

Lessons for Sector Workforce Development from the Penrith Homelessness Interagency Service Mapping Research Project

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Locally based responses are becoming increasingly important as the issue of homelessness grows in our communities. In 2014, Penrith City Council (PCC), located in Western Sydney, held a Penrith Homelessness Summit attended by over 100 representatives from specialist homelessness services, volunteer groups, affordable housing organisations and all levels of government.

The aim of the summit was to highlight the challenges and needs of people who are homeless in Penrith City and provide a space to develop coordinated and collaborative solutions to these issues. The active feedback from the summit led to the development of an outcomes report and action plan, with one of the identified actions being the creation of the Penrith Homelessness Interagency (PHI) to support, advocate and share information across local service providers. The PHI began in mid-2015 and continues to meet with the support of Council's Community Projects Officer.¹

In 2017, the PHI (with support from PCC) received ClubGrants funding to undertake one of its identified priorities, that being a service mapping research project. WESTIR Limited (Western Sydney Regional Information and Research Service) was commissioned to undertake the project over a period of six months, with continual input from the Interagency's steering committee.

The aim of the research project was to provide an up to date overview of the local homelessness service system and build its capacity by:

- Identifying which funded and non-funded services are currently available to people who are homeless or at risk of

homelessness in the Penrith region.

- Understanding the role that mainstream and voluntary services play when working with specialist homelessness services (SHS) in the broader system.
- Enhancing the information and referral pathways available to community workers so they can effectively link people who are homeless or at risk of homelessness with appropriate support.
- Establishing an evidence base for homelessness advocacy, highlighting service and resource gaps and opportunities for service collaborations and partnerships.

The research project involved an online service mapping survey filled out by 45 unique services/programs, and 11 one on one interviews with local service providers from a variety of specialties (including youth and aged homelessness, tenancy and legal support, medical support, community and social housing, domestic violence (DV) and mental health). This article outlines the findings and recommendations of the service mapping research project, with a particular focus on what it reveals about the issues impacting the development of the homelessness sector workforce.

Project Findings: Sector Workforce Development Issues

Service mapping

The service mapping was completed by SHS providers and non-SHS services that make up Penrith's broader homelessness service system. The survey showed that a small number of SHS providers work in the Penrith area, providing a combination of generalist and specialist accommodation and support. There were also many non-SHS services that support Penrith's SHS providers,

including funded government and non-government organisations (providing a range of service types) and unfunded community groups and foundations (which predominantly specialise in emergency relief). The service mapping revealed several issues that impact on the local homelessness sector workforce.

Penrith's SHS providers and non-SHS services generally reported high service capacity levels (that is, 150 or more clients per service/program) and mostly covered the whole of Penrith city, as well as other nearby regions. Most SHS providers did not use volunteers, while most non-SHS services, particularly unfunded groups and foundations, did. Of the services surveyed, 58 per cent reported using volunteers. Of these, 29 per cent used one to ten volunteers and 16 per cent used 50 or more volunteers, with the others falling somewhere in between. The reason for different approaches to volunteer usage is not fully known, but may reflect funding restrictions, the risks to volunteers when working with homeless groups, or in other cases, the reliance on volunteers due to understaffing and insecure funding. More targeted support may be needed for services who want to increase their ability to utilise volunteers, while increased funding may help other organisations reduce their reliance on volunteers.

Analysis of service referral pathways and partnerships showed that both SHS providers and non-SHS services in Penrith relied strongly on referrals coming directly from individuals, family and friends and local community networks. Strong referral relationships were found between SHS providers and non-SHS housing/homelessness services and mental health services. Less robust

relationships were reported with aged, culturally and linguistically diverse (CALD), drug and alcohol, disability and rehabilitation, education, child/family/youth and employment services, suggesting more support may be needed to make connections between these services and the homelessness sector.

Non-SHS services reported stronger overall relationships with community groups and foundations providing emergency relief, general health and policing/justice/legal services than SHS providers. Interestingly, community groups and foundations providing emergency relief reported strong referral relationships with SHS providers, but SHS providers did not report strong reciprocating relationships back to them. The full reason for this result is unknown, but it may indicate that SHS providers either directly provide these service types or are relying on their non-SHS connections who report stronger overall relationships across the sector to play an intermediary role.

The survey also revealed that many SHS and non-SHS services did not work with or receive support from the business sector. Some exceptions came from funded non-government organisations and unfunded community groups and foundations. This suggests that more support may

be needed to connect and develop relationships between the business and community service sectors.

Finally, most SHS providers and non-SHS services participated in local and regional inter-agencies and networks, suggesting these are important spaces for service coordination, collaboration and communication. However, low involvement was reported from unfunded community groups and foundations due to their limited capacity to participate beyond their current employment and voluntary roles.

Interviews

Interviews with service providers also revealed issues impacting the homelessness sector in Penrith. Workers spoke about the ongoing impact of the New South Wales *Going Home Staying Home* reforms on services and workers. This included competition and reduced service collaboration due to the tendering process, although this was slowly changing as resource-restricted services realised the need to work together to meet client outcomes. Many services also experienced a notable increase in service demand after the reform process, as a result of increased service awareness, the implementation of the No Wrong Door approach and the loss of specialist services and staff.

Service workers identified common challenges working in the homelessness service system. There was a chronic shortage of affordable housing stock, exacerbated by long waiting lists for social housing and rising private rental costs. In addition to lack of housing, some workers outlined that homeless clients faced barriers to service access through lack of contact details or fixed address, inability to complete forms and having expectations placed on them to show improvements in a short time frame without the necessary wrap around support.

Workers spoke openly about the gaps in the homelessness service system and related systems. The current system was difficult to navigate for certain population groups who fall outside the current homeless criteria, such as those with squalor and hoarding issues, those without legal residency status or those requiring after hours' support. Interviewees also spoke about how the gaps of the mental health system (such as the lack of mental health packages, NDIS criteria and lack of collaboration with drug and alcohol services) made it harder for them to address complex mental health issues. The emotional and physical stress of working in the homelessness sector also caused high staff turnover and burnout.



Provided by CHP. From the 2017 Walk in My Shoes Tour

The issues identified differed across the various parts of Penrith's homeless sector. Workers in DV-specific services spoke at length about the significant loss of funding and specialist staff since the reforms began, while simultaneously trying to cope with the increased service demand generated by targeted DV campaigns. Youth and aged homelessness workers described how rising housing costs and a lack of affordable housing were pushing many of their younger and older clients out of the housing market. Mental health workers lamented the impacts of gentrification and rental discrimination on finding accommodation for their mentally ill patients, while legal advocates were faced with tightening eligibility systems and a lack of client and worker knowledge around legal rights, both in housing and other areas.

Good communication was seen as essential to addressing these issues and meeting client needs, however some worried that the differing values and goals of services would hinder efforts to work together. Workers also identified issues with sharing client information between services, particularly around client consent, lack of database linking and the stress

of clients having to repeat their story multiple times across different services. Workers found information resource cards, Council staff support and interagency meetings to be important tools in improving service communication and collaboration.

Despite the many challenges, services in Penrith were involved in innovative solutions to address local homelessness, including assertive outreach and street level first aid. Interviewees expressed the need for government, business and community to work together more closely to end local homelessness through innovation and entrepreneurship within the service system.

Where to From Here?

Several recommendations were made to the PHI, and PCC as its partner, based on the research project findings. These included recommendations specific to PHI, such as updating the resource card and promoting it to local services, inter-agencies and networks; increasing communications with other relevant local/regional networks; and building awareness and improving partnership pathways through staff education and training. In addition, the project supported the sector's

advocacy work, including advocating for more diverse and affordable housing stock; reducing housing discrimination of at-risk groups; advocating for change to the mental health service system; and encouraging research-supported innovation and entrepreneurship in Penrith's homelessness service system.

The research project has been an important step towards providing the Interagency with the guidance and evidence needed to make a difference to issues currently being experienced by the local homelessness workforce and sector.

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For information about the project, please contact WESTIR Ltd on (02) 9635 7764 or visit www.westir.org.au

Endnote

1. Penrith City Council 2015, *Penrith Homelessness Summit Outcomes Report (and Action Plan)*, Penrith City Council, Penrith.

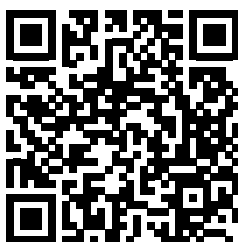
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