

Appendix 11

PPL - Advice note on housing and homelessness



Homelessness services following LGR: issues and opportunities

PPL Advice Note - 22 October 2025

Introduction

In February 2025, the government invited councils in Cambridgeshire and Peterborough to develop proposals for unitary authorities, aiming to simplify the current two-tier system. This reorganisation will impact how homelessness services are delivered.

The councils' proposals would see two new authorities created, incorporating the existing districts into the following unitary arrangements:

- 1. Greater Cambridge (Cambridge City and South Cambridgeshire District) and;
- 2. North Cambridgeshire and Peterborough (Peterborough City, Fenland District, East Cambridgeshire District and Huntingdonshire district).

In this paper we explore three key areas:

- 1. How outcomes could be improved for homeless people through LGR
- 2. How we can build on the current prevention and early intervention work, including collaborative working with health, adult social care, public health and children's services
- 3. How homelessness services could be aggregated/ combined from separate district services into the proposed 2 new unitary councils.

Improving outcomes via LGR

Cambridge City Council's paper "Overview of Cambridgeshire and Peterborough People Services" sets out some specific opportunities to improve outcomes. These are evidently the right areas of focus, and we have expanded on some of these below.

Temporary accommodation

- Pooling property assets: Greater Cambridge and North Cambridgeshire & Peterborough could combine district-held property portfolios, enabling a single, countywide TA procurement framework. Increased scale could improve negotiating power with landlords and developers, many of whom operate across local authority boundaries.
- Shared-use schemes: Agreements could allow surplus or underused stock in nearby districts (e.g., Huntingdonshire, Fenland) to be used flexibly for Cambridge households, improving throughput.
- Capital investment leverage: Greater Cambridge and North Cambridgeshire & Peterborough could use borrowing powers to develop modular or purpose-built TA that reduces reliance on nightly paid accommodation.
- Consistent standards: Integration offers the chance to standardise quality and support provision across TA stock, ensuring safeguarding and outcomes consistency.



Family homelessness

- Unified allocations and waiting list: A harmonised sub-regional allocations system
 could enable strategic use of stock across district boundaries, reducing overcrowding
 and allowing better matching of households to available homes and more consistent
 "move-on"
- Strategic land use: LGR creates a single planning and housing delivery body capable of using land and Section 106 negotiations at a regional scale to secure more affordable housing, including for larger property sizes where there may be more acute need.
- Tenure innovation: Greater Cambridge unitary could pilot intermediate rent or shared ownership models that work across markets (e.g. balancing Cambridge's high demand with cheaper build land in adjacent districts).
- Consistent homelessness prevention for families: Aligning housing and early help/social care teams could improve early intervention for at-risk families.

Housing first, rough sleeping targets and people with severe and multiple disadvantage

- Scaling Housing First regionally: With combined commissioning budgets, the Greater Cambridge and North Cambridgeshire & Peterborough councils could expand Housing First capacity beyond city boundaries, sharing expertise and reducing duplication.
- Unified target-setting: A single LGR homelessness strategy could set consistent rough sleeping reduction targets aligned with national commitments, making resource allocation more transparent.
- Integrated health and support commissioning: LGR could embed Housing First within broader adult social care and ICS-funded pathways, securing long-term stability rather than annual bidding rounds. Health and social care funding is still an <u>under-represented</u> source of Housing First funding nationally.
- Performance alignment: Stronger data collection and unified reporting across districts would allow clearer tracking of rough sleeping inflows and sustainment of tenancies.
- Strategic commissioning: Integration of housing, adult social care, and health budgets could unlock larger, joint-funded supported housing schemes for people with high support needs.
- Capital investment: The Greater Cambridge and North Cambridgeshire & Peterborough councils could align Social Housing Decarbonisation Fund, homelessness capital funding (e.g. RSAP, SHAP, LHAF etc.) and Health capital streams to finance supported and specialist housing.
- Co-production: Larger scale enables broader engagement with lived-experience groups across districts, enhancing design and evaluation of schemes.

LHA rates

- Collective lobbying: Greater Cambridge and North Cambridgeshire & Peterborough representing the whole county could strengthen lobbying to MHCLG and DWP for revised Broad Rental Market Area (BRMA) boundaries that better reflect local markets.
- Data-driven advocacy: Shared data on rent levels, evictions, and affordability could underpin evidence-based campaigns for LHA reform.



- Subsidy innovation: Greater Cambridge and North Cambridgeshire could pilot Local Housing Allowance top-up or rent deposit schemes regionally to unlock private rented sector (PRS) access, pooling funds currently held by multiple districts.
- Consistency: Aligning discretionary housing payment (DHP) policies across would ensure fairer, more transparent prevention support for tenants.

Data and workforce

- Unified data platform: Greater Cambridge could implement a single homelessness case management system across the county, enabling seamless data sharing and performance reporting.
- Cross-boundary insight: Shared analytics would allow early identification of individuals or households moving between areas improving prevention and reducing duplication.
- Evidence-based policy: A combined dataset would enable richer predictive modelling (e.g. risk factors for repeat homelessness or TA duration).
- Transparency and accountability: Public dashboards could improve scrutiny and demonstrate progress toward rough sleeping and prevention targets.
- Integration with partners: Data sharing with health (ICB), police, and voluntary agencies would support multi-agency case management for households requiring multi-disciplinary wraparound support.

Additional opportunities

- Align the Domestic Abuse Housing Alliance (DAHA) accreditation, Domestic Homicide Review (DHRs) process, MARAC and the Sanctuary Scheme for an improved consistent service for survivors of domestic abuse
- The increased geography provided by a "local connection" could improve responsiveness of service delivery, with households supported to make better 'fresh starts' where required and not excluded from key support services
- A broader geography may present opportunities for services to develop based on greater levels of need, thus warranting service provision that is needed but may have previously been difficult "to justify"

Opportunities for improved prevention and early intervention

Cambridge City Council's Homelessness and Rough Sleeping Strategy 2021-2026 sets out the current strategic priorities for the city. Additionally, the Cambridge Charter sets out some of the operational priorities for the whole system (including providers and NHS organisations).

The table below sets out some of the risks and opportunities to prevent homelessness and promote earlier intervention:

Strategic area	Description	LGR Implications	Onnortunities	Risks / Challenges
Prevention	Prevent people from becoming homeless via early	prevention with	More holistic, cross- service prevention; easier coordination	Risk of losing locally tailored programmes;

Strategic area	Description	LGR Implications	Opportunities	Risks / Challenges
	intervention, advice, and support	health services under a unitary		disruption during transition
Rough Sleeping Reduction	Minimise rough sleeping via outreach, support, and housing pathways	Integration with wider region may standardise services; requires consistent data sharing	Better coordination across city and surrounding districts; potential to scale successful programmes	Local knowledge may be diluted; risk of delays in frontline service due to reorganisation
Support Services	Wrap-around support (mental health, substance misuse, tenancy support)	Unifying services could enable better funding and joint planning	Integrated health, social care, and housing support; stronger multidisciplinary teams	Contracting and staffing changes may disrupt continuity; risk of non-statutory services being cut
Health	Ensure access to healthcare for those experiencing homelessness	Unitary authority could integrate health commissioning with housing	Streamlined access to care; improved outcomes	Complexity of merging multiple health commissioning streams; potential temporary gaps
Employment & Skills	Opportunities for training and employment for homeless individuals	Can be linked across wider LGR area for workforce programmes	• •	Programmes may become less tailored to local Cambridge labour market
Community Engagement / Charter Commitments	Collaboration between councils, voluntary, and private sector	Larger authority may need to coordinate multiple local partnerships	Potential to expand collaborative network, unify messaging and advocacy	Risk that smaller local partners are sidelined; reduced responsiveness to community feedback

Aggregating and combining services

There are a range of options, risks and considerations for how specific services, pathways and interfaces can be adapted as we move toward unitary structures and implement LGR. The new unitary council will need to take steps to manage these risks through the transition period. We will need clarity on the future structure and boundaries of the unitary council before any of this can be actioned.



For example:

Outreach and health integration

Impact: Rough sleeping services rely on close partnership with health and substance-misuse services. LGR may streamline commissioning (positive) but could also produce coordination lags while responsibilities are realigned. Loss of local outreach knowledge risks worsening outcomes for long-term/ entrenched rough sleepers.

Prevention and early intervention

Impact: District-level prevention schemes (mediation, landlord liaison, local welfare grants, targeted outreach) are often place-specific. Under a unitary, resources could be pooled to expand prevention but also reprioritised away from local, bespoke programmes.

Opportunity: If the new unitary embeds Cambridge's prevention approaches from the 2021–26 strategy, and the Charter's data-led goals, it could scale "what works".

Data, performance monitoring and triage

Impact: Effective statutory delivery needs integrated, accurate data (waiting lists, homelessness prevention outcomes, TA inventories etc.). System consolidation can create data migration errors and delays in performance reporting, undermining statutory compliance and oversight.

Demand and assessments

Impact: Statutory duties under the Homelessness Reduction Act (case triage, prevention duties, relief and main housing duty assessments) depend on robust case management systems and staff continuity. Merging councils risks interruptions in case handovers, delays in duty decisions, and administrative errors during IT/ system migration.

Temporary Accommodation

Impact: TA placement and management are major cost drivers in Cambridge (high market rents, constrained supply). LGR could either enable strategic redistribution of TA across a larger authority (positive) or trigger re-procurement and standardisation that reduces local TA options or increases cost pressure if Cambridge's high rents are pooled into a broader budget formula that smooths funding.

Funding allocations

Impact: A unitary may remap budgets and redistribute funds across a wider geography. Cambridge, with high demand and high cost base, may be disadvantaged if central funding or internal allocation does not recognise local TA cost drivers. Politically, homelessness can be deprioritised in a larger budget where social care or education demand may dominate.

Practically, the majority of changes may commence during the shadow authority stage but tend to reach completion after vesting day. How soon after depends on wider priorities, and where homelessness sits on the strategic agenda. We've seen new unitary authorities maintain separate allocation polies and effectively separate (previously district) services a number of years into the new arrangements.

The practicalities of aggregating services and aligning commissioning cycles are surmountable. The more fundamental challenge is avoiding a "them and us" culture that endures. Part of this is inevitable, but this is particularly important within homelessness services. Whilst the legislation and statutory guidance are consistent, our experience shows a wide variance in service "ethos"



and the tangible impact this can have on service delivery e.g. strength-based vs. deficit-based, outward or inward facing, understanding and awareness of trauma-informed practice etc. The importance of surfacing, and working on, this element of service integration should not be underestimated.

Conclusion

LGR presents both risks and opportunities Greater Cambridge and North Cambridgeshire & Peterborough's homelessness services. This paper concurs with the *Overview of Cambridgeshire and Peterborough People Services* conclusion that to have a fundamentally positive impact on tackling homelessness and managing demand, LGR should facilitate strategic investment in prevention, affordable housing supply, and the expansion of housing-led models and pathways.

Cambridge City Council already has the strategic documents (2021–26 strategy), independent review work (2025 homelessness review), and an active cross-sector Charter to lean on. The council should treat statutory continuity, ring-fenced transitional funding, workforce protection, and data integrity as non-negotiable preconditions of any unitary proposal. If these safeguards are secured, LGR offers a rare chance to integrate housing, health and social care commissioning; and to invest at scale in prevention and affordable/ supported housing.