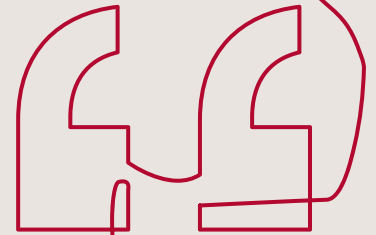


St
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Frontline
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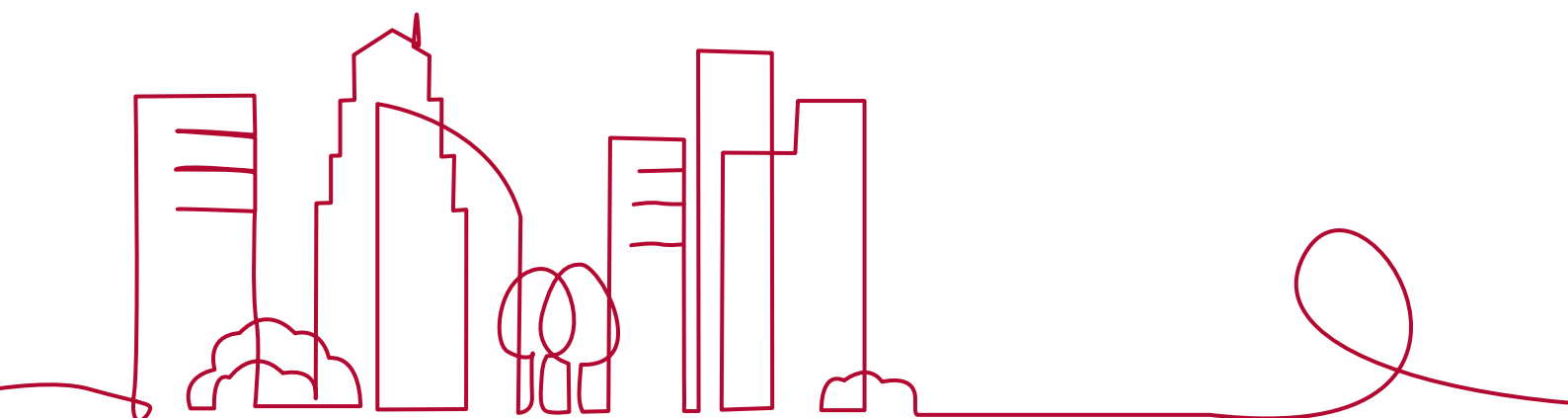
Annual Frontline Worker Survey 2021: Full report

Our fifth annual UK-wide
survey of frontline workers
supporting people
experiencing homelessness.



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Acknowledgements

Thank you to the 826 frontline workers who took the time to complete this survey and share your insights and experiences. At the Frontline Network, it is not about us. It is about you as frontline workers. That is why it is vital we gather your expertise and ideas within our annual survey.

Thank you to those who contributed their time to develop this report: the team at St Martin's Charity, Frontline Network Partners (Coventry Citizens Advice, Cymorth Cymru, Cyrenians, Justlife, Mayday Trust, Path, Praxis, Streetlife Trust, Homeless Connect, Basis Yorkshire and Depaul) and members of the Frontline Network Steering Group.


Additionally, we give our thanks to colleagues who helped shape and share this survey, including at Shelter, Crisis, the Centre for Homelessness Impact, Homeless Link, Pathway, End Furniture Poverty, the Department for Levelling Up, Housing and Communities, and frontline organisations across the UK.

Lastly, we would like to thank the Oak Foundation for their support of the Frontline Network.

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Author:

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Executive summary

I am proud to have been a Trustee for St Martin-in-the-Fields Charity for the last 2.5 years, and to have seen the Frontline Network growing in strength and numbers during this time. This report has only been possible because of the time you have taken to share your learning with us and give us in-depth data to bring to you.

Having worked in the homelessness sector for several years, both as a frontline worker and manager in Edinburgh, I recognise and identify with these findings which are stark, but sadly unsurprising. I work for Cyrenians, who host the Scottish Frontline Network and I have lived and frontline experience of homelessness, so I understand only too well the concerns raised about the conditions that frontline workers are operating in. I also know the passion and commitment that it takes to always do your best and go the extra mile for those who you work with.

Across the UK homelessness continues to be an urgent issue, which has been met with varying responses. The Scottish Government is working towards implementing a homeless prevention policy, which is expected to be a positive move for those at risk of homelessness. However, currently we are seeing worrying signs of a return to rough sleeping, and people approaching services for assistance due to challenges such as the increasing cost of living and stagnant Local Housing Allowance rates. These trends are echoed in England, particularly in London, with some boroughs having higher numbers of people sleeping rough than Scotland and Wales combined. This shows that despite best efforts during the pandemic with initiatives such as 'Everyone In' in England and similar schemes in Scotland and Wales, this has not led to sustainable housing outcomes for all. Like Scotland, Wales has made positive policy moves in terms of tackling homelessness, although is faced with the similar challenges in relation to accommodation availability and over-stretched services. On the

other hand, 80% of you told us that in Northern Ireland, you felt that the Government was "not so effective" or "not at all effective" in taking action to prevent and relieve homelessness. Similarly in England this was 64%. Effective policy change informed by frontline and lived experience, can equate to positive change on the ground.

We are proud to be bringing this learning to you and we would ask that you please take some time to read through our survey findings. Across the board there were issues with accessing key resources to end and prevent homelessness, including accommodation itself. As well as this there were difficulties in accessing support, particularly mental health, with high caseloads, waiting lists and issues around commissioning services. This affects salaries and the wellbeing and retention of staff, inadequately recognising the value that frontline workers bring to their roles. All of these issues are against a backdrop of increasing complexity of support needs. Trying to find support for those with no recourse to public funds remains hugely problematic, and I understand how heart-breaking it can be to have to tell someone the news that there is no support available to them. It is also disheartening to see that being able to build good partnerships remains an issue, despite positive partnerships being hugely beneficial to all concerned. On a positive note, I was pleased to see that 21% of frontline respondents have lived experience of homelessness. Although frontline work isn't without its challenges for individuals, having this experience brings added value to the role and organisations that you work for. Members of the Frontline Network have created an amazing platform to share and build upon good practice. Together, we have a lot of power to push for social change for those we work with.

We hope that the calls for action towards the end of the document will give some clarity about future planning and recommendations for ending homelessness in the UK, which we can collectively play a key role in driving forward. We hope that these findings will not only inform frontline organisations, but also governments, local authorities, the Department for Work and Pensions, landlords and other decision makers.

Viki Fox
Trustee of St Martin-in-the-Fields Charity and
Policy and Participation Manager at Cyrenians

About the Frontline Network

In 2016 St Martin-in-the-Fields Charity set up the Frontline Network to support staff from the public, statutory and voluntary sectors working on the frontline with people experiencing homelessness.

At a national level, we offer funding, community and resources. This includes:

- Providing funds for frontline workers to attend training
- Hosting events to share best practice, for example our annual conference
- Conducting research with frontline workers to learn from their insights and
- Amplifying the voices of frontline workers to influence decision makers.

Finally, our Vicar's Relief Fund provides grants, through frontline workers, to prevent evictions and help people to access accommodation.

Thanks to the generous support of our donors, in 2021/22 the Vicar's Relief Fund was able to make 4,582 grants, distributing £1,820,133.51 and supporting 7,183 people across the UK.

For more information visit our website:
www.frontlinenetwork.org.uk



Introduction

The annual Frontline Worker Survey is the most extensive survey of frontline staff working with people experiencing homelessness across the United Kingdom. This is the fifth year we have undertaken the survey since its launch.

Listening to lived and frontline experience is crucial to addressing homelessness. As we enter a new phase of the pandemic and face growing challenges such as the cost of living crisis, it is important that frontline workers' first-hand insights into how to prevent and relieve homelessness are heard and help shape future policy and practice.

In this survey we explored the practical and systemic barriers to tackling homelessness, as well as best practice to ensure that suitable, secure, affordable housing is available to all. We asked 47 questions, ranging from how easy or difficult frontline staff find supporting people with things like accessing accommodation, health services and benefits; to their experiences of working in this sector and what can be done to support their professional development and wellbeing.

This report provides a snapshot into the working lives of staff on the frontline. In total 826 frontline workers from across the four nations responded to the survey over a four-week period in November-December 2021¹. Further information about the survey methodology can be found in Appendix 1.

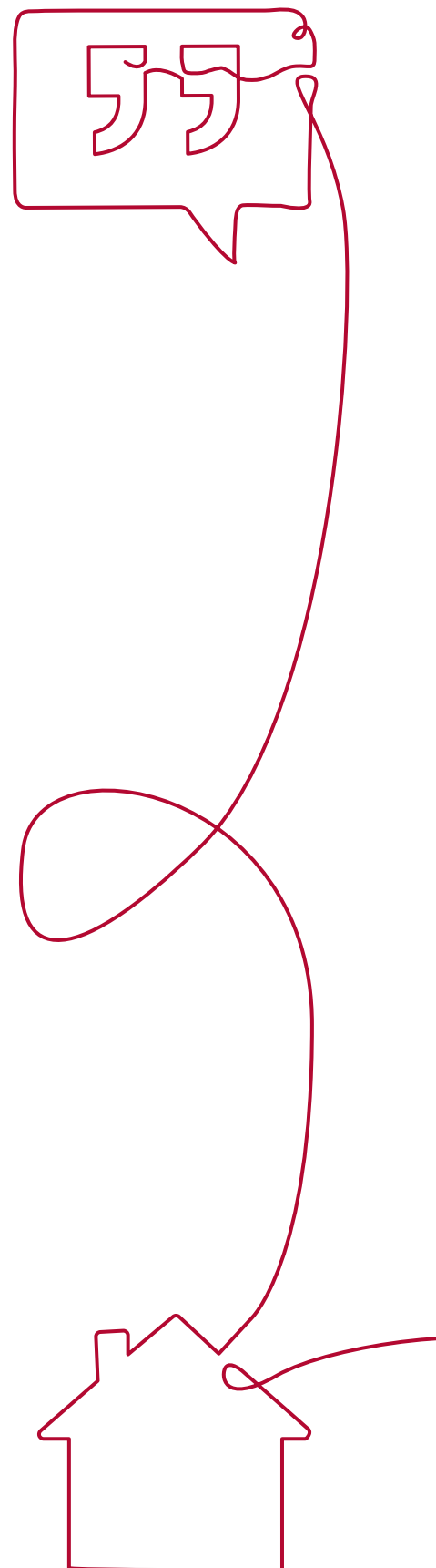
Key Definitions

We define a frontline worker as anyone in a paid position directly supporting people experiencing homelessness. This includes those working in the public, statutory and voluntary sectors. Frontline staff responding to this survey worked in roles such as outreach, housing, social work, and probation. This year the survey was also open to and received responses from a small number of volunteers who supported people experiencing homelessness. Appendix 2 provides further information about the survey respondents.

In this survey, we have adopted the Homelessness Monitor's definition of homelessness², which recognises its complex and multifaceted character. People experiencing homelessness may be recognised as statutorily homeless under their respective country's legislation. However, we also classify homelessness as including those individuals living in hostels, shelters, and temporary supported accommodation, as well as hidden homelessness – including people sofa-surfing and living insecurely in sheds or cars who are often not captured in official statistics.

1. In November-December 2021 the COVID-19 pandemic continued to affect frontline homelessness services, in particular as further measures were introduced following the emergence of the Omicron variant. Specific guidance varied across the UK but included wearing a face covering in enclosed or crowded spaces and working from home where possible:
<https://www.gov.uk/government/news/prime-minister-sets-out-new-measures-as-omicron-variant-identified-in-uk-27-november-2021>

2. The Homelessness Monitor is a longitudinal study, commissioned by Crisis and is funded by Crisis and the Joseph Rowntree Foundation, providing an independent analysis of the homelessness impacts of recent economic and policy developments in the United Kingdom:
<https://www.crisis.org.uk/ending-homelessness/homelessness-knowledge-hub/homelessness-monitor/>



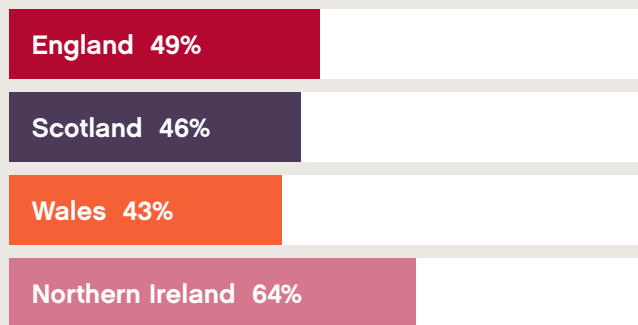
Survey findings

A UK snapshot

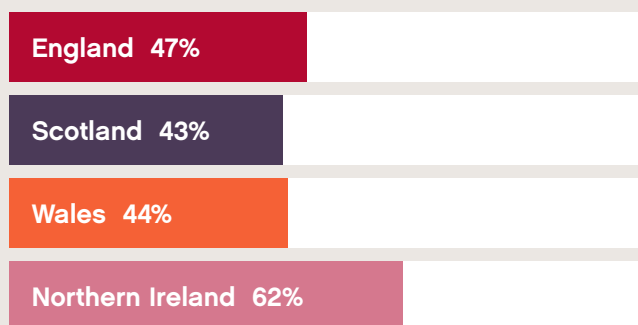
We recognise that devolution means there are divergent homelessness laws, policies and practices across the four nations. We wanted to begin by sharing headlines from across the UK, picking out some of the key issues raised by frontline workers.

Nearly half of frontline workers across England, Scotland and Wales reported that the resources available to prevent and relieve homelessness were 'very low' or 'quite low', and this figure was closer to two thirds in Northern Ireland.

Frontline workers who stated resources available to prevent homelessness were 'very low' or 'quite low':

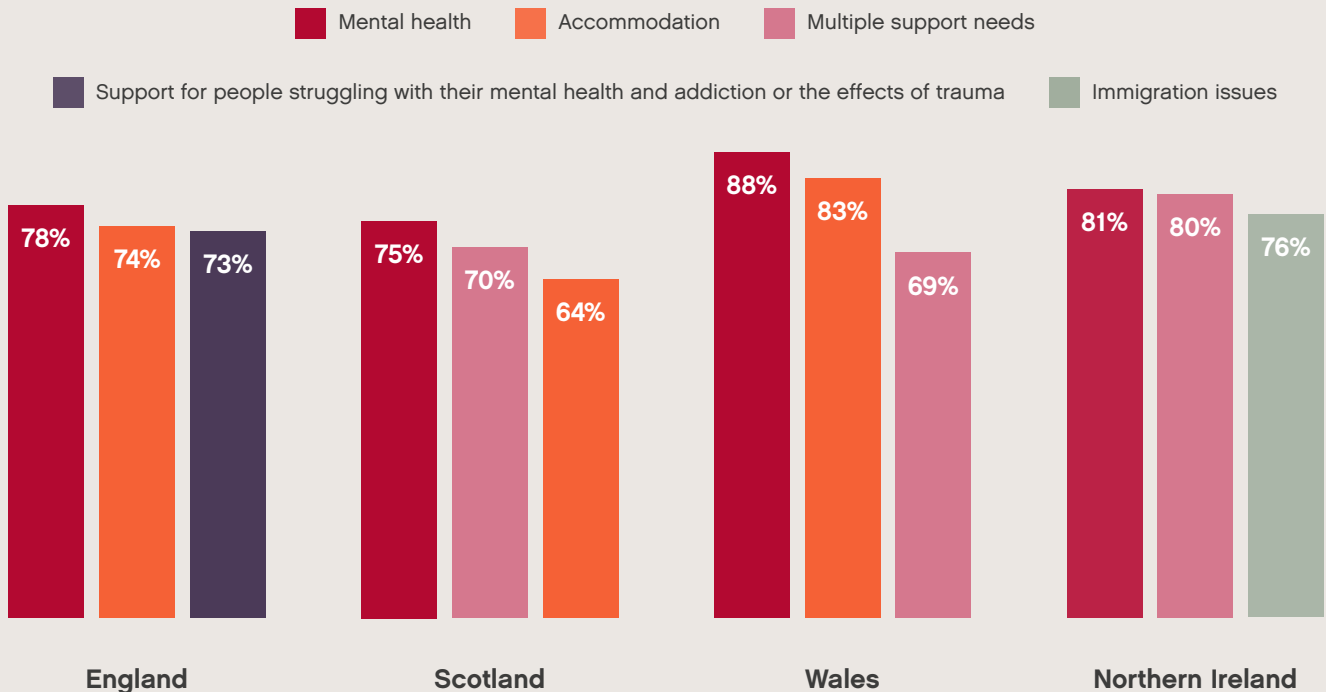


Frontline workers who stated resources available to relieve homelessness were 'very low' or 'quite low':



When asked about accessing support for people they work with, frontline workers consistently shared that mental health was the area in which they found most difficulties.

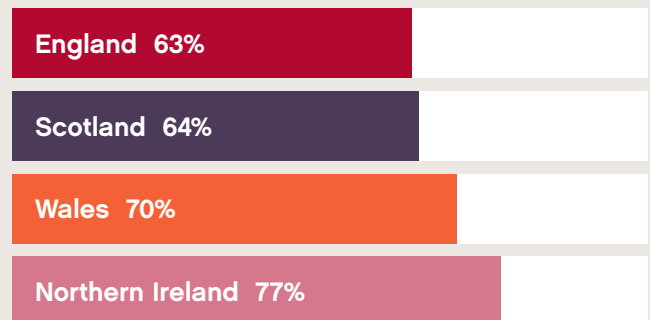
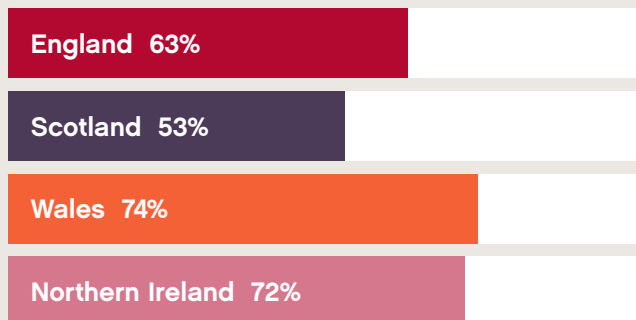
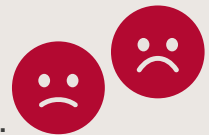
Top three areas in each country where frontline workers stated it was 'very difficult' or 'difficult' to access support



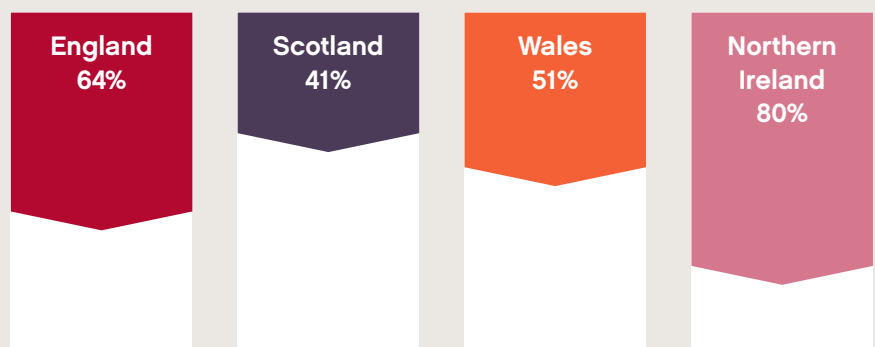
The majority of frontline workers rated their caseload as 'very high' or 'quite high'.



The majority of frontline workers reported that the impact of their role on their own wellbeing was 'very negative' or 'slightly negative'.



In every nation except Scotland, more than half of frontline workers felt that the action their nation's Government was taking to prevent and relieve homelessness was currently 'not so effective' or 'not at all effective'.



Access to accommodation

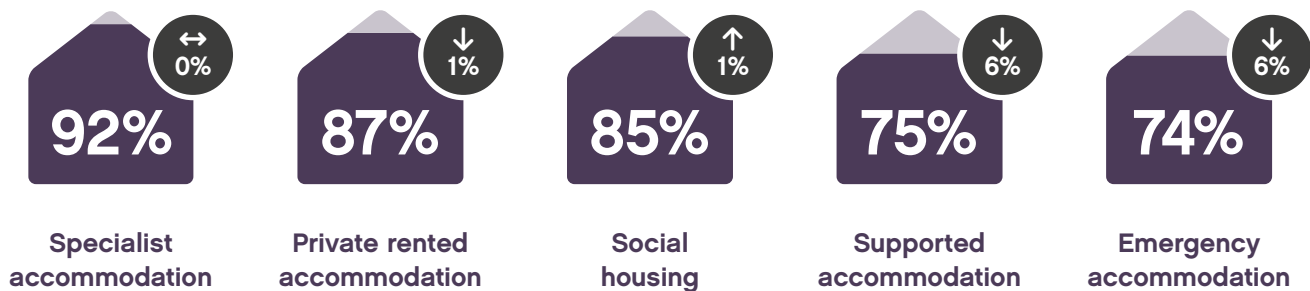
Frontline workers told us that access to safe and suitable accommodation continued to be a fundamental issue when trying to address homelessness.

Frontline workers reported the most difficulties when trying to access specialist accommodation, followed by private rented accommodation and social housing.

There were small improvements in access to supported accommodation and emergency accommodation in comparison to 2019 data. However, in relation to emergency accommodation, looking forward 79% of frontline workers were 'extremely', 'very' or 'somewhat' concerned about the lack of adequate, COVID-safe Severe Weather Emergency Protocol (SWEP) provision. 32% of frontline workers reported that obtaining information about the SWEP provision in their area was 'very difficult' or 'difficult' (+3% from 2019).



Percentage of frontline workers stating this accommodation was 'very difficult' or 'difficult' to obtain for the people they supported (comparison with pre-pandemic data collected in the 2019 Frontline Worker Survey):



“[There is a] lack of availability of accommodation in both private rental sector and social sector housing. Hostels have reduced numbers due to isolation beds [...] When clients have been given NTQ [Notice To Quit] there is simply not the accommodation available for them to move on to so legal proceedings often commence.”

“An increase in private landlords selling up in large numbers in North Wales as the demand for real estate is sky high with a huge increase in people wanting to relocate to live here further adds to the housing crisis. In addition some landlords [are] changing accommodation to holiday accommodation with an increase in demand here too.”

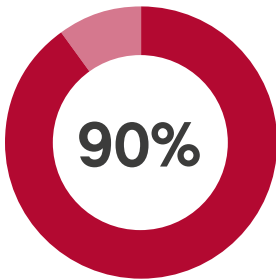
“Most of our clients [...] require a high needs supported accommodation provision, there is currently no such provision that we can access.”

“Housing First are great – having the money to keep putting people in new tenancies if they are evicted or abandoned and being able to have no time limit on working with someone is key – seeing multiple disadvantage holistically and treating it with more than just inadequate, precarious housing.”

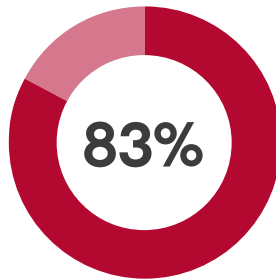
“Accommodation adapted for wheelchair users is very scarce – there are something like 3 temporary adapted beds [in] a city of half a million people.”

Barriers to accessing accommodation

When trying to access accommodation, frontline workers reported a number of barriers for people they supported. Particular difficulties were raised around Local Housing Allowance (LHA)³:



of frontline staff found it 'very difficult' or 'difficult' to find private landlords willing to let to LHA claimants.



of frontline staff found it 'very difficult' or 'difficult' to obtain accommodation within the LHA rate.



“Only a few landlords in the city [are] prepared to let to individuals, families at LHA and without a guarantor or accepting Deposit Guarantees from council.”

“There’s a general housing shortage in the area, private rented at LHA is hard to get hold of.”

In focus: **The LHA rate freeze**

The majority of frontline workers felt that the freezing of LHA rates in April 2021 had affected their ability to find suitable affordable housing for the people they support. A common comment was that the freeze had meant private rented sector accommodation was increasingly unaffordable, particularly as rents were rising in many areas.

Some frontline workers added that this was particularly challenging where individuals were affected by the benefit cap or were under 35s who could only get the shared accommodation rate.

“It has not helped. UC uplift has disappeared, benefit cap makes it hard for families and [...] market rates well above LHA. Top ups required [are] unsustainable.”

When trends were examined geographically, coastal areas, the South West and the South East of England had the highest proportion of frontline workers finding it 'very difficult' to obtain accommodation within the LHA rate.

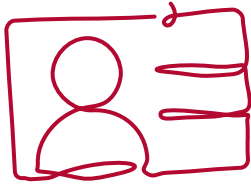
A smaller number of frontline workers reported that the freeze was only a slight issue, or that

it made no difference. In some cases it was felt that there was minimal change as private sector accommodation had consistently been unaffordable before the freeze. Alternatively, some frontline workers felt that there were other barriers to accessing accommodation, explored further below.



3. The LHA sets the amount of housing benefit or Universal Credit which tenants in the private sector can claim to help pay their rent.

Other barriers to accessing accommodation highlighted by frontline staff were:



63%

of frontline staff found it 'very difficult' or 'difficult' to obtain ID needed to secure accommodation for people they supported.



59%

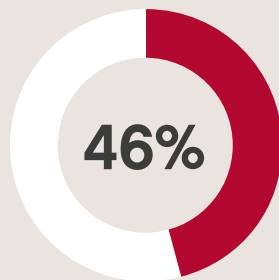
of frontline staff found it 'very difficult' or 'difficult' to obtain a deposit to secure accommodation for people they supported.



55%

of frontline staff found it 'very difficult' or 'difficult' to obtain Discretionary Housing Payment for people they supported.

In focus: **Housing options for people with No Recourse to Public Funds**



of frontline workers were supporting individuals who have experienced homelessness as a result of their immigration status.

We asked frontline workers about the housing options available for people with no recourse to public funds (NRPF) due to their immigration status. Responses showed that many frontline workers did not face this issue due to the nature of their role or service. Others were unsure what options were available in these circumstances and some staff said in these instances they would refer people to other relevant agencies who could discuss available options or provide legal advice.

Where frontline workers did feel able to comment, a large number stated that there were either no housing options available to people not eligible to access public funds, or the options were extremely limited. The limited housing options described by frontline workers included emergency accommodation (e.g. winter night shelters), hostels accepting people with restricted eligibility, accommodation

offered through charitable organisations, social housing and the private rented sector.

“Almost non existent. A few beds here and there.”

“At the discretion of the local council they may be able to access temporary accommodation whilst applying for immigration support. Otherwise, we need to use winter shelters or charities like Refugees at Home.”

“Currently we have an MOU [Memorandum of Understanding] scheme for use during the pandemic as part of ‘get everyone off the streets’. This will end eventually.”

“No long term options unless the client can work and earn enough to rent privately, which is very rare and not at all secure. In cold weather – SWEP.”

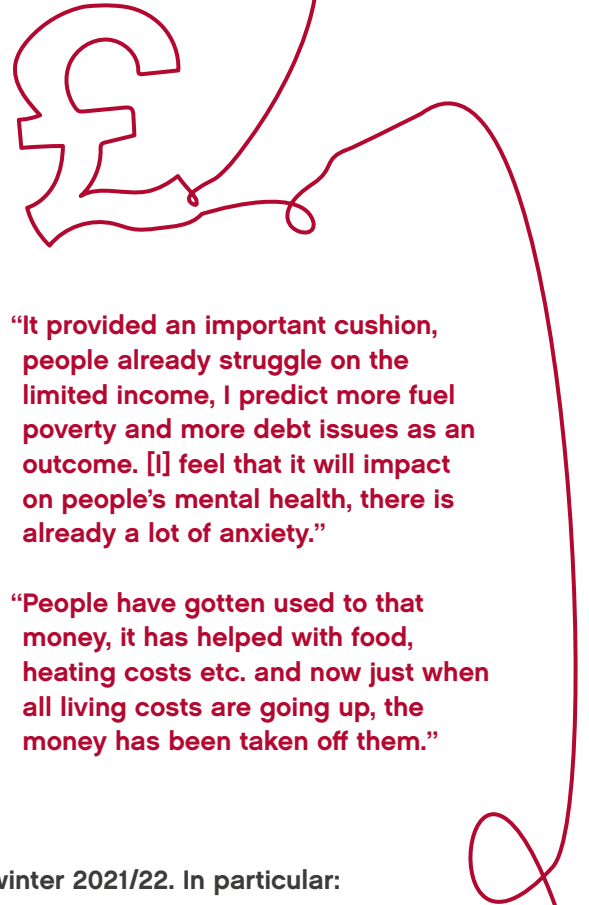
There were more opportunities to support people when there was a family with a child under the age of 18 where provision under section 17 of the Children Act (1989) applied, or where people with substantial need of care and attention could be supported under the Care Act (2014).

Welfare and cost of living

Further issues affecting access to accommodation related to welfare and cost of living, problems which have escalated since the time of surveying.

In October 2021, shortly before the survey was opened, the £20 weekly uplift to Universal Credit was withdrawn.

77% of frontline workers described this change as 'very negative', with a further 21% describing it as 'slightly negative'.



"It provided an important cushion, people already struggle on the limited income, I predict more fuel poverty and more debt issues as an outcome. [I] feel that it will impact on people's mental health, there is already a lot of anxiety."

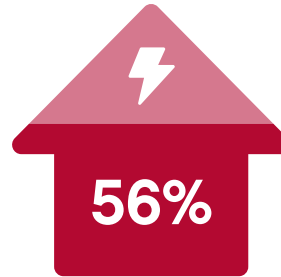
"People have gotten used to that money, it has helped with food, heating costs etc. and now just when all living costs are going up, the money has been taken off them."

Frontline workers shared their concerns looking forward into winter 2021/22. In particular:



59%

of frontline workers were 'extremely concerned' about the risk of people needing to choose between housing costs and other basic necessities (e.g. food) over the coming months.



of frontline workers were 'extremely concerned' about rising energy costs over the coming months.

The overwhelming majority of frontline workers were also concerned about build up of rent arrears, risk of eviction and risk of rough sleeping looking forward.

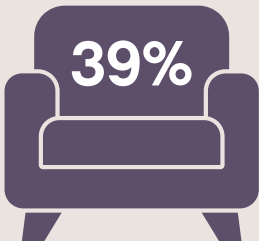
"[People] cannot afford monthly payments let alone upfront deposit etc; [it is] particularly difficult for the single person on minimal income with nil benefit entitlement – or same [circumstances] but lone parent."

"We're seeing an increased volume of eviction notices and possession orders being served."

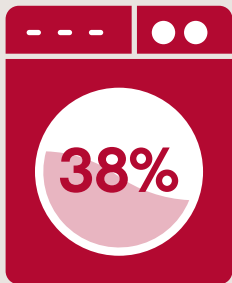


In focus: Furniture poverty

Where accommodation could be accessed, frontline workers still reported significant challenges in making sure this was suitable for households to live in and call a home. A key issue within this was furniture poverty.



39% of frontline workers found it 'very difficult' or 'difficult' to access furniture for the people they worked with.



38% of frontline workers found it 'very difficult' or 'difficult' to access white goods for the people they worked with.

In particular it was commented that furnished social housing was rare, and it was often unaffordable and time consuming for households to acquire items themselves. Carpets were highlighted as especially difficult to obtain.

“Every social housing property offered to our customers is an empty shell; not even a curtain rail. The items needed are sourced from charities or grant applications. It seems unfair that individuals on a low income and in desperate need of help and support are put into a property that requires money, time and effort to get it habitable.”

“We have a particular issue with our local housing associations because they have a policy of removing carpets when a tenant vacates, regardless of condition, but do not help the new tenant pay for replacement carpet, so lots of clients on low incomes taking on new tenancies are relying on credit or charities to foot the bill, or living with bare floorboards/concrete.”

Where needed, it was most common for furniture and white goods to be sourced using grants from a charity (65% of frontline workers did this 'very often' or 'often'), followed by reuse sector organisations/charities (58%) and the Local Welfare Assistance (England), the Discretionary Assistance Fund (Wales), Discretionary Support (Northern Ireland) or the Scottish Welfare Fund (55%).

However, challenges remained, including where grants were only available to certain demographics or were limited to a small number of items. Delays due to grant portals only being open at certain times or decisions being processed were also an issue. Applications were sometimes unsuccessful and there were reported difficulties in appealing decisions. Lastly it could be challenging to transport items once acquired.

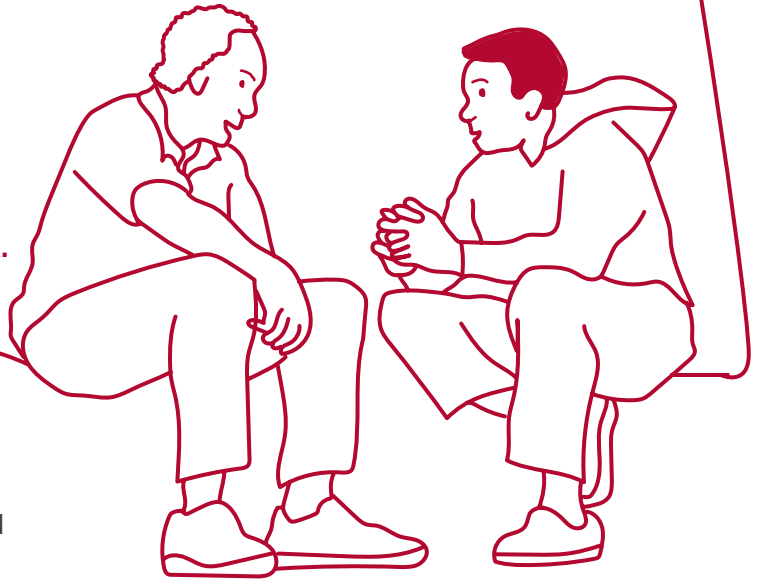
“The demand on these services has increased and we spend more and more time trying to secure these essential items.”

“Our local authority welfare grant scheme is extremely limited in funds so can only support with one white good and an essential item such as a bed and mattress.”



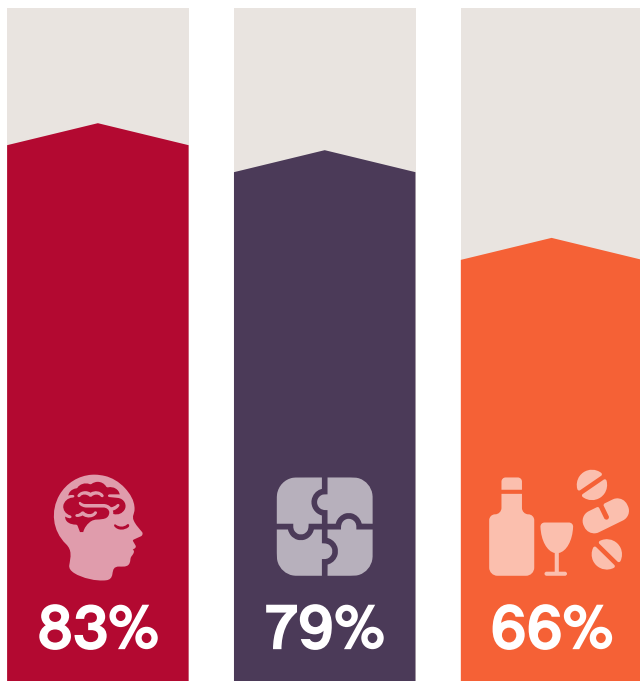
Access to broader support

Frontline workers reported an increase in people presenting with other support needs beyond accommodation, however there remained challenges in providing assistance and greater opportunities for prevention work.



Changes in support needs

Over the previous 12 months frontline workers had observed an increase in people presenting with other support needs, as well as housing needs:



saw an increase in people who had mental health needs.

saw an increase in people with multiple support needs.

saw an increase in people with problematic substance use.

Additionally, 65% of frontline workers saw an increase in the number of people struggling with their mental health and addiction or the effects of trauma. 62% saw an increase in people who had experienced domestic abuse.



“More and more of our referrals are individuals suffering with their mental health [...] We feel very stretched as individually we have [a] case load of 25 customers each which does not allow the time needed to work with complex mental health issues effectively.”

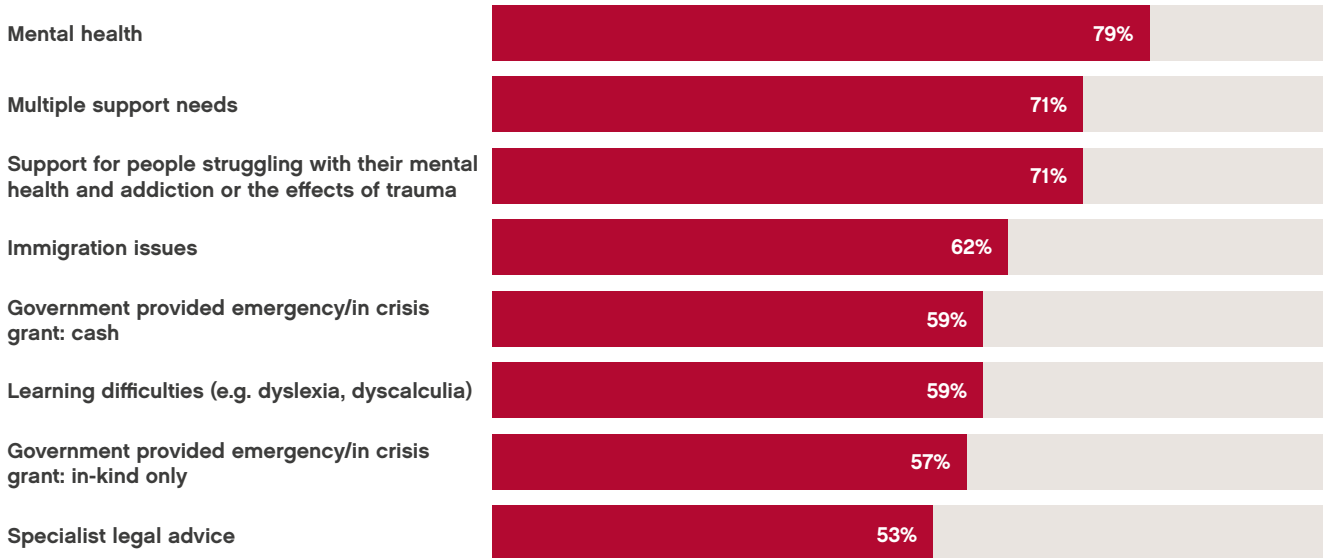
“[I have seen an] increase from people approaching fleeing violence and applicants approaching from other areas of the UK.”



Access to services

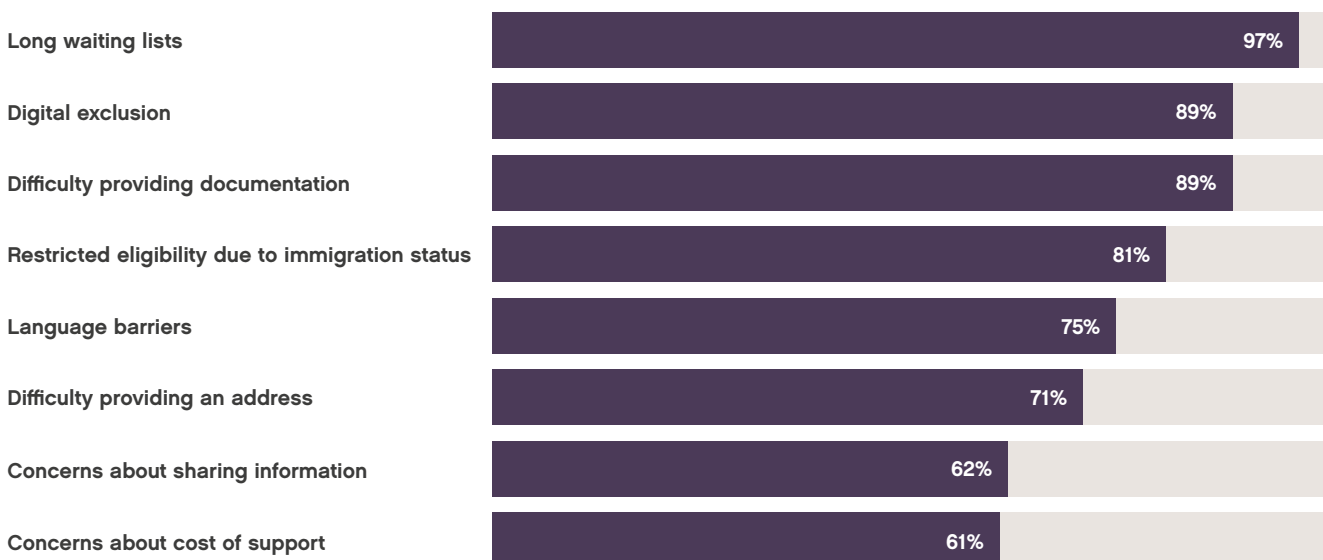
Faced with this growing need, frontline workers reported substantial challenges in accessing relevant support for people they worked with. Mental health support was particularly difficult to access, along with other key areas shown in the chart below.

Percentage of workers reporting types of support were 'difficult' or 'very difficult' to access:



Frontline workers highlighted significant barriers to accessing support services. Long waiting lists were identified as the biggest issue, followed by digital exclusion and difficulty providing documentation.

Percentage of workers stating yes they had observed these barriers to accessing support services:



“Long waiting lists – everywhere you go/look... 1h 26min on hold to DWP [Department for Work and Pensions], 50mins on hold to electricity providers, 6 hours wait in A&E, 4h wait in court, 9 months wait for accommodation.”

“Digital exclusion is one of the biggest barriers we see as an organisation and it takes up a lot of our capacity.”

“All clients have support needs that intersect [with] each other and some services will decline their referral or supporting them based on this.”

In focus: **Access to health services**

Poor health can be both a cause and consequence of homelessness, and support from health services is therefore crucial. Frontline workers described significant difficulties in accessing all kinds of health services:



56%

of frontline workers found it 'difficult' or 'very difficult' to access primary care (GP, pharmacy, dentist, optician services) for people they supported.



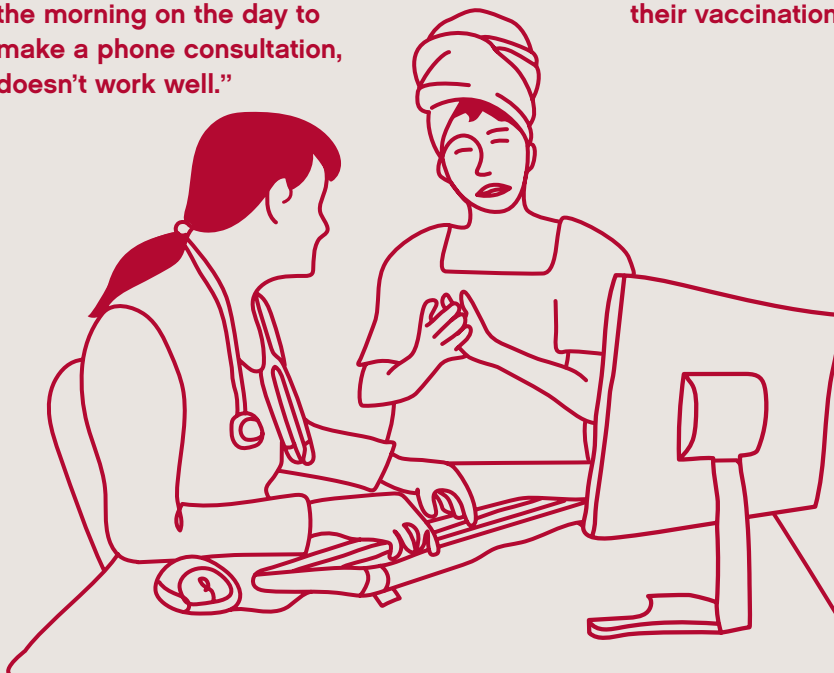
54%

of frontline workers found it 'difficult' or 'very difficult' to access secondary care (hospitals and specialists) for people they supported.



"It has been almost impossible to be able to register clients with a dentist. By far the most difficult to get help from is Mental Health Services."

"Long wait times for appointments at GPs is difficult, and having to phone up first thing in the morning on the day to make a phone consultation, doesn't work well."



64% of frontline workers found it 'difficult' or 'very difficult' to access specialist healthcare support (designed for people experiencing homelessness) for people they supported. Where specialist healthcare support was available this was seen to be hugely valuable:

"[Our city] has a specialist GP practice [...] and they are very adaptable to client's needs and work closely with caseworkers."

If services could be accessed in the first instance, there were sometimes still challenges further down the line, including delays, difficulties navigating complex systems, and the need to travel to appointments or communicate over the phone if face to face meetings were not possible.

More positively, **57% of frontline workers found it 'easy' or 'very easy' to access COVID-19 vaccinations for people they supported.** Good practice that enabled this included use of the NHS helpline and healthcare staff visits to frontline organisations to offer advice and vaccinations within an accessible and familiar location.

"Our local GP surgery was able to arrange to visit the Day Centre and book in the majority of the residents in our organisation which made it a lot easier for people to access their vaccinations."

In focus: **Partnership working**

For frontline workers it is often a key part of their role to have knowledge of other support organisations and work closely with them to respond to needs. However, frontline staff highlighted that building partnerships was often challenging, particularly with mental health organisations and the Department for Work and Pensions (DWP).

Percentage of frontline workers stating it was 'difficult' or 'very difficult' to build partnerships with the following types of organisation:



Some frontline staff reported they had been able to form good working relationships through interagency meetings, as a result of collaboration during the COVID-19 pandemic or through investing considerable time in this area.

“Good partnership working with the LA [Local Authority] has further increased during the pandemic.”



“We have worked hard to build a relationship with DWP and they have been responsive.”

“Having multi agency meetings for different services is really helpful to know what service does and to get information on things that can help those we all support.”

“I work in a small town [and] the housing department, DWP, doctors, police, council, other charity services all work very closely together and share resources.”

“We have been providing training/awareness sessions to other services in the local area which has been positive.”

Where challenges were reported, this was linked to:

- The lack of a clear named contact(s) within an organisation
- Little capacity of partner organisations to collaborate
- Long waiting times for responses
- Limited awareness about homelessness from partner organisations
- Difficulties sharing data quickly between organisations.

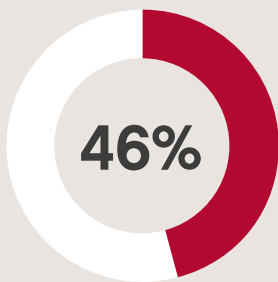
“At the start of the pandemic this was almost impossible services were just closed, they have adapted but it can still be difficult to make contact with a named [worker].”

“Mental health and substance misuse are severely underfunded. Staff do not have the time to build good working relationships.”

However frontline staff noted that there was variety within organisations, and it could depend on the specific individual who was reached.

“It all depends on who is sitting at the other end of the phone line or email.”

In focus: **Supporting people with No Recourse to Public Funds**



of staff found it 'very difficult' or 'difficult' to identify whether an individual they were supporting was eligible to access any public funds or had no recourse to public funds.

- Delays and difficulties communicating with the Home Office and statutory services (assumed due to lack of capacity or resources within these teams)
- Lack of partnership working and free sharing of information and advice
- Gatekeeping by other organisations.

Determining eligibility was described as challenging due to:

- **Language barriers and the need for translators**
- **Difficulties accessing the relevant and valid documentation**
- **Lack of expertise to understand complex and changing rules and systems (e.g. in relation to Brexit, settled/pre-settled status)**

In some areas, partnership working between frontline staff and other colleagues with relevant immigration expertise was highlighted as an effective way to overcome these difficulties:

"If I can't find the information online I phone our local jobcentre who are very helpful, as is the local council dept."

"Local migrant centres in general seem to be invaluable resources, helping people who otherwise totally fall through the cracks and often don't get seen so much by 'mainstream services', who also often don't necessarily understand their needs and entitlements."



In focus: **The EU Settlement Scheme**

On the 30 June 2021 the deadline for most people to apply to the European Union Settlement Scheme (EUSS) passed. This did not affect the majority of frontline workers however for staff whose roles involved supporting individuals with their immigration status it required a concerted effort. Specifically, significant time was spent encouraging individuals to apply to the scheme, gathering documentation, and navigating the system (for instance overcoming language barriers and digital exclusion).



Frontline workers reported that many people secured settled status as a result, which was a positive step in relieving their homelessness. One recommendation was that physical proof of status would further help people who had been awarded status.

“We managed to get a number of people status which in turn has enabled them to claim benefits and move into stable accommodation.”



However, some frontline workers reported delays in receiving decisions from the Home Office for some applications. Furthermore, staff noted that there was a cohort of people who had missed the deadline. These people were likely to have been in particularly vulnerable situations or have complex immigration cases. Frontline workers were therefore still working to pursue decisions, submit late applications where possible, or appeal. This could be time consuming and stressful for people accessing support and staff themselves.

Where people were awaiting a decision, had missed the deadline, or not received settled status this had implications for the support they could access.

“We have also seen lots of people who have applied but are awaiting a decision who are not in receipt of any finances currently as they are stuck waiting [on] an outcome and it’s been months due to the backlog.”

“The government have assured employers, councils, DWP etc that anyone with a pending application has retained their pre-Brexit rights but this message is not getting through. I have had employers refuse to employ people with pending applications, staff at housing and at DWP tell people to come back once they have a decision and a school tell primary aged children they couldn’t come back until they had status. No one understands the system and people are terrified of inadvertently breaking the labyrinth of immigration rules.”

“Some [people] didn’t [apply to the scheme and] they have gone underground now and stopped accessing support out of fear of deportation.”

“More EEA Nationals⁴ who were not found eligible for EUSS are rough sleeping with no route from the street other than being sent back to their country of origin.”

4. EEA (European Economic Area) nationals refers to nationals of any of the EU member states, and nationals of Iceland, Norway, Liechtenstein and Switzerland: <https://www.gov.uk/guidance/homelessness-code-of-guidance-for-local-authorities/chapter-7-eligibility-for-assistance>

The impact of the pandemic and emergency provisions

Frontline workers recognised progress made to respond to homelessness during the COVID-19 pandemic, however further action was recommended to embed this learning and better prevent and relieve homelessness in the future.

In England, there was considerable uncertainty about whether the Everyone In initiative⁵ had a lasting impact, although frontline workers generally felt more positive than negative. Similarly, views varied amongst frontline workers regarding whether the way they supported people experiencing homelessness had fundamentally changed since the COVID-19 pandemic started, though a majority felt that it had.



If you are based in England, has the Everyone In initiative had a lasting impact in the area where you work?



To what extent do you agree or disagree with the following statement: The way that I support people experiencing homelessness has now returned to how it was before the COVID-19 pandemic started.



5. Everyone In: A government response to the COVID-19 crisis, launched in March 2020 and aiming to provide people sleeping rough and staying in hostels and night shelters with safe accommodation: https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/928780/Letter_from_Minister_Hall_to_Local_Authorities.pdf

Specifically, frontline workers praised the steps taken to act quickly and provide emergency accommodation for many people facing homelessness.

“Some people who had never been linked in with support before are now. Those same people were able to start benefits claims and get ID/open bank accounts which they’d been struggling with for years. People have been registered/seen by GPs for the first time in years and the Covid-19 vaccines were managed well in the hotels with good uptake.”

“We have been able to achieve some great outcomes [...] due to the required collaborative working with partners in health. This has no doubt saved a number of lives.”

“It’s made people more aware of how many people are in the UK living ‘below the radar’ with NRPF, who needed to be accommodated; it’s also meant some of them were able to move on into other accommodation or resolve their immigration status.”

However, there were varied experiences across the UK in terms of how long this approach lasted and whether people were able to access and sustain safe and suitable longer-term housing options, as well as support services if needed.

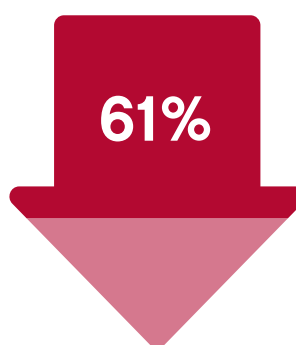
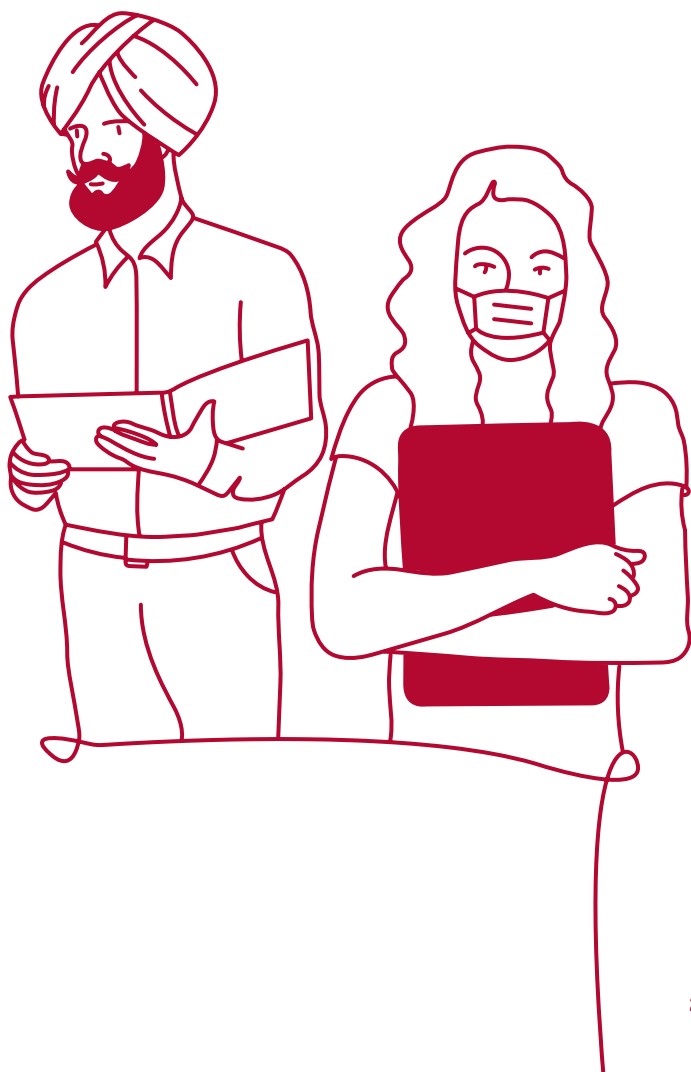
“It showed the government could get thousands off the streets. However, that has now finished, and we are back to [our] Council only providing emergency accommodation if someone has very high support needs.”

“It greatly reduced street homelessness but when it ended the LA [Local Authority] has resorted back to homeless applications and [many people] are not accommodated due to no local connection, not eligible for benefits due to immigration status and intentionally homeless.”

“Everybody In led to getting individuals off the streets and into any form of accommodation be it hostels or non-standard accommodation such as B&B’s and hotels however now we are allegedly in COVID recovery we are now finding that Housing Executive are requiring individuals to leave these accommodations.”

“[Our] Council still have 100 people in temporary accommodation which is positive that they are not back out on the street.”

“Although it has reduced visible street [homelessness], it has not provided any long term sustainable solutions [...] This approach has resulted in hundreds of individuals being placed in inappropriate accommodation (e.g. hostels) long term without correct support to progress to transitional or supported housing.”

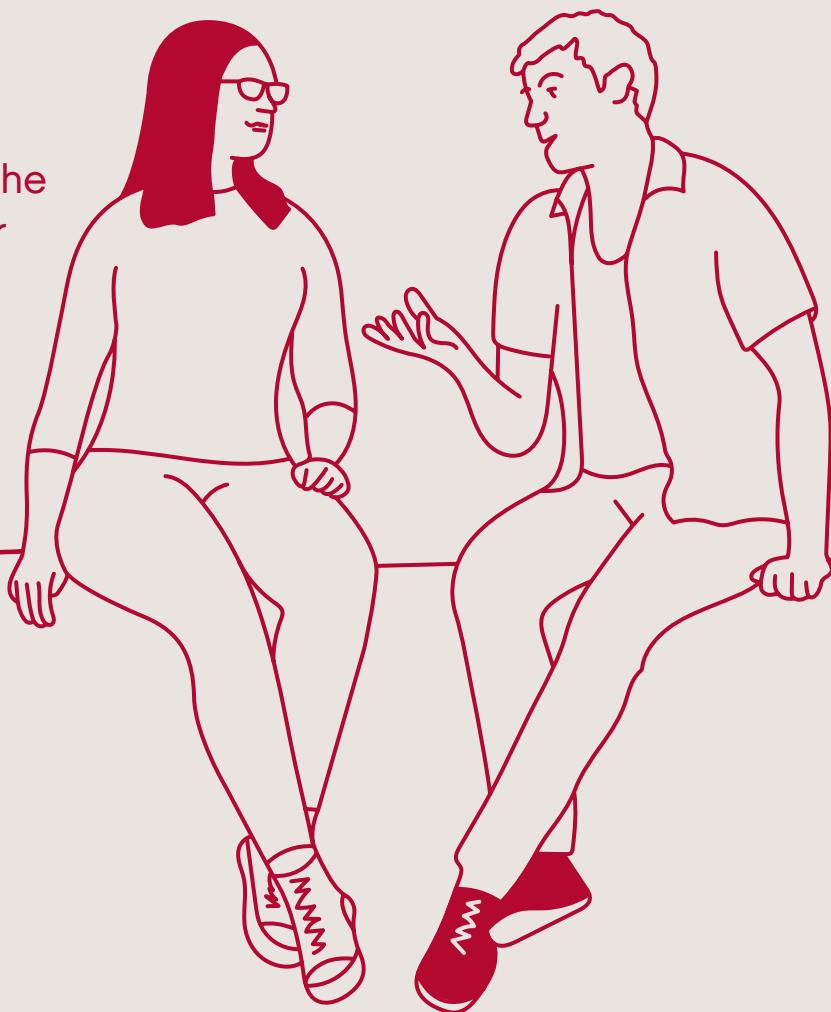


The majority of frontline workers felt that the action their nation’s Government was taking to prevent and relieve homelessness was currently ‘not so effective’ or ‘not at all effective’.

Ultimately frontline staff felt that more needed to be done to address homelessness and build on progress made during the emergency response in the pandemic.

Staff wellbeing

Frontline workers shared the impact of their role on their wellbeing: whilst some organisations led the way with supporting their staff, issues with working conditions, capacity and staff not feeling valued were raised.



General wellbeing

Overall the majority (65%) of frontline workers felt that their role had a negative impact on their wellbeing. This is both of inherent importance and also affects the quality of support available to people facing homelessness, with 76% of frontline workers agreeing that their overall wellbeing affected how they interacted with people they supported.

Impact of frontline workers' role on their wellbeing



Working conditions

The majority (92%) of paid frontline workers were on permanent contracts with the remainder on temporary or zero-hour contracts. However 29% of frontline workers ‘strongly disagreed’ or ‘disagreed’ they felt secure about the future of their job.

“My project is annually funded which may not be recommissioned, this and subpar wages causes a high turnover of staff that [brings] extra pressure and challenges.”

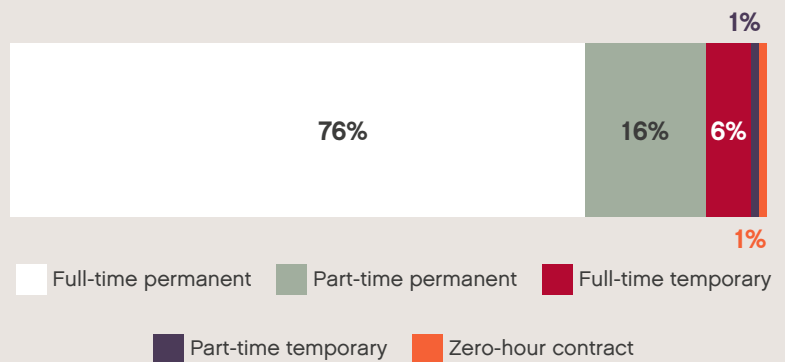
“Instability in contracts affects my clients.”

Approximately half of frontline workers reported that they worked mostly or entirely in person. However COVID-19 continued to affect the working patterns of some frontline staff. Where people worked from home, there were mixed feelings on how this impacted wellbeing:

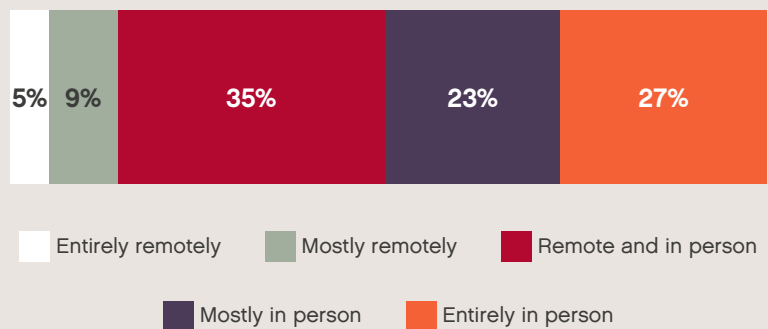
“Since working from home full time, I now have a better work life balance, no time wasted travelling to an office and seeking parking spaces, get more done due to less distractions, can get housework and exercise fitted in whilst still doing my job.”

“Since COVID-19 the blurring between work and home life has been exacerbated due to working from home.”

If you are a paid staff member, which option best describes your employment?



Which of the following best describes how you work?



The nature of frontline work also meant that switching off could be difficult – 17% of frontline workers ‘strongly disagreed’ or ‘disagreed’ that they had a boundary between their work and home life.

“With the work I do, it is sometimes very difficult to switch off at 5pm [...] Crisis usually happens out of hours. I try to keep my boundaries, however, sometimes that isn’t possible.”

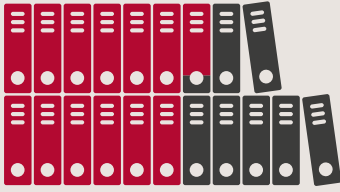
Positively, 93% of frontline workers felt that they had adequate access to the COVID-19 vaccine for themselves⁶. However, 20% of frontline workers still ‘strongly disagreed’ or ‘disagreed’ they felt healthy and safe to perform their role. Only 82% of frontline workers felt they had adequate access to PPE equipment and 82% felt that their organisation was COVID-19 secure.

6. 24% of frontline workers stated their organisation required them to be vaccinated for COVID-19.



Staff capacity

Another key issue raised by frontline staff was a lack of capacity within their role and/or their organisation more broadly.



64%
of frontline workers
rated their caseload
as 'quite high' or
'very high'.

36%
'strongly disagreed' or
'disagreed' that they
had enough time to do
their job effectively.



48%
reported that their
organisation did not
have enough staff
members in post to
deliver services.

"Residents had limited access to services through COVID and still do with some, this put greater pressure on ourselves to cover for those services."

"I have a lot of work to do and I struggle to keep up. It is hard for me to find the time to prepare for annual leave so I take it less."

"A lot of people from the EU have returned home due to Brexit. There are less applications or less viable candidates [...] This leaves remaining staff overworked having to work overtime to cover shifts, leading to issues with staff retention."

"Higher up the senior management line – [there is] no concept of how exhausted and demoralised frontline staff are. Completely unrealistic expectations being put onto frontline staff and their line managers."

Being valued

21%
of frontline workers 'strongly disagreed' or 'disagreed' they felt valued by their employer.

One way frontline staff felt valued was when listened to by managers. However, 22% of frontline workers 'strongly disagreed' or 'disagreed' that they had been suitably consulted about changes to their service during COVID-19. Only 82% of frontline workers felt trusted to make decisions.

Additionally, 21% of frontline workers 'strongly disagreed' or 'disagreed' they felt valued by health, social care and other professionals in their field.

"Sadly sometimes certain professionals, especially health and mental health professionals seem to ignore and disregard the experience of support workers or perhaps they have too little time and resources to provide an appropriately holistic and joined up service."



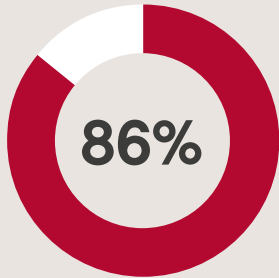
Feeling valued was also in part about financial recognition, particularly within the context of the cost of living crisis.

"I do feel we are highly specialised workers doing a difficult job (technically, emotionally, sometimes even physically) but unfortunately we are not financially compensated enough for the value we bring not only to individual clients' lives but [...] reducing rough sleeping and ASB [Antisocial Behaviour], improving health and criminal justice outcomes for clients and even getting people back into work occasionally – all of which cost the council/the government huge amounts each year."

"[It] would be better to have a higher pay rise to afford food and transport for frontline workers. Many are caught up too as they are also on benefits to supplement their wages."

Organisational support

Reflecting on the support available from their organisations, the majority of frontline workers described their appreciation of their colleagues and managers:



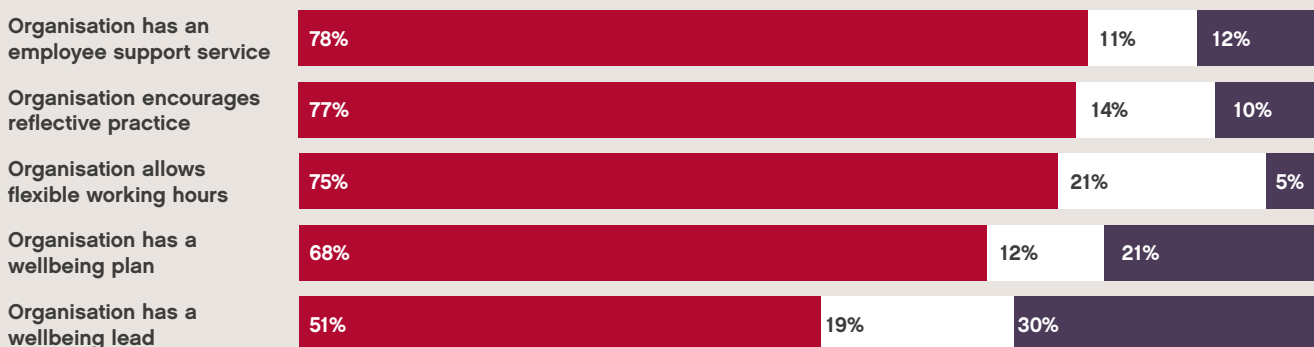
of frontline workers felt supported in their job by their colleagues.



“My team [...] is the best team I have ever worked in. The managers are all amazing at supporting us in dealing with vicarious trauma, having fun together, feeling supported and celebrated. They should be the template for managers of frontline services.”

The majority of frontline organisations had taken steps to support the wellbeing of frontline staff, most commonly having an employee support service and encouraging reflective practice.

■ Yes ■ No ■ Not sure



Please note, totals may not equal exactly 100% where figures have been rounded to the nearest whole number.

However, experiences of organisational support depended on the nature of frontline workers' teams and roles:

“I'm lucky working as a psychologist in a small very supportive team with good management and supervision however I work in partnership with a lot of lone workers and notice how challenging the role is to do alone – it can become overwhelming.”

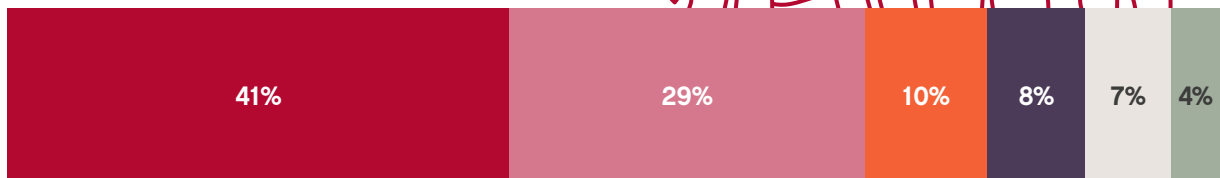
“My current role in the [organisation] I work in is very supportive. All other charities I've worked for have been managed poorly and unfair and unrealistic targets have been put on me and the clients I've worked with (e.g. 'we'll only help you with housing if you do x, y, z and then jump through several hoops first). Housing First is the best model I've worked under and I think it should [be] used in more [organisations].”

In focus: **Staff retention**

Most (70%) frontline workers thought it was likely they would continue working in the homelessness sector long-term.



How likely is it that you will continue working in the homelessness sector long-term?



Very likely Likely Neither likely nor unlikely Unlikely Very unlikely Don't know

In their responses frontline workers planning to stay in the sector credited their enjoyment of this work, the feeling it was worthwhile and that they could use their skills to make a difference.

“There is such a need in this area that I cannot see myself leaving.”

“I like my job. I like the people I support and feel blessed to be in a position where I can genuinely help people.”

Where frontline workers raised concerns about how sustainable it was for them to keep working in this field, factors included the increasingly difficult context they found themselves working within and the negative impact of this work on their wellbeing. Organisational factors also played a role, for example low pay and a lack of professional development opportunities.

“Stress unsustainable due to no housing options [...] but I do love the job [and] if this changes I would want to stay.”

“Pay does not reflect risk, caseload or expertise. [There are] better opportunities for development, remuneration and promotion in other public sector agencies.”

“The role has already had an impact on [my] physical/mental health and family relationships due to the intensity of the work.”

Furthermore, some staff who had worked in the homelessness sector for many years reflected that the situation was the worst that they had seen it:

“I have worked in this sector for 10 years and have seen the negative impact on funding for services being cut especially in mental health services. This has resulted in more complex [...] severe mental health issues presenting for support which I do not feel trained to support.”

“Because the wages have been reduced compared to everyone else over the years by so much and the job security is so bad by remaining in the sector I would just be putting myself and my family at too much risk of homelessness.”

Staff professional development

Frontline workers identified a range of skills, knowledge, training and memberships that could help them work more effectively in their roles.



Skills

Frontline workers described a wide range of skills they felt were important in order to do their jobs effectively. In order of frequency, these were:

- Showing empathy, compassion and care
- Active listening
- Being knowledgeable about homelessness and available support
- Having patience
- Being resilient, determined and persevering
- Being non-judgemental
- Developing trust through honesty and relationship building
- Having good communication and people skills
- Being able to set boundaries
- Having a sense of humour and being friendly.

“Person centred approach – let them lead the conversation and just listen actively!”

“Understanding of the issues affecting [people experiencing homelessness], Homelessness Reduction Act, the available support services and welfare benefits.”

“Relationships are absolute key, these take time to build and continuity is needed. A lot of our clients have seen hundreds of different workers over the years, have often been let down, their trust has been betrayed – be the one that goes the extra mile for them, be honest and don’t overpromise anything. Do what you say you would do!”

“The ability to treat clients with dignity and respect and a sense of humour with thick skin at times.”

“Self motivation, [the] ability to hunt for answers and not to give up. Be non-judgemental, patient and understanding. Be kind whenever possible (it is always possible!).”



84%

of frontline workers ‘strongly agreed’ or ‘agreed’ they had the opportunity to use their skills in their current role.

In focus:
Frontline workers with lived experience of homelessness



21%
of frontline workers either currently or previously used homelessness services themselves.

When asked how lived experience of homelessness intersected with their frontline work, many staff said that it brought benefits as well as some challenges. In terms of benefits, frontline workers shared that they felt their own experiences gave them empathy, understanding, the ability to build relationships and the motivation to improve the support available to people facing homelessness.

“My experience of using homeless services enables me to empathise with those needing similar support. I understand the frustrations when people are desperate and how that can affect how people communicate, also the impact this can have on staff (which can directly impact their attitude towards the person requiring support). My personal experience enables me to challenge such behaviours.”

“Many moons ago, I was placed in homeless supported accommodation. The support wasn’t inclusive or person-centred to my needs. I was very young placed into a dominantly male environment, if they had read my risk assessment, staff would have advocated for me to be placed somewhere else. Things have improved greatly within the homelessness services. I have used my experience to make sure that all clients are happy that their voices are being heard and also that they are in control of the support they require.”

Some frontline workers raised challenges, such as navigating the move from accessing support to facilitating this, maintaining boundaries, and feeling frustrated by situations where they were not able to change systems.

“It can be challenging in that sometimes things happen that cause me to revisit my past or vicariously take on other people’s feelings. It’s also difficult to decide how much to share about my own history, and my golden rule is that I only share something if I feel it will benefit the person.”

“It makes the work more challenging because it’s much harder to walk away at the end of the day and not feel so many of the same anxieties and frustrations I felt as a client. Also I feel like my lived experience means lots of my colleagues still treat me as a client and dismiss lots of things I say.”

“[I] get very angry that living and lived experience doesn’t play the part it should in service design and policy.”

Staff also highlighted that every experience of homelessness is different and circumstances have changed over time, so it remained important to listen to the individuals seeking support first and foremost.

“My experience was many years ago and legislation and the situation with housing has changed radically since then.”



Training

50%+

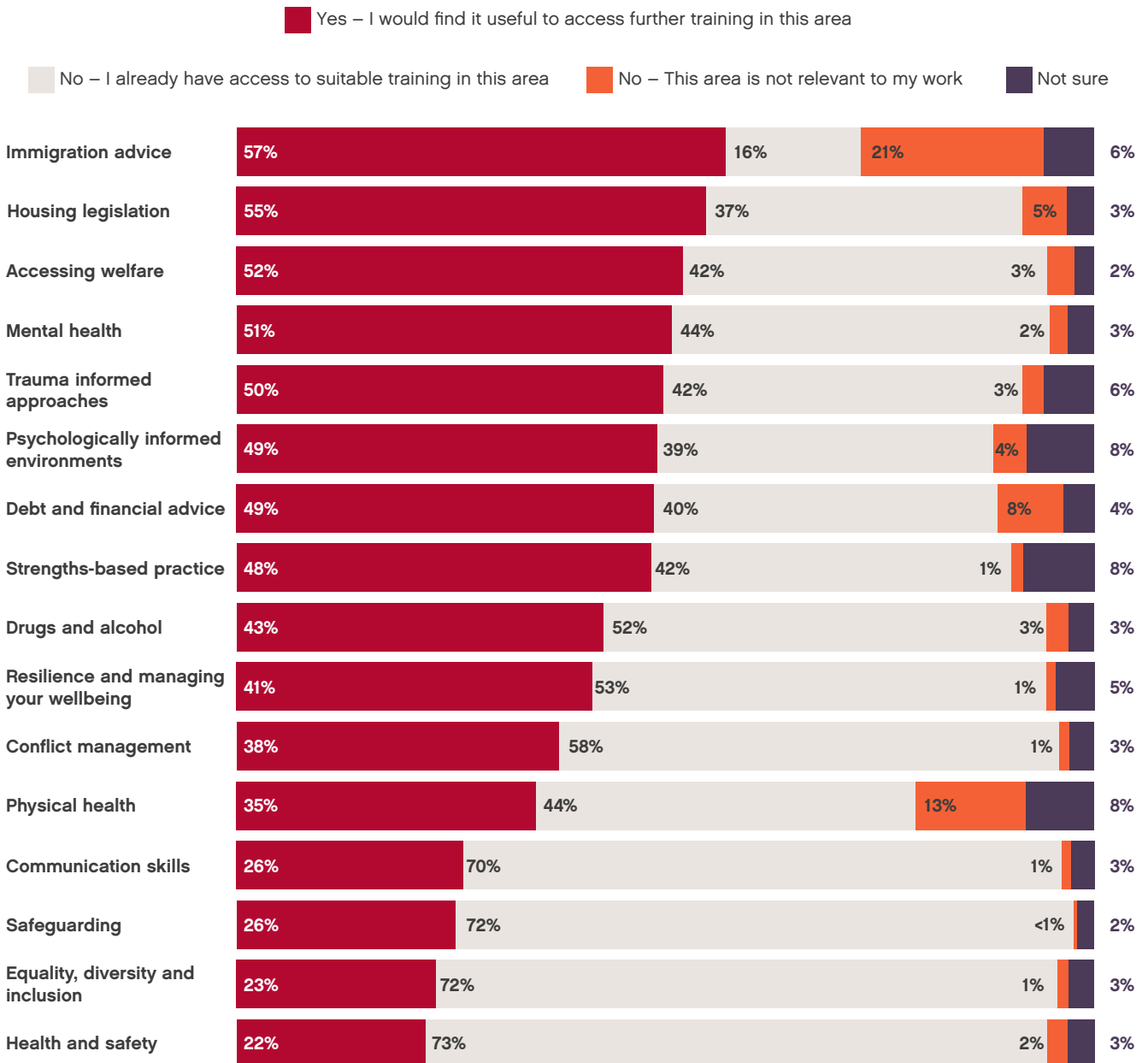
of frontline workers felt that further training on immigration advice, housing legislation, accessing welfare, mental health, and trauma informed approaches would be useful.

70%+

of frontline workers felt that they already had access to suitable training relating to communication skills; safeguarding; equality, diversity and inclusion; and health and safety.



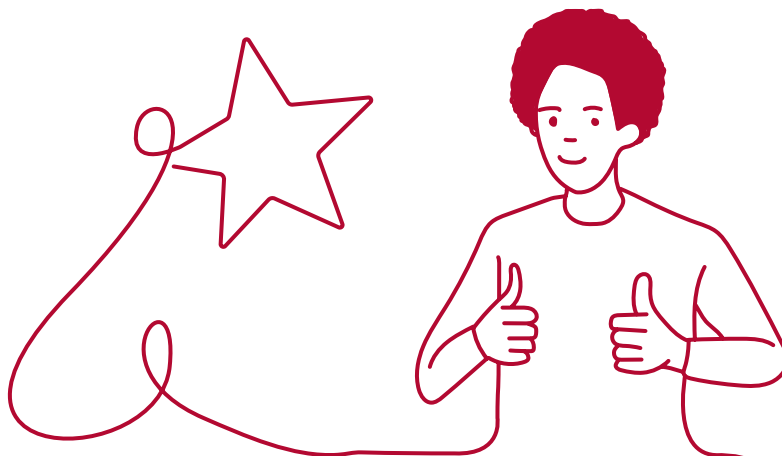
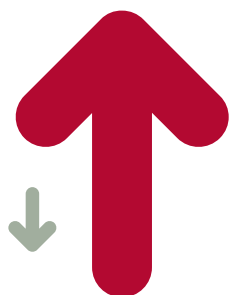
“I have a good knowledge in all areas but it is always useful to have a refresher in areas that are changing such as immigration since Brexit, Mental health has been impacted by COVID-19 as has Physical Health and recent finding and methods of support people would be useful.”



Please note, totals may not equal exactly 100% where figures have been rounded to the nearest whole number.

71%

of frontline workers agreed they had the opportunity to develop new skills, however 16% disagreed with this statement.



Several respondents mentioned barriers to attending training, including the difficulty of managing workload and limited budgets to pay for courses (particularly since COVID-19). The need for longer-term and more in-depth training was also raised. Additionally, it was suggested that partners outside of the homelessness sector could also benefit from training to further their knowledge of this issue.

“Any additional training support is always welcome, but it is difficult to manage workloads when attending training.”

“Pre COVID we had excellent training. Not so great now as I think the budget associated to training has gone to cover other areas where they have been a short fall due to the pandemic.”

“I’ve worked in frontline services [...] for more than 30 years and find that I’m now very frustrated by the lack of training opportunities. There is very little to be gained from watered-down 1 day trauma informed, CBT [Cognitive Behavioural Therapy], MI [Motivational Interviewing] training etc. I would like some longer-term intensive training.”

Memberships

14%

of frontline workers said they were members of a professional body.



In descending order of frequency, the following memberships were held by multiple frontline workers:

- **Nursing related memberships** (this includes the Nursing and Midwifery Council and the Queen’s Nursing Institute)
- **British Psychological Society**
- **The Health and Care Professions Council**
- **Homeless Connect (Northern Ireland)**
- **Social work related memberships** (this includes Social Work England, Social Care Wales, the Scottish Social Services Council, the Northern Ireland Social Care Council and the British Association of Social Workers)
- **Chartered Institute of Housing**
- **Institute of Money Advisers**

The majority (73%) of frontline workers stated they were not a member of any professional bodies and a further 13% were not sure.



Key asks from frontline staff

When asked what additional support or action would help them to prevent and relieve homelessness, frontline workers' responses fell into the following themes:



1. Access to accommodation

The most common area mentioned was improved access to accommodation. In particular, social housing and supported accommodation were highlighted, alongside temporary, emergency and private rented sector accommodation.

It was added that accommodation should be high quality, secure and suited to the needs of the individual. Crucially accommodation had to be affordable, and increasing LHA rates and capping rents were frequently suggested to help achieve this. The need to address other barriers, for instance where landlords were sometimes unwilling to house people receiving benefits was also raised.

“Most people I help are doing everything they can to turn their situation around and its hard for me knowing there isn't enough housing available no matter what they do.”

2. Household income

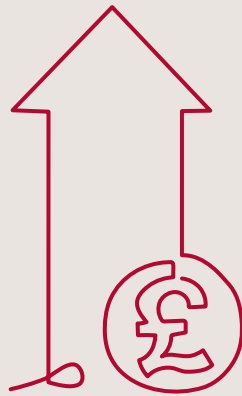
Many frontline staff highlighted the financial challenges facing households they worked alongside, especially as costs of living rose. This made it difficult to pay deposits and rent in advance, and meant people risked entering arrears and facing eviction. More broadly, funds were also needed for furniture, white goods, flooring and adjustments to make accommodation accessible and livable.

Suggestions to address this included increasing Universal Credit, removing the benefit cap and raising minimum wage. Providing more grants with higher upper limits was also proposed.



3. Funding and capacity

Many frontline workers said that there was a need for greater, longer-term funding across the sector, to increase the capacity of staff, improve the quality of support, and enable more prevention work.



“We should be many more officers but funding is lacking so we are struggling.”

“[We] currently [have] year on year funding, [it] would secure dedicated and experienced staff if the funding was available for a 2-5 year period rather than met annually.”



4. Support services

Frontline workers also suggested improvements to the support available to individuals experiencing or at risk of homelessness, removing some of the barriers currently faced such as long waiting lists and digital exclusion.



The most frequently raised point under this theme was the need for more support for people struggling with their mental health, addiction and the effects of trauma.

The need to improve access to many other types of support was also highlighted, including financial advice, legal aid and practical support to help people sustain tenancies. Several respondents suggested the latter could take the form of a floating support or a Housing First model, to provide ongoing, longer-term support.

Additionally, frontline workers stated that more prevention work was necessary, for example supporting young people before they leave care or individuals before leaving the criminal justice system.

“There are a number of preventable and treatable health conditions that are unmet by mainstream health services due to lack of funding and training around homeless specific care. Further, due to staff capacity and limited time to support clients to appointments, the health needs of clients often go untreated and escalate to a crisis point.”

5. Wider policy change



A number of frontline workers said that further policy changes were needed. Some respondents spoke generally about the need for systems change or greater commitment from national and local government to end homelessness, whilst others gave specific policy suggestions.

Of the latter, in addition to points around access to accommodation and welfare described above, suggestions also included greater support for people with NRPf, decriminalisation of drugs, fewer custodial sentences and less stringent rules on intentionality and local connection.

6. Working conditions and support



Frontline workers also recommended improvements to conditions within their workplace, in order to support their wellbeing and their ability to work effectively. In descending order of frequency these were:

- Improvements to pay and conditions (e.g. flexibility to work remotely, flexible hours)

“An increase in pay. I have not had a pay raise in 10 years and am now finding it harder to pay my bills which is causing me worry.”

“Better pay in this sector to attract applicants. There are widespread issues with recruitment as the salary does not pay enough. It is a difficult, albeit rewarding, job and many could get the same pay in a supermarket with less stress.”

- More supportive management, especially at a senior level (e.g. recognising challenges and successes, good communication, less focus on targets, opportunities for professional development)

“Communication from senior management. Having my opinion taken into consideration. Opportunity to develop within the department/organisation as a whole.”

“Less focus on targets that are very difficult to meet because we are working with people at vulnerable times in their lives.”

- Practical changes to encourage good wellbeing (e.g. improvements to work routines and spaces, more team socials)

“More co-operative working and inclusion of wellbeing hour or similar, inclusion in wellbeing activities like yoga and mindfulness regularly.”

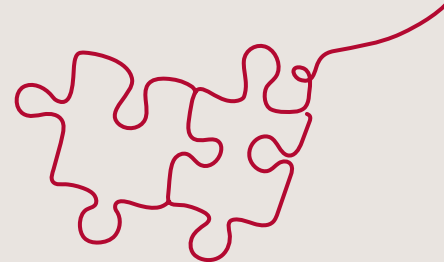
“A decent room to sit in, natural light, appropriate chairs, nice consultation rooms.”

“A focus on rebonding the team post-lockdown. There’s a definite dip in mental health amongst teammates.”

- More reflective practice and supervision

“Having somewhere safe to talk about how upsetting it can be and not feeling like you are being judged as incapable or incompetent would help refresh and shake off some of the burdens.”

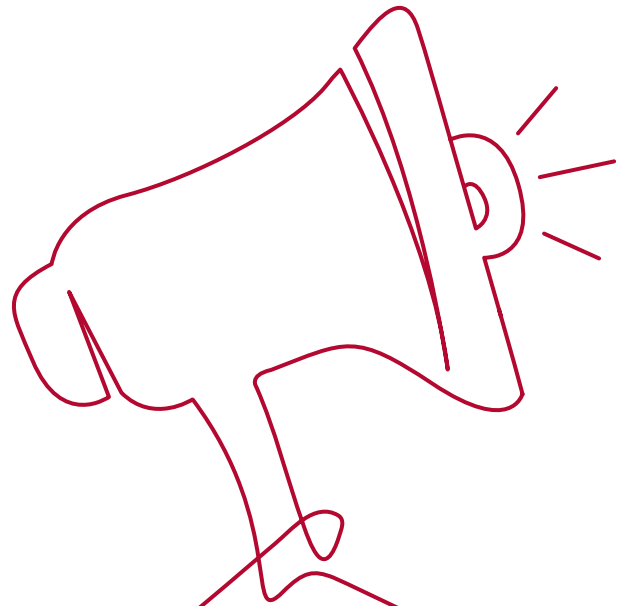
7. Collaboration



Lastly, frontline workers also highlighted the need for greater collaboration across the sector and wider society to address homelessness. This included listening to frontline and lived experiences of homelessness to inform decision making, and taking joined up action to help prevent and relieve homelessness at scale.

Call to action and commitment

Through their survey responses, frontline workers have identified a wide range of challenges and best practice relating to homelessness. Summarised below are three key areas we are committing to working on over the coming year, and calling on others to join us in taking forward.



Overcoming barriers to support

Frontline staff reported significant challenges in accessing mental health support for people they worked with, which affected their ability to prevent and relieve homelessness.

We are calling for further evidence of what works when supporting people experiencing homelessness to access mental health services.

We are committing to analyse the evidence we receive and use it to inform a grant round making funding available to scale up work in this area.



Investing in workforce training

Staff identified immigration advice, housing legislation and accessing welfare as top areas in which they would value further training to help them work more effectively.

We are calling for commissioners and funders to recognise the importance of investing in staff development, ringfencing specific funding to enable this.

We are committing to run a series of training sessions for frontline workers across the four nations to learn about topics identified as priorities in this survey.





Improving staff wellbeing

Frontline workers described how their roles could negatively affect their wellbeing, with knock on impacts for their ability to support others.

We are calling for support providers to address the consistent issue of poor wellbeing, by listening to frontline recommendations for organisational support.

We are committing to share further information about what works to support frontline worker wellbeing, for example by monitoring the impact of tools such as reflective practice.

At the time of writing, work on moving these priorities forward has already begun. Survey results have directly informed the design of our 2022 Frontline Network Conference, with training sessions responding to key themes raised in the report such as immigration and homelessness and access to welfare during the cost of living crisis. We have also submitted relevant survey data to numerous calls for evidence and government consultations across the UK, to further amplify frontline insights amongst decision makers.

We look forward to sharing updates on our work with you as it progresses and invite you to get involved.

Get involved

Decision makers

The findings of the Frontline Worker Survey 2021 are relevant to decision makers across the UK. This includes:

- Governments
- Local Authorities
- The Department for Work & Pensions
- Landlords (Private and Social)
- Frontline Organisations

We call on decision makers to review the learning shared in this report and respond to insights from frontline and lived experiences of homelessness. Please get in touch to discuss these findings and how they can be taken forward further.

Frontline workers

Thank you for taking the time to share your knowledge and experiences. Your insights are central to our work at the Frontline Network. Please do share this report with your colleagues in the sector and let us know any feedback.

If you haven't already, visit our website www.frontlinenetwork.org.uk to learn about the funding, community and resources available to support you in your frontline work. You can also **sign up to our e-newsletter** to hear updates from the Network.

Be social



1. [Click here to tweet the report](#)



2. [Click here to email the report](#)



3. [Get in touch with the Frontline Network team by emailing \[frontline@stmartinscharity.org.uk\]\(mailto:frontline@stmartinscharity.org.uk\)](mailto:frontline@stmartinscharity.org.uk)

Appendices

Appendix 1 – Methodology

The Frontline Worker Survey 2021 is the most extensive survey of frontline staff working with people experiencing homelessness across the UK. The survey was created online using Survey Monkey and distributed through the Frontline Network’s communication channels as well as via partners working in the sector.

The survey included 47 questions. A mixture of closed and open questions were used to gather quantitative and qualitative data. Open questions provided space for frontline workers to give more detailed feedback and

raise any other related points. These responses were then coded against recurring themes during analysis and direct quotes from frontline workers are embedded throughout this report.

826 frontline workers responded to this year’s survey, between the 10th of November and the 8th of December 2021. Not all participants answered every question, and Appendix 3 outlines the full list of questions and the total number of respondents for each.

Appendix 2 – About participating frontline workers

Location

Frontline workers from across all four nations of the UK responded to this survey. Overall, 72% were based in England, 11% in Scotland, 10% in Wales and 7% in Northern Ireland. The majority of frontline workers worked in large urban areas such as a city or large town (75%), and a smaller number were based in small urban areas (28%), rural areas (15%) and coastal areas (10%).

Role

The most common job titles shared by frontline workers were Support Worker, Project Worker and Housing Support Worker. Other staff worked in specialist roles focusing on providing a particular type of support, for example as a Benefits and Employment Adviser, Housing First Women’s Specialist, Palliative Care Nurse, Debt Adviser, Mental Health Social Worker, Probation Officer, Independent Modern Slavery Advocate and Domestic Violence Advisor.

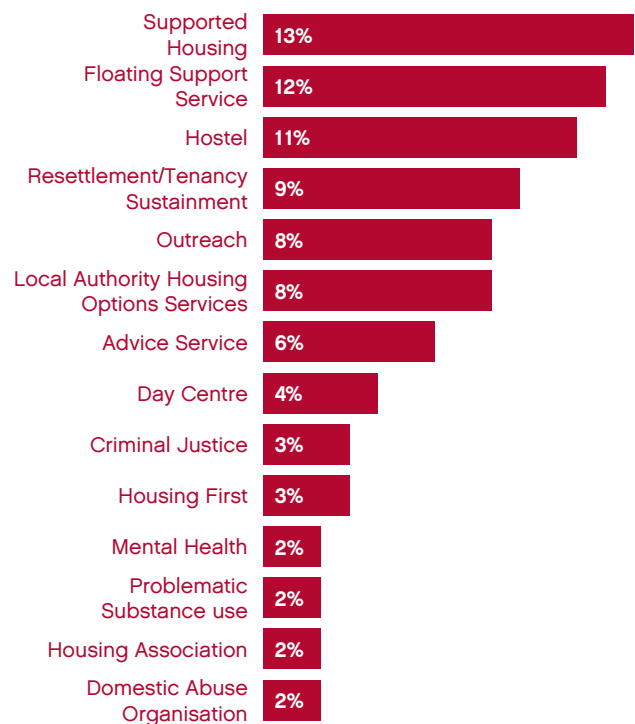
The overwhelming majority of frontline workers responding to this survey were paid staff members (99%), however this year the survey was also open to and received responses from a small number of volunteers who supported people experiencing homelessness.

Organisation

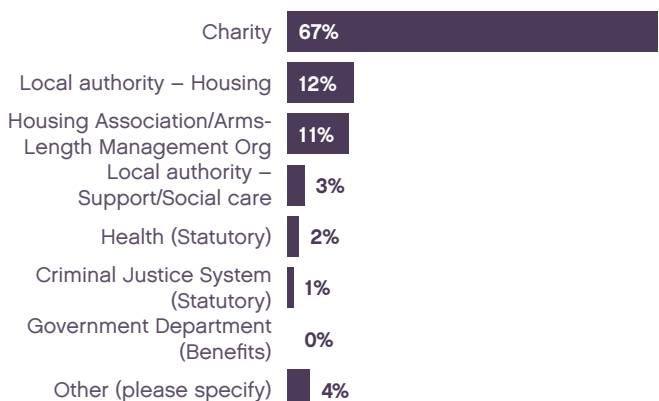
Frontline workers were based at a wide range of different services. Supported housing, floating support services and hostels were most commonly represented. Two thirds of frontline workers worked in a charity, and amongst these staff 48% delivered commissioned services (funded by the local authority), 23% delivered non-commissioned services and 29% delivered both.

63% of frontline staff worked in a large organisation (over 100 employees), 19% worked in a medium sized organisation (30-100 employees) and the remaining 18% worked in a small organisation (fewer than 30 employees).

Which of the following best describes the type of service you work in?⁷



Which of the following best describes the type of organisation you work for?



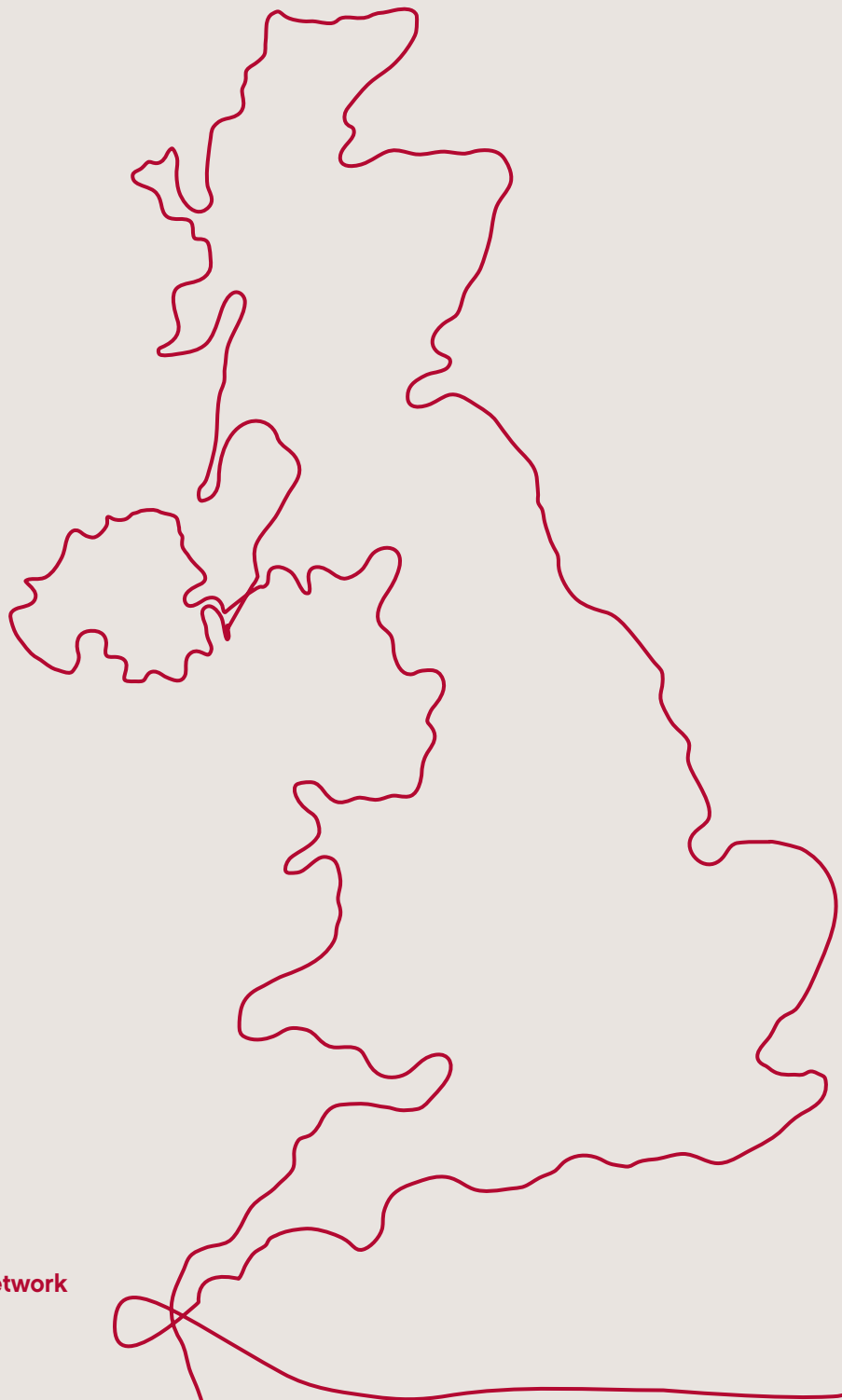
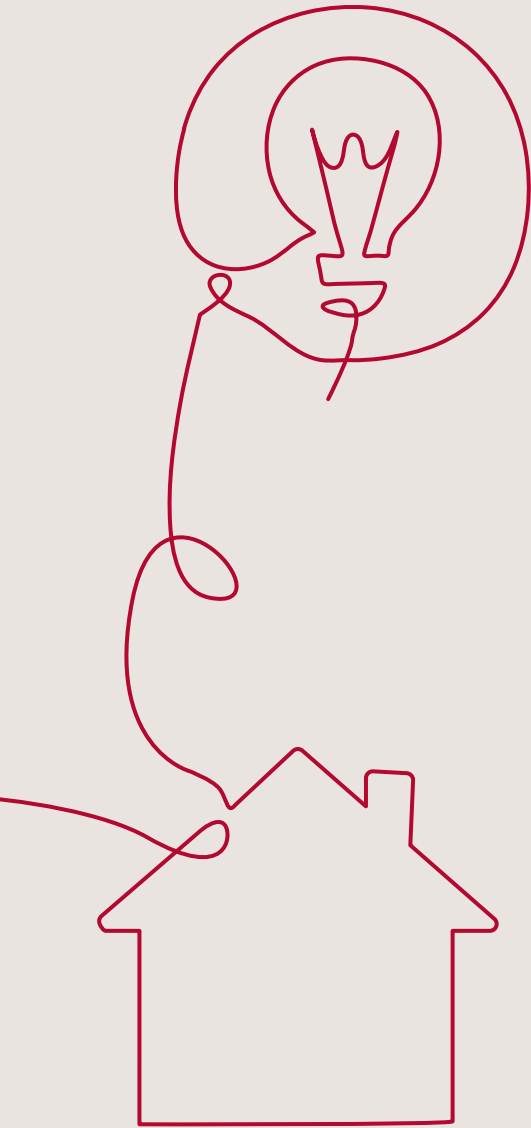
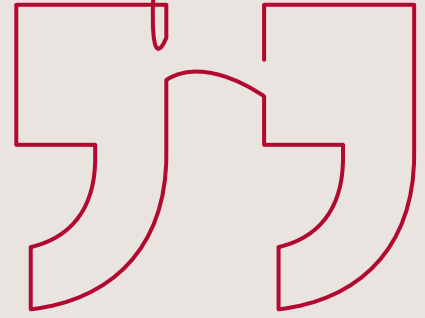
7. Please note, in this headline summary only service types selected by 2% or more of survey respondents are shown.

Appendix 3 – Survey Questions⁸

1. Please state your job title [826/826]
 2. Do you have a 'caseload' that you are the lead worker for? [826/826]
 3. Are you a volunteer or paid staff member? [826/826]
 4. If you are a paid staff member, which option best describes your employment? [817/826]
 5. Which of the following best describes how you work? [826/826]
 6. Are you or have you previously been a user of homelessness services? If yes, has your experience of using homelessness services brought any particular benefits and/or challenges to your frontline work? [826/826]
 7. Which of the following best describes the type of service you work in? [808/826]
 8. Which of the following best describes the type of organisation you work for? [808/826]
 9. If you work in a charity, what kind of services do you deliver? [632/826]
 10. Which of the following best describes the size of the organisation you work for? [808/826]
 11. In which part of the UK is your service based? [808/826]
 12. If England, in which region is your service based? [576/826]
 13. If England, in which local authority is your service primarily based? (E.g. county council, district council, unitary authority, metropolitan district, London borough) [546/826]
 14. If Scotland, where is your service primarily based? [93/826]
 15. If Wales, where is your service primarily based? [84/826]
 16. If Northern Ireland, where is your service primarily based? [56/826]
 17. In what area is your service? (Please note you can tick more than one area). [808/826]
 18. Have you seen an increase or decrease in the number of people you work with from the following groups in the last 12 months? [685/826]
 19. Are you supporting individuals who have experienced homelessness as a result of their immigration status? [685/826]
 20. How easy or difficult is it to identify whether an individual you are supporting is eligible to access any public funds or has no recourse to public funds? [685/826]
 21. How would you rate the following in your current role? [685/826]
 22. Is it easy or difficult for you to access support for the people you work with in the following areas? [685/826]
 23. How easy or difficult do you find obtaining the following for the people you support? [627/826]
 24. What housing options do you have available if someone is not eligible to access public funds as a result of their immigration status? [495/826]
 25. Has the freezing of Local Housing Allowance (LHA) rates in April 2021 affected your ability to find suitable affordable housing for the people you support? [478/826]
 26. How do you most frequently ensure the people you support have the furniture and white goods they need? [600/826]
 27. What has been the impact of the withdrawal of the £20 uplift to Universal Credit in October? [618/826]
 28. How easy or difficult do you find it to access the following health services for the people you support? [618/826]
 29. When accessing support services, have you observed that any of the following areas present barriers? [618/826]
 30. Has the Everyone In initiative had a lasting impact in the area where you work? [600/826]
 31. On the 30 June 2021 the deadline for most people to apply to the EU Settlement Scheme passed. What has been the impact of this on your work? [425/826]
 32. To what extent do you agree or disagree with the following statements: [600/826]
 33. How easy or difficult do you find building partnerships with the following types of organisation? [600/826]
 34. The action my nation's Government is taking to prevent and relieve homelessness is currently: [600/826]
 35. This winter, are you concerned that any of the following will impact the people you support? [600/826]
 36. What key action would you like to see the Government (in your nation or the UK as a whole) take to address homelessness? [456/826]
 37. Do you have any examples of best practice or resources that you have found helpful in your work? [605/826]
 38. What is the impact of your role on your wellbeing? [591/826]
 39. Thinking about your current role, please indicate how strongly you agree or disagree with the following statements: [591/826]
 40. Please tell us whether your organisation: [591/826]
 41. What would be most helpful for improving your wellbeing at work? [300/826]
 42. How likely is it that you will continue working in the homelessness sector long-term? [591/826]
 43. Please answer the following questions about your engagement with the Frontline Network to date: [578/826]
 44. Are you a member of any professional bodies? (E.g. Chartered Institute of Housing, Probation Institute) [565/826]
 45. What skills do you need to support and engage someone experiencing homelessness to get the best outcome for them? [362/826]
 46. Would you find it useful to access further training in any of the following areas? [564/826]
 47. What additional support (financial or otherwise) would help you to prevent and relieve homelessness? [257/826]
-
8. Please note, question wording has occasionally been amended in the write up of findings in line with good practice for language around homelessness.



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