Working to turn off the tap: the role of frontline services in addressing homelessness

Tool Kit

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About this tool kit

This toolkit is one of the outputs from a study undertaken by the Centre for Housing, Urban and Regional Planning at the University of Adelaide for the Department of Families, Housing, Community Services and Indigenous Affairs into the role of frontline services in addressing homelessness.

For the purposes of this project, frontline services are considered to be first response services that serve the needs of the general community. In broad terms, frontline services can be considered to be ambulance services, the Emergency Departments of hospitals, police service, bailiffs and fire services.

However, this study has focussed on just three:

- Ambulance services;
- Emergency Departments of medicine; and,
- Police services

As they are the most critical services that serve as a first response to a range of crises and have frequent contact with the homeless.

This toolkit sets out to shape an agenda for reform. It acknowledges that frontline services have considerable potential to make a substantial contribution to addressing homelessness in Australia.

Unfortunately, that potential is not currently being realised. There are many, many examples of good practice with reference to frontline services and the homeless but too often the issue is ignored, or given little priority within the frontline service.
Often individual officers or other staff make a real difference to the lives of the homeless they have contact with, but too frequently that impact is limited to the efforts of a few individuals and the period of their posting to that Emergency Department or police station.

We need to map out systematic approaches that empower frontline services to take a more forward looking approach to homelessness. This means the development of systematic approaches and structured responses that integrate assistance across departmental silos and tiers of government.

And the responsibility for finding solutions does not just lie with frontline services. Specialist homeless services need to go to greater efforts to establish meaningful dialogue with the frontline services in their region. Communication is always a matter of exchange and both parties need to be willing to look for solutions. One of the clear findings to emerge from our research, was the important role frontline services play in underpinning the work of homelessness services.

On occasion, the relationship between frontline services and specialist homeless service providers can be strained or entirely absent. But each type of service needs to play their part and must be willing exchange ideas if Australia is to achieve its goals with respect to homelessness.

This tool kit is divided into five sections:

- Police
- Ambulance
- Emergency Departments
- Homelessness Services
- Interagency Working

The purpose of the tool kit and its attendant sections is to raise issue for consideration in each of the agencies. The tool kit should be used as a guide to inform the strategic thinking and the operational plans of frontline services and homelessness services alike. In some respects, the toolkit should function as a bridge that links services and highlights points of contact in the missions of all types of organisations.
One of the key themes to emerge from our research has been the fact that to date relatively little attention has been paid to the role of frontline services in addressing homelessness. This gap represents a substantial missed opportunity, as frontline services are present throughout society, constitute a significant proportion of government service delivery and have on-going – and often frequent – contact with the homeless. Despite this important, this is a topic about which very little has been published and which does not appear to be prominent in the planning and development of many frontline services.

Greater government attention has the potential to generate substantial benefits. Currently frontline services and their staff attempting to assist homeless people – or merely interacting with them as part of their normal duties – are confronted by a lack of skills in this specialist area; a potentially chaotic working environment that is often attuned to meeting acute needs rather than chronic issues; and, an adverse external environment where many of the resources needed to deliver solutions – such as access to affordable housing – are simply missing.

In many ways, the absence of prior attention to the interaction between frontline services and homeless people simply creates considerable opportunities for policy innovation and improvement. The case of SupportLink, discussed as part of the ACT case study, highlights the potential to improve outcomes for homeless people by developing new approaches and strategies. SupportLink may, or may not, be a solution to many of the challenges confronting homeless people and their dealings with the police, but it unequivocally highlights the potential benefits of new approaches.

The research has highlighted a number of specific issues to be addressed:

- At a policy level, policy makers need to resolve the conundrum around the part to be played by the police in preventing homelessness. If law enforcement duties are to co-exist with expectations of the police as enablers out of homelessness, the expectations of officers made clear. Consistent response is needed and direction needs to be offered to the police on the ground. Policymakers should also focus attention on the broad issue of risks from volatile persons and an effective and appropriate protocol developed. Some jurisdictions have developed such protocols, elsewhere they are absent. Currently this seems to be an area of inadequate policy guidance.
• Policymakers need to formulate policy on homelessness with both short and long term time horizons. While prevention and early intervention will have impact, in the short term, and possibly longer, homeless people in crisis will continue to have interactions with frontline services. To acknowledge this reality is not to dilute a commitment to systemic policy outcomes. **Frontline services are a current and continuing part of the landscape of homelessness.** This truth needs to be incorporated into the planning and expectations of policymakers as well as frontline staff, and their role therefore needs to be shaped accordingly.

• People who are homeless are very interested in engaging in conversations about how they experience the system and have ideas about how the system. They would like to see their ideas about how the system may be improved incorporated into policies and programs. Policy makers need to make more effort to consult directly with homeless people as they seek to design systems of support for them.

In conclusion, the Australian Government has set ambitious targets to halve homelessness and provide services to homeless people within a relatively short time frame. The further development of the homelessness sector has been an important component of the government’s strategy to achieve this goal, along with substantial investment in additional housing stock. **We conclude that the Australian Government’s priorities will be significantly advanced if greater policy guidance is given to frontline agencies in their dealings with the homeless and that this policy attention is matched by targeted funding for training, and some additional facilities.** This policy attention needs to be matched by further investment in affordable housing for vulnerable people. Overall, frontline services remain some of the most important providers of services to the homeless, and every effort should be made to maximise the long term gains from the goodwill of many officers as well as the already substantial investment.
We need to map out systematic approaches that empower frontline services to take a more forward looking approach to homelessness.
The police services, often have more to do with the homeless population than any other frontline service. They are a critical agency for the delivery of first-response services to homeless people, and also have an important role in the longer term health and well-being of this vulnerable group. In many jurisdictions, police services already play a pro-active role in addressing homelessness, with the NSW’s Governments’ homelessness protocol an important example of the benefits from such initiatives.

Senior police officers giving priority to the issue of homelessness would be the most critical innovation that could take place at the interface between homelessness and the police services. Leadership from above, will direct all officers to take a more active role in searching for solutions to the challenges confronting the homeless. In part, greater police attention on solving the challenge of homelessness is simply good policy: significant public expenditures could be saved if police services and other parts of the law enforcement system had less time taken up by the issues associated with homelessness.

Training in homelessness issues for the police is one of the great opportunities to improve society’s response to homelessness. Key areas of training include:

- Instruction in intercultural aspects of homelessness, and this is recommended for all officers. Such training will reinforce their potential roles and strengthen decision making capacities.
- Effective training is also needed for police in responding to cases of challenging behaviour. Regardless of whether the context is a mental health crisis or an impaired ability to communicate, on-going training on interactions with homeless people is needed to continue to build the capacity to respond effectively and appropriately as required.
• The provision of basic contact information for homelessness facilities and services needs to be made available to all officers.
  o This resource could be common to all frontline services. In Victoria, police should be aware of, and refer clients to, the 1800 Homeless Gateway service and the same principle applies in other jurisdictions.
• In part, the police service needs to continue to orient officers into a culture that has respect for homeless people.
  o One option would be to establish liaison officers to work between homeless people and specialist services. Such initiatives would recognise that simply arresting and/or moving homeless people on will not resolve long term issues of law and order or homelessness.
Specialist services may have a role to play in supporting police officers in their work with the homeless. Organisations such as SupportLink – which is based in the ACT works in a number of jurisdictions – demonstrate how existing technologies can ensure better outcomes for homeless people.

Police services need to seek out engagement with homelessness services and policy makers. They need to make themselves aware of current policy settings and how specialist supports for the homeless are delivered on the ground.

In areas with significant Indigenous populations, police services should ensure that a more local or area-based model for policing of open space is created to enable officers to come to know homeless people on a more personal level. In addition, more Community and Aboriginal Liaison Officers are needed, and these individuals should have the benefit of training about homelessness for all police. Police, as part of their orientation in a new community, should spend time at gateway and homelessness services. On-going education in homelessness could be included in the programs of every patrol.

There is strong evidence that in a number of jurisdictions the protocols for the release of persons detained by the police need to be reviewed, with issues of timing, respect and safety adequately examined.
The police services, often have more to do with the homeless population than any other frontline service.
Ambulance services would benefit from their participation in Interagency Working Groups. The ambulance services have important experiences and perspectives to share with our agencies, including specialist homelessness services.

While the period of contact between ambulance staff and homeless people is often very short, there may be repeat contacts and there remain issues around access to hospital, the cost of ambulance services and better integration with other services.

Ambulance services should nominate a senior officer to review and consider the level of interaction with people who are homeless with a view to improving practice, building stronger relationships with specialist services, identifying unnecessary call outs and identifying ways these might be avoided.

As with the police, training for ambulance staff should include material on the nature, experience and risks of homelessness. Such induction would help to strengthen professional decision making and manage risk.

Ambulance staff should be aware of, and be willing to refer clients to, the 1800 Homeless Gateway service as appropriate to minimise returns to homelessness. As a first step, integration of this service into the ambulance triage system, if not already achieved, should be investigated to add precision and efficiency to service responses.

In some jurisdictions, homeless people run the risk of generating substantial debts associated with ambulance costs. In these places attention should be paid to educating the homeless on ways of avoiding such debts.
Emergency departments are both important services for homeless people and one of the few agencies where the period of interaction with the homeless may be relatively extended. *Such extended interaction generates both the potential for, and opportunity to deliver, innovative responses to homelessness.*

It is critical that Emergency Departments should work with other stakeholders to share in the planning of a response to crises of volatile behaviour so that an effective strategies are available as needed.

Emergency departments also need to use current and future information resources in order to make timely referrals to specialist services, including homelessness services. In part this calls for the development of working relationships across hospitals, government departments and homelessness services that ensure that key hospital staff remain fully informed of initiatives.

Emergency Departments need to ensure support, advocacy and discharge planning for homeless clients in order to avoid the inefficiency and cost, human and economic, of homeless people not being treated, or not being fully treated, or being discharged into homelessness. In many instances these services are provided, but not always and not in all locations. One of the great challenges is that homelessness is not just an issue for the inner city, or even the metropolitan regions. The rate of homelessness is highest in some non metropolitan regions, which means that both the major metropolitan hospitals and the smaller country facilities need to consider their homelessness strategies and actions.

*Medical advocates based in homelessness agencies and social workers based in hospital emergency rooms should become the new norm in Emergency Departments.* Where the size of the hospital means that it is not practical to provide such a service 24 hours a day, 7 days a week – or even during normal business hours – such services could be provided via telephone
or internet link. New technologies offer great promise of efficiencies in health, and similar approaches could be applied to social services.

In all circumstances, Emergency Department staff need to be aware of, and be willing to refer clients to, information portals such as the 1800 Homeless Gateway service as appropriate to minimise discharge into homelessness. Training in risk management and responses to cases of challenging behaviour, mental health crisis or impaired communication whatever the context should be explicitly linked to training on interactions with homeless people to continue to build staff capacity to respond effectively and appropriately as required.

Emergency departments should review the role that security personnel play in their interactions with people who are apparently homeless. Maintaining security in Emergency Departments is a critical issue. But at the same time, protocols are needed to ensure that the homeless are not excluded from health services because of the appearance of risk. Finding a balance between these two imperatives will not be easy, but key steps to finding a workable solution will include appropriate training for security staff, on-going reporting and monitoring of the situation and the sharing of good practice.

Whole health assessments are needed for homeless people, who may have multiple health issues. Such an approach is far preferable to simply dealing with the presenting issue. Regular, scheduled clinics for the homeless could be trialled and included in funding negotiations with the relevant Departments of Health. In addition, patients should be offered food and or drinks during long wait periods in Emergency.
Importantly, interagency co-ordination needs to be instituted between the frontline services and homelessness services and relevant departments. This research has reinforced the view that current services are available on a patchy basis, are not well known or understood by frontline personnel and give the appearance of poor co-ordination. The Queensland Government should consider identifying a designated contact person in each key region with the authority to bring relevant people together to ensure better coordination of frontline services and specialist agencies.

The need for an integrated approach to the challenges confronting homeless people was acknowledged by many informants – police office, emergency department staff, homeless persons and the providers of homeless services alike. One of the clear messages to emerge from this research was that current arrangements do not allow for the sharing of information across agencies, and this is a major impediment to inter agency solutions. It would be desirable to explore protocols for sharing additional information amongst agencies, without prejudicing the privacy of individuals.

Homelessness services need to continue to develop seamless interaction between agencies remains a high priority. Information sharing, shared data bases, co-ordinated responses and increasing collaboration at local and regional levels through case conferencing, roundtables would greatly assist in maintaining closer and more consistent relations with frontline services. Importantly, specialist homelessness services need to reach out and build stronger relationships with the frontline services that operate within their locale so as to improve support for, and the treatment of, people who are homeless thus enabling them to exit homelessness. This should include services like Centrelink and local housing authorities.
**Interagency collaboration** is not the responsibility of frontline services alone. Homelessness services should seek out opportunities to interact with senior police, senior ambulance personnel and the Heads of Emergency Departments of Medicine. These meetings could be used to:

- develop a dialogue around processes of working with homeless people; and,
- offer examples from other jurisdictions where cooperation and service protocols have had positive impacts.

Further, the impact of the absence of information sharing should be closely examined, and consideration given to changing guidelines, or approaching the Australian Information Commissioner for a modification to current privacy requirements.

**It is important that mental health services are involved in the establishment and on-going management of interagency collaborations.** Numerous respondents noted the importance of such services for persons in crisis and reported that it was often difficult to gain access to such services when they were needed. The reality is, the economics of service provision precludes the provision of mental health services on ‘stand by’ but better solutions must be possible.

In a number of the case studies homeless persons commented on both the importance and effectiveness of Centrelink and its staff. In some instances these services were seen to have a positive impact, elsewhere the outcomes were presented as negative. This variation was typical of the wide range of views homeless people held about most services. Clearly, **Centrelink is an important agency that effectively serves as a frontline service because of its role in sustaining incomes.** Centrelink has already invested in the training of its staff in the use of a homelessness ‘flag’, and there would appear to be a strong case for further staff development in dealing with homeless persons. As an agency, they could provide information to individuals on access to services and assistance and should be central to interagency working.
Interagency Working