Appendix 1 – Action Plan

The Action Plan below sets out the actions that specifically relate to preventing and relieving homelessness, however, in recognition of the Government's commitment to build 1.5 million homes backed by £39 billion investment, and consistent with the national homelessness strategy and wider housing policy, the local authorities recognise that local prevention efforts must be supported by sufficient affordable housing and effective allocation of social stock. Without this, demand for crisis interventions and temporary accommodation will continue to rise. The councils will ensure alignment with the Worcestershire Housing Strategy in order to support the increase in the supply of new affordable and high-quality homes and to address the need for greater diversity in the housing stock through the development of the supported housing strategy. Performance against delivery of new build housing is monitored through the Worcestershire Housing Board.

Pillar 1: Universal Prevention – tackling the root causes of homelessness	**Action**	**Timescale**	**Delivery milestones**	**Local indicators and targets**	**Lead**	**Relevant LOF outcome metric**
	1.1 Prevent homelessness from private rented sector tenancies by building relations with landlords to identify those at risk of homelessness at an earlier stage, utilising funding where appropriate and available and take action to sustain tenancies.	Year 1 / 2	- Landlord forum and prevention panel established. "Help to Stay" scheme established in areas without one. -Tenancy Sustainment Officers in place (funding dependent). -Utilise funding such as the Crisis Resilience Fund and homeless funding to sustain tenancies	-Collect the number of evictions for rent arrears in 2026/27 to establish the baseline in year 1. -Increase the number of cases taken to prevention panels/Housing Advice teams for rent arrears from landlords by 20% in year 2.	District Councils	% duties where homelessness was prevented or relieved
	1.2 Ensure more legal support is available for tenants facing eviction by expanding partnerships with organisations who already undertake this work so that services have sufficient resource, knowledge, expertise and capacity to robustly defend evictions based on grounds under Renters Rights Act.	Year 1 / 2	-Training on Renters' Rights Act undertaken for LHA staff. -Established referral mechanisms are in place with the Housing Loss Prevention Advice Service	-Collect the number of evictions for rent arrears in 2026/27 to establish the baseline in year 1. -Increase the number of cases taken to prevention panels/Housing Advice teams for rent arrears from Landlords by 20% in year 2 -5% increase in tenancies sustained for 12 months in the private rented sector following intervention.	District Councils	
	1.3 Develop an integrated tenancy sustainment approach, bringing together housing, community organisations/hubs, employment and financial inclusion partners and develop stronger links to online support, to identify tenancies at risk and deliver coordinated support.	Year 2	-"Tenancy at Risk" protocol with Registered Providers is explored. -Coordinated support packages in place including income maximisation, debt advice, financial literacy training, and flexible crisis prevention/ discretionary welfare funding.	-Collect the number of evictions for rent arrears in 2026/27 to establish the baseline in year 1. -Increase the number of cases taken to prevention panels/Housing Advice teams for rent arrears from Landlords by 20% in year 2.	District Councils – Housing and Community Services	
	1.4 Review the Duty to Refer data and prepare for the new Duty to Collaborate to ensure that any potential homeless cases are referred to the local housing teams by partner agencies at the earliest opportunity.	Year 2 Year 3	- Duty to Refer data reviewed	-10% increase in the number of Duty to Refer referrals from organisations with low referral levels. -10% increase in the proportion of cases approaching for homelessness assistance at prevention stage/ earlier from wider partner agencies included in the Duty to Collaborate.	District Councils/all statutory agencies required to refer	
	1.5 Use data and lived experience to track and evaluate progress against the strategy (and inform service delivery) using key performance indicators and regular reviews. Consider how we can implement "big picture" reporting to demonstrate and understand homelessness prevention activity across all sectors/organisations.	Year 2	-Summary reporting mechanism developed to show homelessness prevention work across all sectors/organisations. -Data dashboard and baseline statistics developed and monitored at countywide homelessness strategy meetings	-Minimum of 2 lived experience sessions are held per year.	District Councils	
	1.6 Improve shared understanding of the work of all partner agencies in preventing homelessness through promoting the Community Services Directory, and joint training and awareness sessions.	Year 2	-All homelessness prevention services are signed up to the community services directory. -Joint training and awareness sessions are organised and gaps in services identified.	-Promote the CSD at minimiun of one homelessness forum in each district. Districts to organise one joint training session per annum with the VCSE and/or stat organisations for increased awareness of roles and responsibilities	District Councils, County Council, and Homelessness Partnerships	
	1.7 Develop and implement clear referral guidance and processes between agencies (housing, health, education, social care) for early identification of at-risk individuals.	Year 3 Year 4	-Referral guidance and process defined and promoted and this supports a reduction in the number of individuals are released from institutions into homelessness.	-10% increase in the number of Duty to Refer referrals from health and social care settings. -10% reduction in homelessness from institutions	District Councils, Health, Education and Social Care Leads	
	1.8 Explore opportunities to develop and deliver homelessness education programmes in schools	Year 3	-Service offered by Nightstop in Wyre Forest is reviewed and roll out across other districts (funding dependent)	-Number of schools and pupils participating in homelessness education sessions	District Councils	

	1.9 Make better use of existing social housing by exploring opportunities to better match disabled households with adapted housing and by tackling under occupation of larger properties	Year 2	-Current adapted stock within RP provision is mapped. -Current levels of demand for adapted homes are identified.	-Percentage of adapted homes let to households whose assessed needs match the property's adaptations	District Councils	

Pillar 2: Targeted Prevention - targeted support for people at risk of homelessness	**Action**	**Timescale**	**Delivery milestones**	**Local indicators and targets**	**Lead**	**Relevant LOF outcome metric**
	2.1 Explore the feasibility of a predictive homelessness risk model that pulls data from a range of sources to identify and target support to people at greatest risk of becoming homeless before they reach crisis point.	Year 3	-Business case developed for a predictive homelessness risk model to increase homelessness prevention and decrease the number of temporary accommodation placements required.	-% duties where homelessness was prevented or relieved -% duties where homelessness was prevented or relieved for households experiencing multiple disadvantage	District Councils	% duties where homelessness was prevented or relieved % duties where homelessness was prevented or relieved for households experiencing multiple disadvantage Number of people sleeping rough on a single night Number of people sleeping rough over the month who are long-term Rate of households in temporary accommodation with children per 1,000 households
	Rough sleepers and single homeless households: 2.2 Review and strengthen the rough sleeper support/accommodation options (All services and interventions that tackle rough sleeping) and commission or directly deliver services required utilising the new multi-year homelessness funding arrangements. Ensuring safety, accessibility and positive move on options.	Year 2	-A fully implemented, trauma informed rough sleeping pathway is identified that increases successful tenancies and ensures rough sleeping is not recurring. -Complete a cross-sector review of all current provision. -Carry out a needs assessment and develop a Supported Housing Strategy -Re-allocate funding or remodel services based on findings.	-Number of people sleeping rough on a single night -Number of people sleeping rough over the month who are long-term	District Councils	
	2.3 Investigate the ability to provide bespoke funding for rough sleepers and single homeless households. Provide tailored solutions for individuals who have previously been unable to secure or maintain accommodation, subject to funding.	Year 2 (pending funds)	-Funding options for bespoke packages of support are explored.	-Number of individuals housed through the funding -Tenancy sustainment 6 months + -Number of individuals supported through the funding to address unmet needs -Reduction in repeat rough sleeping of 10%	District Councils	
	2.4 Expand the online multi-agency work on Target Priority Group rough sleepers Implement outreach and support services TPG online group across all districts to improve cross-boundary coordination and case management. Learning from good practice and promoting joined up working.	Year 1	-Multi agency working is expanded. Cross boundary cases are successfully resolved through online multi-agency TPG group working effectively across boundaries+.	-Reduction in the number of TPG rough sleepers. -Increase in TPG rough sleepers accessing services and accommodation -All districts consistently using the TPG platform	District Councils	
	2.5 Extend the Mental Health & Homelessness Group to all districts to enable discussion/referrals into mental health services for those at risk of or experiencing rough sleeping	Year 1	-Mental Health and Homelessness Group expanded across all districts to ensure consistent access to mental health services and a joined-up approach in those with mental health issues facing homelessness which leads to an increase in access to mental health support for rough sleepers	-Districts holding a minimum of 2 Mental Health and Homelessness groups per annum in each area.	District Councils	
	2.6 Understand factors leading to returns to rough sleeping Using data to identify repeat patterns, implement targeted interventions, and redesign support offers, subject to funding.	Year 2	-Have an enhanced support offer in place for those who return to rough sleep including through tenancy sustainment to enable them to access housing.	-Reduction in repeat rough sleeping of 10% Number of individuals receiving enhanced support -Reduction in number of people refused social housing due to poor tenancy history with Registered Providers (baseline established in Year One)	District Councils	
	2.7 Set up a Lived Experience involvement process to ensure people who have experienced rough sleeping or homelessness are able to put forward ideas or feedback. Use this feedback to make changes to services and improve everyday practice, subject to funding.	Year 1	-People with lived experience are involved in service development and improvement with their feedback collected and recorded.	-Number of people with lived experience taking part (in a way that meets their needs) Minimum of 1 RS lived experience session held a year.	District Councils	
	Children, young people and care leavers: 2.8 Support the pilot(s) of the "Upstream" model in partnership with schools, specialist youth and family support services e.g. Centrepoint model (should funding be available). This would include a review of family intervention and mediation services. Initial pilot to commence in Wyre Forest and Bromsgrove.	Year 2	-The causes of youth homelessness and what interventions can be made to sustain accommodation and positive relationships with family/friends are better understood and prevention initiatives developed across the Councils leading to a reduction in youth homelessness.	-Number of secondary schools actively participating. -Percentage of identified 'at risk' students successfully engaging with family mediation or respite services to maintain stable housing.	District Councils/WF & SW Nightstop/ The Basement Project/ Children's Services/	

					Youth Services/ Schools	
	2.9 Review the Care Leavers Protocol in light of new legislative requirements that state that care leavers will no longer be deemed intentionally homeless in the case of accommodation breakdown.	Year 1	-Care leavers protocol updated to ensure positive pathways into accommodation avoiding a homelessness route through a bespoke approach to meeting their needs which will include options to stay put and access to higher education	-5% reduction in number of Care Leavers being accepted under the homeless duty.	District Councils Children's Services	
	2.10 Agree a Memorandum of Understanding/Protocol with providers of young persons supported accommodation to facilitate movements to alternative supported accommodation where relationships between residents have broken down	Year 3	-Memorandum of Understanding/Protocol in place across providers to respond to potential homelessness situations where the relationship with and between residents has broken down to lead to fewer crisis situations in which a suitable move cannot be found.	-Number of positive moves or sustained accommodation as a result of utilising the MoU/protocol	District Councils Supported Housing Providers	
	2.11 Work with partner organisations (e.g. DWP) to explore services provided to address youth unemployment and ensure they can be connected with prevention/mediation/budgeting/debt advice services.	Year 2	-Services are mapped and awareness raised.	-10% reduction in youth homelessness -An increase in young people managing their money and able to live independently through accessing education, employment and training opportunities	District Councils/ DWP	
	2.12 Work with partners to understand the links between homelessness and neurodiversity in young people and how homelessness prevention services can meet their needs.	Year 1	-Officers trained to ensure that neurodivergence is recognised and services are adapted to meet needs.	10% reduction in youth homelessness where neurodivergence is a significant factor	District Councils/ County Council	
	Families with children: 2.13 Identify the key risk factors in families that lead to homelessness to ensure targeted intervention at the earliest stage	Year 2	-Review and utilise best practice around early intervention and prevention for families including risk factor identification to increase homelessness prevention where data is available.	% duties where homelessness was prevented or relieved -Rate of households in temporary accommodation with children per 1,000 households -Number of families in B&B over 6 weeks	District Councils	
	Homelessness and health: 2.14 Commission a homelessness and health audit to understand the health needs of homeless households, reduce health inequalities for rough sleepers and improve life expectancy.	Year 1	-The health needs of homeless households are understood and services commissioned or adapted to meet need and prevent homelessness. -Undertake a homeless and health audit and consider implications from this for future actions.	-Health inequalities experienced by rough sleepers are reduced and life expectancy is increased.	District Councils	
	2.15 Improve joint working across housing, health and social care to: Prevent unnecessary hospital admissions for those who are homeless/at risk of homelessness remove barriers to hospital discharge for those who cannot return to their home or who are homeless Develop and implement the Duty to Collaborate for hospital admission, discharge, and step-down care that ensure a housing plan is in place before discharge.	Year 2 Year 3	-Improved pathway into accommodation to ensure that discharges are planned in partnership with housing options services and that appropriate support is in place.	-% duties where homelessness was prevented or relieved for households experiencing multiple disadvantage -No individuals discharged from hospital to the street. -Reduction in avoidable hospital admissions/ readmissions among the homeless cohort. Reduced delays in hospital discharge for homeless households	- District Councils -Integrated Care Board -NHS - Hospital discharge team / officer	
	2.16 Explore opportunities to provide a flexible approach to medical appointments with GPs to meet the needs of those with complex needs/chaotic lives and ensure follow up care is provided– example of health care worker in local day centres.	Year 1	-All rough sleepers have access to a GP and substance use services where appropriate.	-Adopt a formalised, flexible healthcare access protocol that reduces missed appointments and ensures continuity of treatment. -Ensure housing officers check with all Households entering temporary accommodation that they are registered with a GP	- District Councils -Integrated Care Board -NHS	
	2.17 Enhance the collaborative approach with partners to effectively manage the risk to those with complex and multiple needs in temporary accommodation.	Year 2	-Greater understanding of service user needs and risks and management of these in collaboration with other agencies to reduce the number of serious incidents in unsupported TA/housing.	- 100% of residents with complex needs in temporary accommodation are identified and risk assessments completed – A co-produced multi agency safety plan in place within five working days of placement.	Worcester-shire Housing Board -District Council's	

			-Existing support and ongoing care and support processes are reviewed.			
	2.18 Integrate mental health services more deeply into homelessness prevention and intervention strategies. E.g. outreach teams should have improved access to mental health professionals to provide immediate support to those in crisis, and ongoing support is provided for those in unsupported temporary accommodation.	Year 3	-Improved access to mental health services for those in Temporary Accommodation through the mapping of current mental health services (and their capacity) with, gaps identified. If gap identified secure funding to meet needs.	- Develop dual diagnosis outreach screening tool - Number of joint casework reviews undertaken for high risk individuals	- District Councils - Mental Health Services	
	2.19 Develop more fully accessible permanent and temporary housing through Disabled Facilities Grant, Health funding and Homes England Funding (dependent on funding)	Year 4	-An increase in healthy and accessible new build and temporary housing to meet needs.	- % increase in number of accessible temporary accommodation units from Year one baseline. - Number of new build social rent properties meeting M4(3) accessibility standard	-District Councils -Worcester-shire Housing Adaptations Service -Local Planning Authorities	
	2.20 Investigate the ability to provide flexible budgets to prevent homelessness families and single people facing severe mental health issues.	Year 4	-Increase in homelessness prevention for this cohort to inform future service delivery.	-Feasibility report, data collection on what works and pilot evaluation carried out which establishes a framework for funding.	-District Councils	
	Domestic abuse 2.21 Sustain and expand safe accommodation options (funding dependent) to eliminate the use of inappropriate B&B for DA survivors.	Year 2	-The use of inappropriate B&B is eliminated for DA victims/survivors	-% increase in the number of safe accommodation options. -% reduction in B&B use for DA survivors.	-District Councils -Public Health -Housing Providers	
	2.22 Review best practice in preventing homelessness due to domestic abuse at an earlier stage through early interventions with households at risk of homelessness due to DA.	Year 1	-Those are risk of homelessness and experiencing domestic abuse approach for homelessness assistance at an earlier stage e.g. prevention stage, not relief/crisis stage and are able to take up preventative options including the Sanctuary Scheme.	-% Decrease in homelessness approaches due to DA -% Increase in the use of Sanctuary Scheme.	-District Councils	
	2.23 Develop a protocol for Registered Providers to access relevant survivor information (with consent) to deliver trauma-informed housing offers and minimise re-traumatisation.	Year 2	-Improved suitability of accommodation offers due to greater understanding of needs and risk.	-% Reduction repeat homelessness for DA survivors (below 30%) -Increased accommodation sustainment for survivors of DA	-District Councils -Housing Providers	
	2.24 Develop dedicated housing pathways for survivors with multiple needs and those with No Recourse to Public Funds (NRPF)	Year 3	-Improved partnership working with adult social care, schools and health and holistic support available to whole family.	-Reduced homelessness levels due to DA -Referral pathway developed for those DA survivors who have NRPF.	-District Councils	
	2.25 Strengthen communication and engagement with schools and health professionals (with consent) to support safeguarding and ensure children affected by domestic abuse are linked to appropriate support services.	Year 2	-Processes are defined and embedded within housing teams, education and health professionals to support early identification.	- Increase in number of children being referred for support into commissioned services by Domestic Abuse Housing Officers (DAHO). - Number of schools engaged with - Number of health organisations engaged with	-District Councils	
	Prison leavers: 2.26 Review supported and transitional accommodation capacity and barriers to accommodation to ensure that there are pathways into accommodation prior to release.	Year 2	-Reduced homelessness due to leaving prison onto the street or unsuitable accommodation where the prison leaver has a local connection	-Reduction of 10% of individuals with a local connection discharged from custody to the streets or into unsuitable emergency accommodation.	-District Councils -Prison and Probation Service	
	2.27 Improve data capture: referrals to Prison Release meetings and homeless assessments before release. Understand the accommodation pathways data including CAS3 accommodation.	Year 1	-Improved understanding of housing needs by Housing Teams through improved data collection from Prisons to provide increased accommodation options for prison leavers	-Reduction of 10% of individuals with a local connection discharged from custody to the streets or into unsuitable emergency accommodation.	-District Councils -Prison and Probation Service	
	2.28 Increase the number of housing assessments undertaken within prisons to identify a housing solution before release.	Year 2	-Increased upstream working to identify accommodation options thereby improving process for prison leavers and reducing homelessness.	-Number of housing assessments undertaken prior to release.	-District Councils -Prison and Probation Service	
	2.29 Work with partner housing providers to develop a positive	Year 1	-More individuals are moving on from CAS3 into	-Set up joint meetings with RPs to discuss	-District	

	pathway from CAS3 accommodation		settled or supported accommodation because RPs understand and can meet needs	barriers to rehousing prison leavers and ways to overcome them	Councils	
	2.30 Review Worcestershire Criminal Justice Housing and Support Protocol	Year 2	-Protocol is updated to reflect current legislation and service provision	-Protocol updated and signed off. -Reduction of 10% of individuals with a local connection discharged from custody to the streets or into unsuitable emergency accommodation.	-District Councils	
	Asylum seekers and refugees: 2.31 Collaborate with community, voluntary, and faith organisations to develop tailored, culturally appropriate information and guidance for asylum seekers, refugees and those with No Recourse to Public Funds, enabling them to access necessary support.	Year 2	-Comprehensive and culturally appropriate guidance developed.	-Meetings held with community, voluntary and faith organisations. -Guidance developed and shared (if relevant) links from council websites to relevant websites like Shelter /NRPF network	-Homeless Partnerships	
	Veterans: 2.32 Continue to work with the Worcestershire Armed Forces Covenant Partnership to ensure that there is a good understanding of the Armed Forces Covenant in housing and that organisational policies reflect the needs of the Covenant	Year 1	-Armed Forces Covenant embedded in housing services (where relevant) so there is an improved response to those approaching for housing who are, or have been, armed forces personnel.	- Number of housing staff received training on the Armed Forces Covenant.	-District Councils -Armed Forces Covenant Group	

Pillar 3: Preventing crisis – helping people stay in their homes	**Action**	**Timescale**	**Delivery milestones**	**Local indicators and targets**	**Lead**	**Relevant LOF outcome metric**
	3.1 Use the findings of the Homelessness Review Service Mapping and Supported Housing Needs Assessment to explore funding services required (to be commissioned or directly provided by LHAs) to sustain accommodation.	Year 3	- Gaps in services are identified and funding options explored.	- Gaps are defined - Business case developed for supported housing (if relevant).	-District Councils	% duties where homelessness was prevented or relieved % duties where homelessness was prevented or relieved for households experiencing multiple disadvantage Number of people sleeping rough on a single night Number of people sleeping rough over the month who are long-term Rate of households in temporary accommodation with children per 1,000 households
	3.3 Utilise funding to ensure services such as accommodation, floating support, and help with housing costs are all targeted to reduce homelessness through prevention	Year 1	-Number of households prevented from becoming homeless increases	-Increase in the percentage of successful outcomes at preventing or relieving homelessness (5%)	-District Councils	
	3.4 Make use of the government toolkits to aid prevention of homelessness (when available)	Year 2	-Number of households prevented from becoming homeless increases	-Increase in the percentage of successful outcomes at preventing or relieving homelessness (5%)	-District Councils	

Pillar 4: Improving Emergency Responses – improving temporary accommodation and making people's experiences better	**Action**	**Timescale**	**Delivery milestones**	**Local indicators and targets**	**Lead**	**Relevant LOF outcome metric**
	4.1 Increase the number of high-quality, self-contained, TA units for families with children through working with Registered Housing Providers and considering options such as leasing or purchasing accommodation (funding dependent). Minimise the use of B&B, and other forms of shared accommodation and out of area placements for families with children.	Year 2	-Increase in the number of suitable self-contained TA units within Districts and homeless prevention undertaken to reduce the use of unsuitable, out of area or long term placements in TA to support families in moving on with their lives as quickly as possible.	-Increase in No of self-contained temporary accommodation.	District Councils	Rate of households in temporary accommodation with children per 1,000 households Number of families in B&B over 6 weeks
	4.2 Improve the transition of households moving out of TA and into settled accommodation by providing an assessment of support needs and referring families into the appropriate support. This would include sharing the needs assessment with	Year 3	-Trauma informed assessment is developed and used by Housing Teams.	-Number of move-ons from TA sustained for 6 months.	District Councils	

	housing providers (with consent) so they can provide a trauma informed housing offer.					
	4.3 Create family-centred TA solutions: reevaluate the model for families in TA, ensuring that placements consider the impact on children's schooling, health, and support networks and help children, families and young people in TA to maintain connections to services and support networks.	Year 1 Year 2 Year 1 - 5	-Increase in the number of suitable self-contained TA units within Districts and homeless prevention undertaken to reduce the use of unsuitable, out of area or long term placements in TA to support families in moving on with their lives as quickly as possible. -Review the Temporary Accommodation Procurement and Placement policies.	-Reduction of the number of households with children in temporary accommodation per 1000 -Ensure no one is in temporary accommodation for more than 12 weeks by the end of the strategy	-District Councils	
	4.4 Jointly review social housing allocations policies once government's new guidance is available to try to prevent the need for TA or move people on into settled accommodation more quickly if they do need to access TA.	Year 2 Year 4	-Review of social housing policies undertaken.	-Increase the number of households directly accommodated into a permanent housing solution to reduce the need for temporary accommodation.	-District Councils	
	4.5 Develop a resilience plan to address the impacts of rising temporary accommodation use, accommodation costs, and the anticipated loss of grant funding. This will include a review of block booking contracts, introduce dynamic purchasing and reduce the use of spot purchasing.	Year 2 Year 3	-Block booking contracts and dynamic purchasing are reviewed. -Temporary Accommodation Resilience plan is developed.	-Reduction in temporary accommodation costs -PWLE feedback from families who have experienced TA is gathered and analysed minimum of once per annum -% increase in number of self-contained units of accommodation -Improve the cost effectiveness of temporary accommodation used.	District Councils	
	4.6 Work with PWLE to analyse the barriers to accessing temporary accommodation and implement solutions e.g. increased security measures, provisions for pets.	Year 4	-Barriers to TA are understood and action taken to overcome barriers	Collect data and analyse the reasons for rejection of TA offers	District Councils	

Pillar 5: Recovery and Preventing Repeat Homelessness – ensuring people don't experience homelessness more than once and having long term rough sleeping	**Action**	**Timescale**	**Delivery milestones**	**Local indicators and targets**	**Lead**	**Relevant LOF outcome metric**
	5.1 Take action to tackling long term rough sleeping through reviewing: Accommodation-based and floating support/Rough sleeper outreach and intensive support/Rent deposits and rent in advance/No First Night Out Accommodation/Furniture projects	Year 1	-All activities to prevent and tackle rough sleeping locally are reviewed and defined, gaps identified and services commissioned to lead to a reduction in rough sleeping.	-Reduction in repeat homelessness of rough sleepers -Reduction in the number of people sleeping rough over the month who are long term (10%)	District Councils/Statutory and VCS partners	% duties where homelessness was prevented or relieved % duties where homelessness was prevented or relieved for households experiencing multiple disadvantage Number of people sleeping rough on a single night Number of people sleeping rough over the month who are long-term
	5.2 Review opportunities to develop and implement community and peer support models	Year 3	-Community and peer support models are developed and opportunities for implementation are explored.	-10% increase Rough Sleepers engaging in services who are currently not engaging. -Reduction in the number of people sleeping rough over the month who are long term (10%)	District Councils	
	5.3 Review opportunities to strengthen advocacy services: increase the availability of independent advocates, particularly for vulnerable groups like young people, those with mental health issues, and DA survivors.	Year 2	-Advocacy services are defined and strengthened to give good quality advice to vulnerable groups.	-Meetings with providers in place and pathway to advocacy established.	District Councils/ Statutory and VCS partners	
	5.4 Investigate with PWLE why there is a high level of repeat homelessness in certain homeless cohorts e.g. DA survivors, rough sleepers, families with complex support needs.	Year 2	-Repeat homelessness is minimised and the drivers of repeat homelessness are understood and minimised	-Reduction in repeat homelessness of rough sleepers	District Councils	
	5.5 Develop mechanisms for referring temporarily accommodated households (with consent) to medical professionals, schools etc (subject to Government guidance)	Year 1	-Effective referral mechanisms are implemented.	-More statutory partnerships involved with homeless households.	District Councils	

Local authority	Measure	Baseline (September 2025)	Annual Checkpoint 1 (September 2026)	Annual Checkpoint 2 (September 2027)	Final Target Annual Checkpoint 3 (September 2028)
Bromsgrove District Council					
	Households with children in temporary accommodation per 1000 households	0.47	0.45	0.43	0.41
	Families in B&B over 6 weeks	6	2	1	0
	Success at prevention or relief (%)	44.7%	46%	48%	50%
	Success at prevention or relief for those with multiple disadvantage (%)	0.0%	30%	40%	50%
	People sleeping rough over the month who are long term	1	2	1	0
	People sleeping rough on a single night	3	2	1	0
Redditch Borough Council					
	Households with children in temporary accommodation per 1000 households	0.46	0.44	0.42	0.40
	Families in B&B over 6 weeks	0	0	0	0
	Success at prevention or relief (%)	47.9%	50%	51%	52%
	Success at prevention or relief for those with multiple disadvantage (%)	66.7%	73.4%	81%	88%
	People sleeping rough over the month who are long term	5	4	3	2
	People sleeping rough on a single night	9	7	6	4
Wyre Forest District Council					
	Households with children in temporary accommodation per 1000 households	0.54	0.52	0.50	0.48
	Families in B&B over 6 weeks	0	2	1	0
	Success at prevention or relief (%)	74.9%	75%	75%	75%
	Success at prevention or relief for those with multiple disadvantage (%)	28.6%	30%	35%	40%
	People sleeping rough over the month who are long term	9	8	7	6
	People sleeping rough on a single night	8	7	6	5
Malvern Hills District Council					
	Households with children in temporary accommodation per 1000 households	0.11	0.11	0.07	0.05
	Families in B&B over 6 weeks	1	0	0	0
	Success at prevention or relief (%)	44.6%	47.1%	49.6%	52.1%
	Success at prevention or relief for those with multiple disadvantage (%)	0.0%	22%	24.5%	26%
	People sleeping rough over the month who are long term	1	1	1	0
	People sleeping rough on a single night	5	4	3	2
Wychavon District Council					
	Households with children in temporary accommodation per 1000 households	0.33	0.31	0.30	0.28
	Families in B&B over 6 weeks	8	0	0	0
	Success at prevention or relief (%)	43.4%	45.9%	48.4%	50.9%
	Success at prevention or relief for those with multiple disadvantage (%)	25.0%	27.5%	30%	32.5%
	People sleeping rough over the month who are long term	4	4	3	2
	People sleeping rough on a single night	9	8	7	6