach Case Worker due to uncontrolled Type 2 Diabetes, for which she was requiring insulin. Nikki also had a history of AOD use and significant trauma, untreated hepatitis C, and liver damage. Nikki was frequently presenting to ED and regularly calling the AHSS team in crisis. The boarding house that Nikki was residing in was unstable and often volatile, contributing significantly to her distress.

Support Provided by 20 Lives

The 20 Lives Outreach Case Worker took Nikki to meet with PCAH to establish trust and rapport with her, this helped PCAH to prioritise her competing physical and mental health issues from the outset. A multidisciplinary team meeting was held between 20 Lives and PCAH to determine roles, responsibilities and actions for all involved in wrap-around support for Nikki. Responsibilities were shared amongst both teams and communication flowed back and forth allowing for changes to Nikki's condition or situation to be escalated or celebrated depending on the nature. Whilst PCAH worked on linking Nikki to a local bulk-billing GP and managing her diabetes, 20 Lives were alongside Nikki supporting her psychosocial and housing needs. When one team was unable to make an appointment with Nikki the other team was there to help.

Nikki slowly engaged with both PCAH and 20 Lives which has led to Nikki getting her diabetes under control without the need for insulin. Nikki was prioritised for the emergency housing list and has begun to cut down on her alcohol intake. Nikki's mental health had also been addressed with specialist trauma counselling secured, and 20 Lives providing practical support to Nikki attending.

Current Situation

Unfortunately, a traumatic incident has occurred and paired with Nikki's complex social needs, has led to a relapse of her AOD use and she has disengaged with both PCAH and 20 Lives and moved out of the area.

*Not her real name

"...Although a solemn conclusion to our collaboration it showed both teams, what could be achieved when both teams work cohesively alongside a client." - **Program Manager Vulnerable Clients, Silver Chain**

"I just wanted to share my congratulations and acknowledge all the hard work and effort I know you have put in with these clients... I think this is a wonderful example of many, as to how well AHSS and 20 Lives work collaboratively to achieve great outcomes for the clients we support. Well done!" - **Service Lead, from Ruah commenting on success stories of collaborative healthcare for people in 20 Lives**

"20 Lives 20 Homes has had a huge impact on young people we work with. The housing first model with wrap around services makes a significant impact on the lives of people who have experienced complex health conditions on the background of childhood trauma. For example, one of our clients would normally be rough sleeping on the street with little hope of meeting housing options. The 20 Lives Outreach Workers linked the consumer into a GP, who has a plan for rehabilitation and has strong links with Royal Perth Hospital (RPH) to meet the health needs of this young man. The compassion and empathy of the 20 Lives Workers has made the difference to making change in this young man's life." - **Complex Needs Coordination Team, RPH**



20 Lives Case Worker, Sally with client Molly



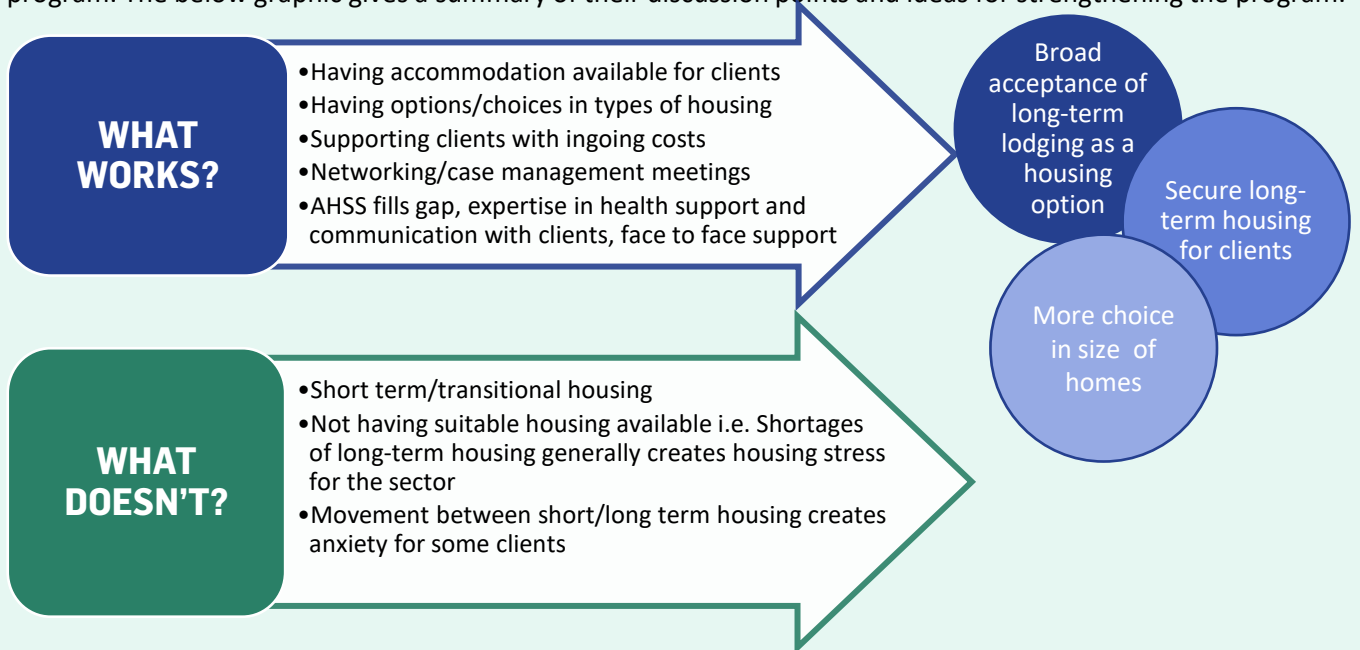
20 Lives client Martin after being housed



20 Lives client Susan after being housed

20 LIVES STAFF PERSPECTIVES

During interviews with staff, feedback was provided on their perspectives and experience of the 20 Lives program. The below graphic gives a summary of their discussion points and ideas for strengthening the program.



CASE STUDY: EFFECT OF SHORT-TERM HOUSING

Background

James* is a male in his late-forties, who has been sleeping rough for over five years. He has a history of alcohol misuse which began when he was a teenager. James has been diagnosed with Chronic Post Traumatic Stress Disorder (PTSD) as well as severe depression, liver disease and mild emphysema. James also experienced childhood trauma and abuse.

Interventions undertaken by 20 Lives

The 20 Lives Outreach Case Workers supported James with required documentation and applications for the 20 Lives program. They supported him to attend his medical appointments, to develop strategies to reduce his anxiety, linked him to AHSS and referred him to appropriate mental health and counseling services. The 20 Lives workers then supported James with an application and signing of a tenancy agreement with the Foundation Housing-Private Rental Brokerage Project**. In September 2020, he moved into a one-bedroom unit where he has passed all property inspections to a high standard. James was also supported to develop strategies to sustain his residency as well as supporting him to attain commonwealth rental assistance. The 20 Lives program brokerage was utilised to establish tenancy inclusive of white goods and furniture.

Current Situation

James had been in his home for over 12 months, finding it to be a safe and comfortable. However, James was informed by his case workers that by November 2021 his tenancy would not be renewed, as ongoing brokerage funding was unavailable. When James was informed his anxiety and chronic PTSD was exacerbated and caused him to drink more alcohol than his usual intake. The stress disrupted his sleeping pattern, his health declined dramatically and his relationship with his family also declined. James stated to 20 Lives case workers how devastated he was to have lost his home after so many years living on the street. The case workers have discussed lodging and boarding options with him due to limited available housing options.

"James is receiving support from services but will need extra support once he has transitioned back into lodging or possibly rough sleeping again." - 20 Lives Outreach Case Worker

**Not his real name*

****Foundation Housing - Private Rental Brokerage Project:** The Department of Communities provided brokerage funding to Foundation Housing, to trial this scheme with 20 Lives, encouraging private landlords to make properties available to 20 Lives clients, with incentives i.e. guaranteed 12-month lease payments, no property management fees and agreement to keep properties well maintained. The scheme did not continue beyond the trial period and some people had to find alternative accommodation options due to unaffordability.

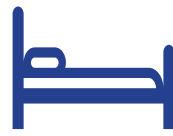
HEALTH USE AND COSTS PRIOR TO 20 LIVES

Of the 27 individuals supported via 20 Lives, 25 individuals were matched within our administrative dataset. The below figures and costs are thus based on their data only and may not be reflective of the entire 27 individuals supported through 20 Lives.

In the three years before consenting to 20 Lives, the 25 individuals matched in our dataset had the following hospital interactions:



123 EMERGENCY PRESENTATIONS



38 INPATIENT ADMISSIONS
totaling
84 INPATIENT DAYS



\$334,551

AGGREGATE COST*
OVER THREE YEARS

OR

\$4.5k

PER PERSON, PER YEAR
(N=25)



*Costs based on Round 23 of the Independent Health Pricing Authority (IHPA) of \$861 per ED presentation and \$2,722 per inpatient day in WA

The 27 individuals' also self reported through the VI-SPDAT other issues they were experiencing regarding their physical and mental health before entering 20 Lives.



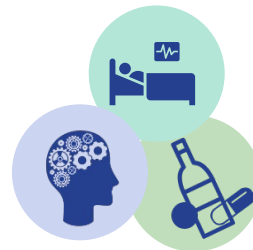
96%
AOD USE



78%
SERIOUS PHYSICAL
HEALTH ISSUES



100%
MENTAL HEALTH
& BEHAVIOURAL
ISSUES



74%
EXPERIENCE
TRI-MORBIDITY

(the overlap of physical health, mental health and AOD use)

SUMMARY OF FINDINGS & IMPLICATIONS

The 20 Lives program has been WA's first localised place-based adaption of Housing First and was highlighted in the WA Department of Communities *10 Year Strategy on Homelessness* as an innovative example of this kind of adaptation of the *Housing First* model in WA.⁴

Whilst adhering to Housing First principles, the 20 Lives program has had to be flexible in its approach to housing options and has continued to support its participants through transitions from one type of accommodation to another. This is salient to note as it reflects that the notion of a single 'forever home' is often not feasible for a raft of reasons, but what is critical to 20 Lives, and Housing First is that people are supported if they need to move to alternate accommodation, or if they return episodically to homelessness. Too often, homelessness and tenancy support services are funded only to support people for a time limited period, but as seen over the course of 20 Lives, the availability of ongoing wrap around support that is responsive to each individual's recovery journey is crucial, and life changing. The shortage of social housing and affordable rentals remains a challenge for the 20 Lives program and for the homelessness sector in WA more broadly.

REFERENCES

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3. Community Solutions, OrgCode Consulting Inc. *The Vulnerability Index - Service Prioritization Decision Assistance Tool (VI-SPDAT); Manual for Single Person Households*. 2014.
4. Vallesi S, Tuson M, Turvey J, Wood L. (2021). *The Value of After-Hours Support as part of a Housing First response to ending homelessness*. Zero Project Snapshot. Centre for Social Impact & School of Population and Global Health, University of Western Australia.
5. Department of Communities. *All Paths Lead to a Home*. Western Australia's 10-Year Strategy on Homelessness 2020-2030: Department of Communities, Government of Western Australia, 2020.