

Supported housing needs assessment

Executive summary for Hull
City Council

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Homeless Link

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The following is a summary of the main findings from the research, followed by the main recommendations arising from these.

Findings

Current supply

- Current supply is largely categorised as low to medium levels of support, which is in stark contrast to the levels of assistance required by service users.
- Only 43% of providers routinely offered any resettlement support to residents moving on.
- A significant proportion of existing supply is in self-contained properties which provides a significant degree of flexibility, when looking how they can best contribute to the overall strategy.
- On average there are three other agencies involved in providing support to each supported housing service user.
- Generally, access to the external services needed is good.

Referrals

- 36% of referrals were through Housing Options and 16% were self-referrals.
- Only 43% of referrals results in a placement with that support provider. A further 25% were accepted in principle but had not actually moved in during the year.
- Based on Housing Options data, we estimated that the number of unique individuals was 62% of the total number of referrals made.
- In the judgement of Housing Options case workers, supported housing is the best solution for only 15% of single household duty cases with identified support needs

Profile of service users

- 21% of supported housing service users are between 18 and 25, 40% are female, and 11% are from an ethnic minority.

- 71% of supported housing service users have a disability or long-term health condition.
- 50% of service users have a diagnosed mental health condition.
- 40% of service users have an experience of domestic abuse.
- We would describe 11% of service users as having multiple and complex needs.
- 24% of service users are described as significantly vulnerable to exploitation or abuse. This is also clearly linked to the need for longer-term supported housing or ongoing support after moving through supported housing – with 83% of these users needing one of these categories of services.
- 25% of service users were either living in an independent tenancy or with their family immediately prior to moving into supported housing.
- The most common reason as to why it was thought that people needed supported housing was that they were vulnerable to exploitation or abuse and were in need of a safe and secure living environment.
- In 55% of cases, the fact that they had no alternative to choose from was a factor in why they moved into supported housing. For just under half of those cases this was effectively seen as the only reason they moved in.

Outcomes

- Nearly 40% of the people leaving supported housing did so because they were evicted or abandoned the property.
- Overall, only about 40% of the people who might be expected to move out to settled accommodation did so in the year in question. This is because of the high level of evictions/abandonments and the difficulties finding suitable move-on accommodation.
- We calculate that the average length of stay required in transitional housing as being nine months.
- 37% of people were judged as ready to move on at the snapshot date.
- 59% of those ready to move were finding it difficult to find appropriate accommodation. The lack of engagement from service users was seen as a more significant reason than questions of affordability.
- 76% of users were thought to need some form of independent settled housing as their next step, but half of those were thought to need some level of resettlement support as well.

Needs calculations

- The need for supported housing in 5 years' time is projected to increase by around 70 units. The most reasonable interpretation of this is that broadly speaking there is currently the right number of units of supported accommodation, with possibly scope for a very modest increase.

- 8% of service users are calculated to need longer-term supported housing (average stay – 5 years). This could amount to 125 units by the end of 5 years.
- We estimate that there is a need for around 78 multiple and complex needs units at the end of 5 years.
- We estimate that up to 25% of current supported housing service users never needed a supported housing place, but maybe 64% of these people might have need an alternative support offer at the point of homelessness.
- 60% of service users are thought to need some form of specialist input into supported housing. This is not the same as needing specialist provision. The most significant area is in relation to substance use – this could include both specialist dual diagnosis provision and abstinence-friendly environments.
- Providing a protective environment is thought to be the most significant rationale for service users needing supported housing – true in just over half of cases.
- Just over 60% of service users (ignoring those who never needed supported housing) are said to need a high level of support. This is very different to the pattern of what is there at the moment.
- Due to relatively high levels of risk and vulnerability, 27% of service users need to be accommodated in self-contained accommodation.
- Although they make up a relatively high proportion of the supported housing provision, there is a lack of safe and supportive spaces for women within the supported housing stock.
- If people are to be diverted from supported housing when they do not have sufficient need to justify it, and people in supported housing are able to move on at the point that they are ready, then this would mean that access to an additional 277 housing units per year. Some of these could be temporary units, some could involve translating some of the current provision into supported tenancies as move-on, some could be generated through reconciliations with family. Otherwise, this will involve increased access to the private or social housing sector.
- At the same time, there is a need for 104 units of support to enable some users to move-on. This could be met through a combination of floating support and supported tenancies (independent tenancies with inbuilt support available as needed).

Cost benefit

We estimated what the counter-factual would likely to be if supported housing was not available. This amounted to nearly £600K per week. While we do not have the figures for the full cost of existing supported housing to (including the cost of lost Housing Benefit subsidy), it is undoubtedly considerably less than this.

Recommendations

We recommend that the council should:

1. Find ways to communicate the value of supported housing to other agencies, using information contained in this report.
2. Draw together a working group to consider the potential for improving prevention rates among people who otherwise may end up in supported housing.
3. Draw together a working group to consider how housing options can be communicated more clearly for the cohorts potentially using supported housing.
4. Consider developing a single point of access for all referrals into supported housing (including non-commissioned) and seek to persuade all providers to sign up to this.
5. Promote this development as part of introducing a voluntary service level agreement with non-commissioned providers.
6. Offer a range of support to providers as part of such an agreement – including initiatives to promote staff training and practice development – focusing on the specialist needs of particular groups and the capacity to more effectively engage with hard to reach groups.
7. Support the service-level agreement by entering into memorandums of understanding with the main referral agencies, so that they are committed to using the single access point.
8. Develop some non-supported temporary housing options to prevent supported housing being used as the default option even when there are no significant support needs.
9. Use the development of the service-level agreement and the introduction of the proposed licencing regime to negotiate with providers over what they provide for who – including opening up the possibility that this might involve the creation of supported tenancies that will contribute to move-on requirements.
10. Include within this process ways to ensure that sufficient provision is made to support those with a history of substance use who wish to practice abstinence, and sufficient safe and supportive provision within female-only environments.
11. Look to increase the proportion of high-support provision, including some for dual diagnosis cases, while considering the potential for some non-commissioned providers meeting lower-support needs to work in partnership with higher-support commissioned provision.
12. Provide non-commissioned providers with access to business advice to improve their capacity to deal with more complex cases and promote ways in which these providers can share costs, practice, and advice.
13. Agree eviction protocols with providers and set up panels or a specialist role within Housing Options to manage this process.
14. Consider the possibility of a different form of contracting in the next commissioning round – whereby the contracted provider takes responsibility for

the delivery of support before and after/as an alternative to supported housing placements in order to provide seamless support, reduce the incentive to house people in supported housing when that is not needed, and ensure that support continues even when placements break down.

15. Consider the best way to meet the demand from people with multiple and complex needs, having considered the best way to resolve cuckooing issues.
16. Focus the strategy on the development of alternatives to and move-on arrangements from supported housing, as this is the key to development of a more effective and value for money supported housing sector.

About Homeless Link

Homeless Link is the national membership charity for organisations working with people experiencing or at risk of homelessness in England. We aim to develop, inspire, support, and sustain a movement of organisations working together to achieve positive futures for people who are homeless or vulnerably housed.

Representing over 900 organisations across England, we are in a unique position to see both the scale and nature of the tragedy of homelessness. We see the data gaps; the national policy barriers; the constraints of both funding and expertise; the system blocks and attitudinal obstacles. But crucially, we also see – and are instrumental in developing – the positive practice and ‘what works’ solutions.

As an organisation we believe that things can and should be better: not because we are naïve or cut off from reality, but because we have seen and experienced radical positive change in the way systems and services are delivered – and that gives us hope for a different future.

We support our members through research, guidance, and learning, and to promote policy change that will ensure everyone has a place to call home and the support they need to keep it.

What We Do

Homeless Link is the national membership charity for frontline homelessness services. We work to improve services through research, guidance and learning, and campaign for policy change that will ensure everyone has a place to call home and the support they need to keep it.

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Let's End Homelessness Together

