

Grosvenor Hart Homes

Interim evaluation of the Grosvenor Hart Homes proof of concept

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Introduction

About Grosvenor Hart Homes (GHH)

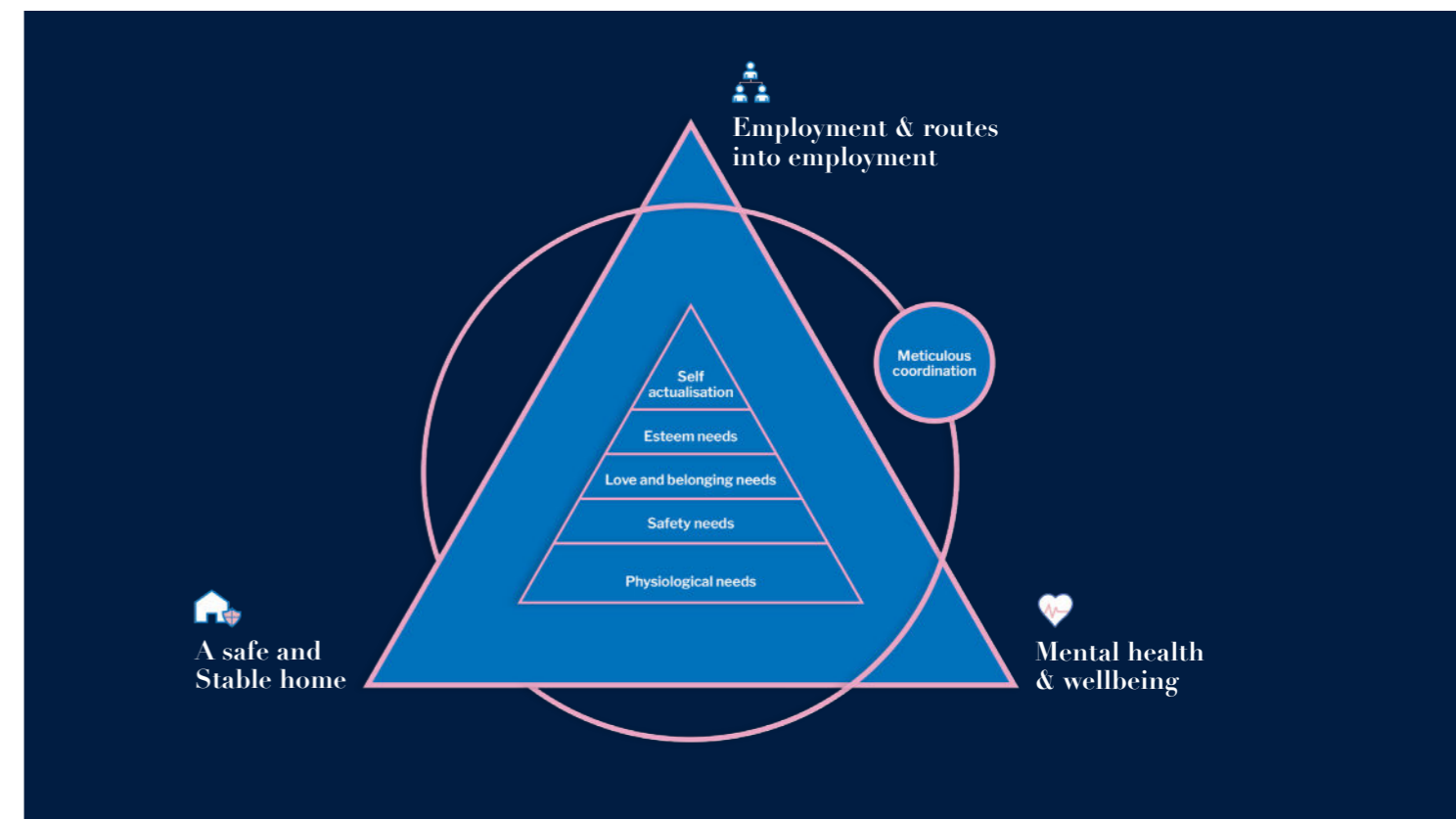
Initiated by the Duke of Westminster, Grosvenor Hart Homes (GHH) is a social enterprise and registered provider of social housing on a mission to improve the life chances of children, young people and their families by providing high-quality, safe, and secure affordable homes in supportive communities paired with wrap-around support services, tailored to the needs of individuals.

The GHH model simultaneously addresses three major foundational blocks essential to overcoming disadvantage and building better outcomes in life; 1) a safe and stable home, 2) good mental health and wellbeing, and 3) employment and routes into employment. The framework is developed with reference to 'Maslow's hierarchy of needs. In implementing the GHH model, it is recognised that tenants can access the services they need in a timely way.

The GHH proof-of-concept service is being delivered over a three-year period for care leavers and a six-year period for families. During this time, GHH is assessing the extent to which the approach of providing high quality, affordable housing alongside tailored support services, aimed at removing barriers to employment, financial stability, health, mental health, education and wellbeing, improves outcomes for children, young people and families. This is the interim evaluation report and a subsequent full evaluation report will follow in due course.

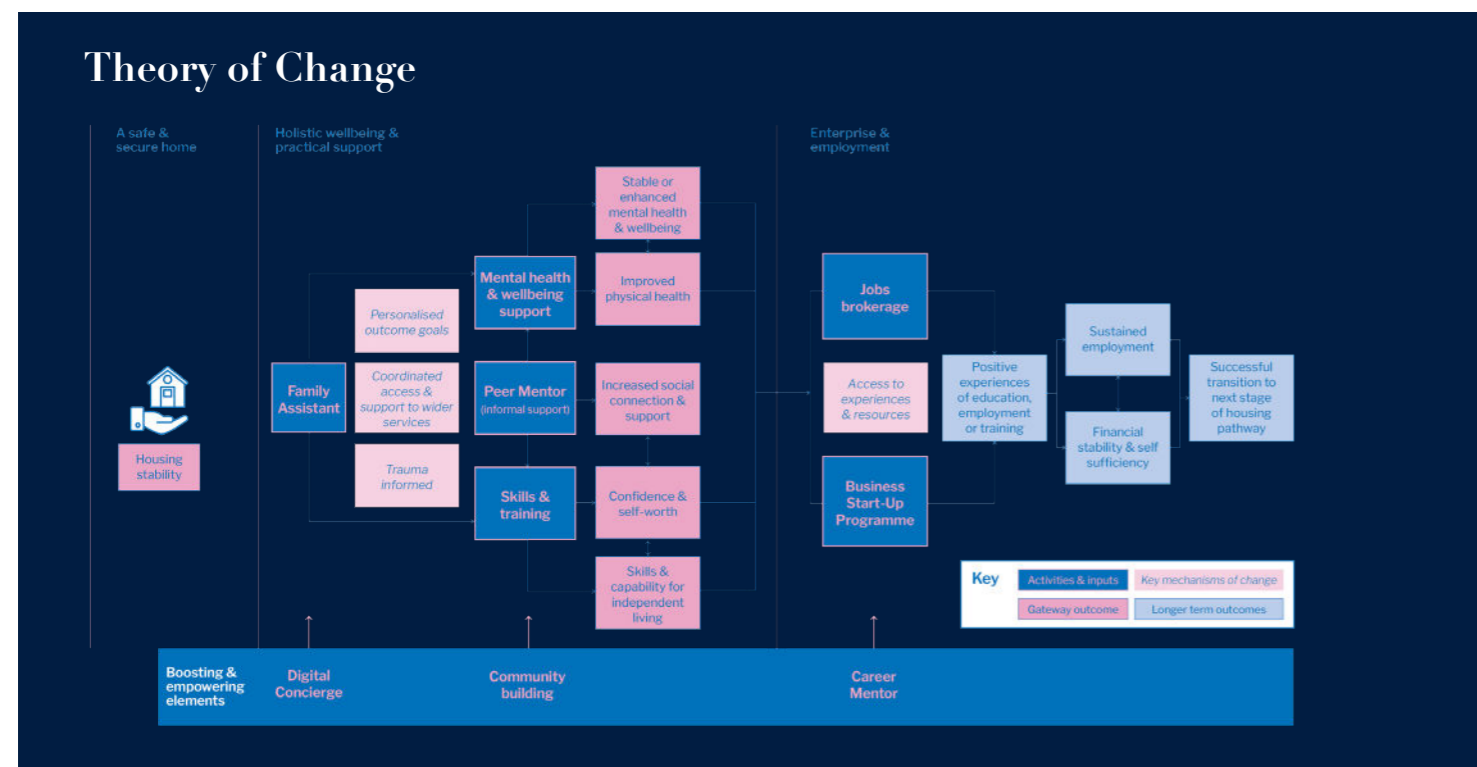
GHH's ambition is to demonstrate that its model supports young people and vulnerable families to achieve stability, greater independence and enable them to move to the next stage of their housing journey. It also wishes to evidence wider public savings generated through this approach, becoming an agent for systemic change in the funding and commissioning of housing and support services. Part of the desired systemic change is to bring a stronger focus on early, multi-agency, intervention by commissioners, perhaps including a pivot towards outcomes-based commissioning for vulnerable young people and families.

GHH aims to exemplify a financially sustainable and scalable model, through which it will deliver a significant number of affordable homes, alongside tailored support services, to improve outcomes for c.1,600 children, young people and families over the next 10 years.



GHH Theory of Change

GHH has developed a Theory of Change¹ that highlights its key activities and priority target outcomes, all of which build towards ability for a tenant to sustain a tenancy independently after they move on from GHH:



The ultimate goals of GHH are to help tenants to sustain a tenancy independently and achieve long-term positive employment outcomes and financial stability, as a next stage of their housing pathway. These long-term outcomes will be underpinned by short-term outcomes including improvements in confidence, wellbeing, positive mental health, improving physical health and beginning to build skills towards tenancy sustainment and employment. Given the complexity of the priority group needs, it is expected that the long-term outcomes will take at least two years to be achievable. Hence, we would not expect to report on tenants moving on to other accommodation at this stage. This report focuses on achievements to date relating to positive engagement with support to develop life skills and improvements in physical health and mental wellbeing. These are important 'gateway' outcomes that will underpin sustainable long-term outcomes. Where there is evidence of longer-term outcomes (e.g. employment), these are particularly impressive given the relatively early stage of delivery.

Priority Group

Since the launch of the service, the model has transitioned from concept in design to implementation in practice. The original plan² at launch was to work with 8 Care Leavers³ and 3 families moving on from temporary accommodation. The assumption was that families would comprise 1 parent and 2 children with an average age of 10. The actual priority cohort for whom we have collected evaluation data, includes 7 care leavers, 1 young person at risk of homelessness⁴ and 3 families, with 5 children. Children's ages upon moving in are a broader range, from age 4 to 17. For the purposes of reviewing the Cost Benefit Analysis (CBA) we exclude the 17-year-old from the cohort of children, giving an average of 1.3 children per family aged 9.25 years.

¹ A Theory of Change is a comprehensive description and illustration of how and why a desired change is expected to happen in a particular context

² This was based on the exploratory cohort analysis Sonnet conducted with GHH and Cheshire West and Chester (CWAC) Local Authority during 2021 and 2022

³ Young people moving on from Children's Residential Care, CQC-registered provision and/or Semi-Independent living settings – all of which involve accommodation with a support package commissioned by the Local Authority

⁴ This situation has features that are broadly comparable to the Cost-Benefit Analysis assumptions for Care Leavers, which factor-in a high risk of unstable accommodation and homelessness and associated damage to ETE and Long-term Housing outcomes as part of the counterfactual

Whilst the LA have fed back that the Priority Group does not currently include their highest complexity cases, we note that 23% of the individuals that have been referred by the LA and have moved-in, were stepped down from high support need residential provision, including one Care Act Eligible individual. In addition, GHH has helped 69% of households to obtain formal diagnoses for mental health and SEND conditions that had not been previously identified, after they have moved in. As such, we believe it fair to conclude that GHH's Priority Group can be described as having "complex needs".

Building a thriving, supportive and safe community for all tenants is a core element of the GHH model. As such, the Priority Group of 11 households, live alongside 11 General Needs and 7 Market rent households, all of whom have been allocated properties following a thorough application and matching panel process.

In addition to the 11 Priority Group tenants referred to above, evaluation data has been collected for two additional young people who are receiving support but have been allocated General Needs accommodation; their lived experiences include homelessness, experience of temporary accommodation and being care experienced.

This evaluation report

This report is intended to offer an early-stage view on:

- Feedback from stakeholders including tenants, GHH staff and public services on their experience of GHH, the difference it has made and the lessons learned. This is to enable us to report on any issues or recommendations on how the service may be strengthened for the remaining part of the proof of concept; and
- Whether and to what extent there are indications that the service is achieving the expected outcomes (focusing initially on steps taken towards gateway outcomes such as confidence and social engagement).

In addition to the above, we have reviewed the outcomes data and cohort composition to assess how closely the results align with the assumptions made during the service design phase. This analysis also identifies any known or anticipated changes to the assumptions underpinning the projected Cost Benefit Analysis, compared to the version published in August 2024.

In our conclusions, we reflect on Critical Success Factors that can be taken forward by GHH in its proof-of-concept site, as well as lessons that can be drawn out for its potential expansion to other sites. These findings include points that are of relevance at the policy and public service commissioning level to highlight ways of working that help to achieve positive outcomes for the priority groups. Amongst others, we highlight a comparison of GHH's service to the recommendations of the recently-published Housing First evaluation⁵, being a broadly comparable service and priority group cohort.

This report includes two case study summaries. These have been gathered by interviewing tenants and GHH staff, and permission has been obtained from tenants to publish these. Names have been changed to protect the identity of individuals.

Methodology

This interim evaluation has been delivered by:

- Semi-structured focus interviews with: Tenants (during the first year of delivery), Cheshire West and Chester (CWAC) Heads of Service and representatives of the local youth employment service, GHH staff and an employer with whom one tenant has been placed. These were delivered during January and February 2025;
- A summary of key service engagement and output data to February 2025, distilled by GHH from their Management Information System;
- Themes and insights from regular reflective 'lessons learnt' sessions, facilitated by Dartington Service Design Lab with GHH staff. These were designed to support a process of continuous quality improvement and were informed by short feedback surveys and qualitative feedback from tenants, staff and wider stakeholders;

⁵ https://assets.publishing.service.gov.uk/media/671a70221898d9be93f75db4/Housing_First_Final_Synthesis_Report.pdf

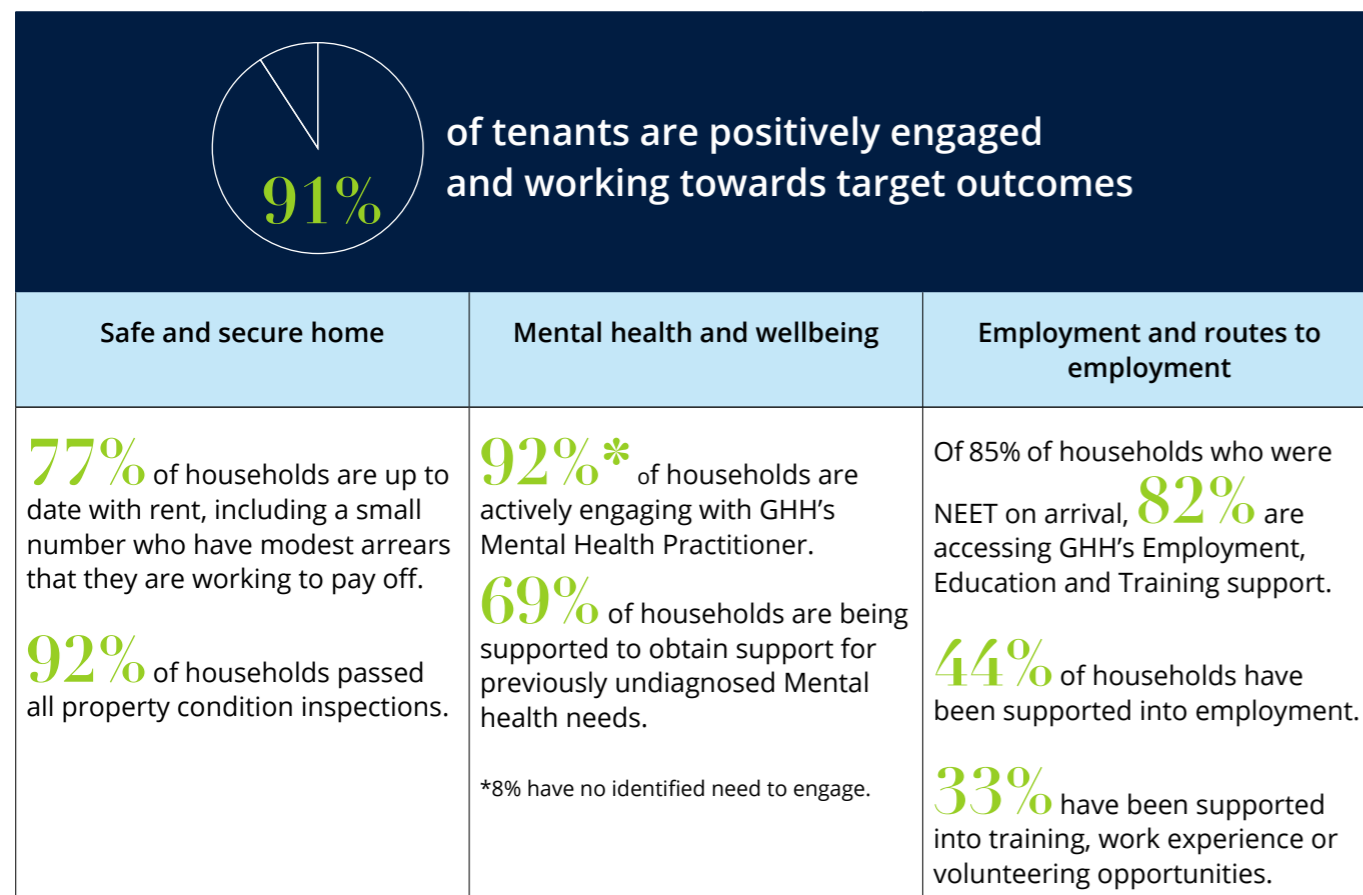
- A review of anonymised outcomes data from tenants who have given permission for their information to be used in evaluating the service (although given the relatively early stage of delivery – these data are limited). This evaluation draws on data relating to 11 priority group and 2 general needs households gathered between July 2023 and December 2024; and
- A rapid evidence review of other similar interventions and evaluation evidence to assess how GHH compares.

This report is intended to offer a summary of findings, rather than a detailed exploration of the views we have heard. Emerging themes and key findings from our review are discussed in section 2, with Critical Success Factors and systemic lessons drawn out in section 3 and conclusions and recommendations in section 4.

The scope of work for this report does not include a detailed update of the 2024 Cost Benefit Analysis projection. However, this report does include high-level comments on how differences between the actual and expected cohort (such as the number of children per family), affect the projected net savings. It also looks at progress, direction of travel and provides evidence to support the likelihood of the projected outcomes value being achieved. A final evaluation report will be prepared after September 2026. This will focus on outcomes data reported and a detailed evaluation of actual costs and outcomes and benefits delivered.

Results to date

Overall progress towards Theory of Change long-term outcomes



Learning from delivery so far

Experience of tenancy set-up and moving in

This section comments on experiences following the flow of interactions, following a journey from initial contact to moving on.

Awareness of the service

Partnership working has led to effective processes for Local Authority services to identify and refer tenants who fit the profile of the service before review and approval by the GHH 'matching panel'.

GHH and CWAC have built an effective mutual understanding and awareness of the service and its priority group. Although there is a potential risk in depending on specific CWAC Heads of Service e.g. their departure could lead to a loss of valuable knowledge, the strong strategic relationships with these individuals bring clear benefits. Their involvement helps drive alignment, influence, and support at a high level, valuable to the success of the service. We note that it is not yet clear whether and to what extent there will be changes in the level of budget available for public services and around the political direction at local and national level around support for vulnerable people. At this stage, it appears to be too early to tell whether such changes will improve or diminish the potential for Local Authorities to support 'invest to save' initiatives such as GHH.

Awareness among other partner agencies is key to the relational model used by GHH, ensuring that there is effective joint working.

For example, the local school has actively sought input from the CYPF Practitioner to support them in de-escalating situations during school time, when needed. This step shows positive understanding amongst staff at the school that children at GHH may need different approaches, and that they know when to seek help and from whom. If this were lacking, there is a risk that a 'behavioural' response to incidents could exacerbate trauma (or similar) reactions and harm outcomes both at school and for GHH.

Referral and matching

The matching panel process – where an expert panel including GHH and CWAC staff reviews the suitability of referrals – appears to be working well. Stakeholders feel that GHH is gathering the right amount of information and asking appropriate questions to ensure potential tenants are a good fit for the community. There have been some concerns that potential tenants initially feel that the level of enquiry is excessive compared to other housing options. Introducing early-stage meetings between GHH staff and potential tenants has helped to answer and address that concern by moving to build a relationship more quickly. On balance, it is widely agreed that assessing potential tenants in detail is helpful both to ensure that GHH is a suitable place for them, but also to enable staff to plan and prepare to offer the support needed in a way that is tailored to their needs.

The LA has raised challenges around GHH's perceived risk aversion (e.g. declining referrals of tenants who are experiencing challenges with drugs and alcohol). They felt that GHH would need to be more flexible to avoid unduly narrowing the cohort who can benefit. GHH emphasises, and stakeholders acknowledge, that it needs to build a manageable and balanced community, and that introducing a larger proportion of tenants whose circumstances could risk destabilising the journey of others would be unhelpful.

GHH data that we have reviewed for this evaluation highlights the complexity of needs amongst the Priority Group, and we emphasise that it would be inappropriate to conclude that the group is 'low risk'. In particular:

- 23% of tenants were stepped down from high support need residential provision, including one Care Act Eligible person; and
- GHH has been supporting 69% of households to obtain formal diagnoses for mental health and SEND conditions. Diagnoses confirmed to date include: anxiety disorder (15%), PTSD (8%), Autistic Spectrum Conditions (ASC) (38%), ADHD (23%), and depression (8%). 23% of tenants have disclosed historical self-harming and are engaging with their CYPF to seek help to develop alternative coping strategies.

Whilst it is clear that the LA does have higher-risk/complexity cases on its books, it needs to be recognised that GHH is supporting people who have complex support needs.

Move-in process

The move-in process lays the foundations for work by GHH staff to build trusting relationships with tenants. It feels different than a normal household move, both because of the practical support that is offered but also due to the emotional support from the Children Young People and Families Practitioner (CYPF Practitioner). Tenants feel valued (potentially for the first time); this process builds trust that is needed to underpin successful service delivery and outcomes.

The move-in process was widely praised, notably that tenants usually visit their new home several times before they move in. This enables a building of relationship with the CYPF Practitioner and other GHH staff in the process. They are able to access additional allowances beyond statutory provision, where need is assessed, to choose their own décor/furniture and other household items. Tenants are supported to prepare their home prior to move in (e.g. assembling furniture) so that their move-in day is as easy as possible, and they can feel immediately familiar and at home. GHH provides a welcome pack, (which includes food items) which is greatly appreciated by tenants. This may be followed by fresh food recipe boxes on a weekly basis for all priority group tenants, based on an assessment of their needs. For some tenants, this is the first time they have been 'given' this level of financial and practical help: that can trigger some to ask 'why me' or to wonder what they have done to deserve that help. This offers a helpful opportunity for GHH staff to open conversations about self-worth and self-esteem as part of their work to build confidence, whilst recognising that the response to this help is akin to a trauma reaction and so needs to be carefully handled. GHH staff support tenants throughout this process and use the allowances as an opportunity to discuss and begin to rebuild their sense of self-worth.

Experience of service delivery once tenants have moved in

Service delivery

GHH has encouraged qualified staff to be creative and use their professional judgement to provide flexible support to tenants. They have built a service that can be patient, allowing tenants to make choices about the support they receive and the timing for that.

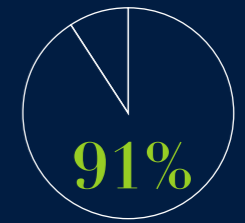
Staff have shown empathy and awareness, allowing tenants to seek and signal requests for help in range of ways and outside of scheduled meetings. Their compassion and flexibility has created safe spaces for tenants, and has encouraged disclosures of historical circumstances that are essential to understand needs and in planning for appropriate support. In one case, significant new disclosures were made after 12 months of relationship building work between the CYPF Practitioner and the tenant. In another case, encouragement to 'walk and talk' as part of a mental health intervention has laid the foundations for a tenant to begin overcoming anxiety and avoidant behaviour: a vital step on the way towards achieving long-term outcomes.

There is a clear philosophy of offering consistent, reliable support to young adults and families. For example, in its work with Care Leavers, GHH mirrors the kind of care and presence a parent would aim to provide for their adolescent child as they transition into adulthood. Referrers feel confident in the quality of support that tenants will receive.

GHH staff have delivered an average of **5** weekly interactions per Priority Group household

Staff are guided by each tenant's readiness to step outside their comfort zone, supporting them at a pace that feels right for them.

One of the tenants who expressed a desire to move into work was placed via the GHH job brokerage scheme. With effective support from GHH and an employer willing to learn more about trauma and how to support the tenant, the outcome is being sustained successfully, and new life skills are being developed. This has been made possible by the flexibility of the service and the skills and capacity of GHH staff to step in and provide more intensive support when needed – supporting both the tenant and their employer. In a more resource-constrained service, this level of responsiveness would have been far less likely. GHH is in the process of rolling out a four-stage programme to support tenants through an employment journey from 'not ready' to 'independently sustaining employment'. The four stages include engagement with local partner organisations and those who can offer volunteering or work experience opportunities. This is likely to be a helpful development.

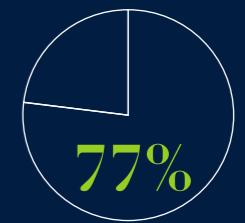


Achievement of long-term outcomes and distance travelled

Housing

At the time of writing, four tenants have successfully moved into employment. This is a positive sign and evidence of achievement of employment outcomes much earlier than had been expected.

It is too early to comment formally on tenants' readiness to sustain a tenancy independently. Outcomes of that nature are expected to be reportable towards the end of the proof-of-concept period. However, as of February 2025, 77% of tenants are either keeping up with rent payments or, if they've faced difficulties, have engaged with budgeting support and are following agreed repayment plans. This reflects meaningful progress toward the ultimate outcome. Some tenants have also shown growth by moving from needing reminders to maintain their home, to taking pride in doing so independently. Tenants have benefitted from an empathetic and trauma-informed approach adopted by GHH as landlord (balanced with upholding its legal responsibilities and meeting the needs, and ensuring the stability, of the wider community).

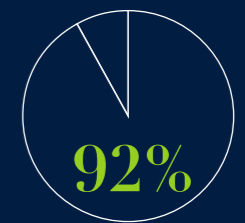


Mental health

The hypothesis at launch was that measures including Outcomes Star, CORE and WEMWBS would initially worsen, or potentially show conflicting views of wellbeing for up to 12 months for three reasons:

- Baseline conversations happen before trust has been built and tenants may be reluctant to present a negative picture;
- As trust builds, tenants may come to perceive that areas of life they had genuinely perceived to be healthy, are in need of support. A consequence of positive engagement is that tenants challenge their own baseline in subsequent review responses; and
- CORE and WEMWBS ask questions about how people feel in relation to specific features of their wellbeing and mental health, whereas Outcomes Star seeks a generalised score across key areas of life.

GHH staff seek, where possible, to challenge tenants who may be overstating wellbeing measure responses. However, it is often unlikely to be helpful to do so as tenants may not respond well to such challenge. As such, the risk that baselines are overstated needs to be accepted, but this is often the case with similar support interventions.



As we expected, the data captured does show the level of variability that was expected. In general, Outcomes Star scores show stability on average, which CWAC staff recognise as an achievement that should be celebrated compared to a prognosis of continuing decline had tenants not moved in to GHH. At this stage, the lead wellbeing indicator is more likely to be evidence that tenants have engaged positively with and attended support interventions including the My Plan and review process and regular meetings with GHH staff, and actively requesting to meet GHH staff when they feel a need to seek help (e.g. using the drop-in space). Evidence to show positive engagement is included in call-outs throughout this section.

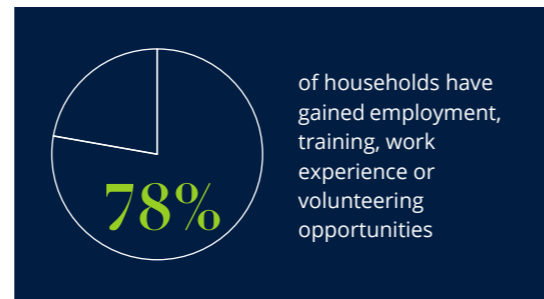
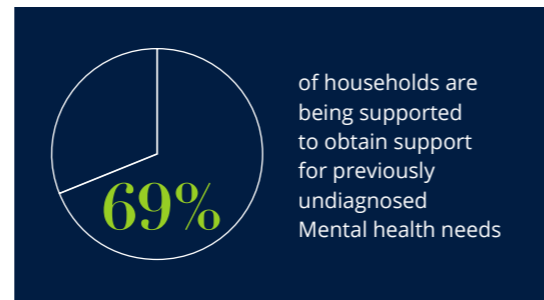
Employment

The four employment outcomes achieved have come through different routes, including GHH's own job brokerage service and partnerships with sector-specific workplace readiness programmes, some of which guarantee a job interview upon completion. One employment outcome has been achieved very recently. It is noted that GHH has stepped in to provide 'scaffolding' support around tenants entering the workplace to help ease their transition, including the offer of trauma training for all employers. This has included support acclimatising to a change in routine, active liaison with employers and, in one case, encouraging a line manager to join GHH's own trauma training to help give them an understanding of how best to support their employee. It is noted by some staff that this level of support and 'understanding' brokered with employers differs from a normal workplace experience, and needs to be stepped-down over time, to ensure that tenants are comfortable in managing the relationship with their employer independently.

Planning for move-on

GHH's ultimate target outcome is for tenants to be capable and ready to sustain a tenancy independently in general needs social housing or private sector rented accommodation. This is expected to take some time, which is why the service is designed to allow between 3 and 6 years (depending on whether the tenant is a care experienced young person or a family) to reach that goal. The service is in its early stages of delivery, with most tenants having been with GHH for one year or less. This was expected, and is proving, to be an intensive period of support. GHH is now looking toward planning for how and when support will begin to 'step down' to prove tenants' readiness to move on. Aligned with this is the need to plan to step down support for sustaining employment outcomes as tenants become ready to manage the employment relationship on their own, alongside the process of intensive support to enable them to enter a workplace.

Feedback from staff highlights the importance of patience, as they have observed meaningful outcomes – closely linked to the gateway outcome of confidence – that aren't explicitly captured in the theory of change. Observations include changes in body language, self-care and manifest signs of improving physical health (e.g. observing that a tenant's appearance has changed from "grey" skin tone to healthy). They also include tenants gaining confidence to leave their house to join social activities and to develop independence skills (e.g. shopping trips to town). Staff have also noted improvements in tenants' ability and desire to keep their house or flat tidy and in good repair, a further sign of confidence and growing life skills. These are not yet captured as data points, due to difficulty in quantification, but they are important signs of improving wellbeing that come in advance of data improving.



Feedback on alternative life courses

Outcomes need to be assessed both by reference to a baseline and a view of the trajectory that tenants would have been expected to follow had they not benefitted from GHH's support. Whilst this is a 'hypothetical', we have sought feedback from CWAC on this, given their in-depth knowledge of tenants and their background and direction of travel prior to referral.

Stakeholder feedback highlights that progress by all tenants is extremely positive. They noted that while tenants would likely have been placed in housing even without GHH, the alternative system would have required them to actively bid for properties – something that depends heavily on their capacity, confidence, and emotional resilience to cope with repeated rejections before eventually securing a home.

Stakeholders encourage GHH to see "stability" as a positive outcome achieved, where other services might have expected continued decline in alternative settings. Indeed, we have heard (including from tenants themselves) that they feel GHH has diverted them from a life course that might have ended in causing harm (or worse) to themselves.

- "6 months ago [Z's] route to employment was not foreseeable. [Without GHH, they] would be NEET⁶, with no qualifications, unknown housing situation and poor confidence and mental health. [Now they have] secure and safe housing, links to support on site, are socially active and have an offer of employment."
- "The families we refer are thriving... I can't tell you how amazing [they've done at GHH]."

Stakeholders perceive that tenants would have been less likely to achieve positive outcomes elsewhere:

- "[O] would have been sofa surfing. That has no cost to the LA but would be disastrous [for them]."
- "[Family H] would have been [in temporary accommodation] for at least 12 months with at least two stints in social care [for their children]... then they would have been homeless."

We have also seen stakeholders comment on the depth of damage that occurs in temporary accommodation: "we watch kids' reality go down".

The move into GHH with stable, safe, good quality, furnished housing and flexible support (with capacity to step up intensity when needed) is felt to make a significant difference to their outcomes, compared to alternative support options.

Revising the cost benefit analysis

At this stage, we can see that 4 tenants (36% of households) have achieved an employment outcome. At least one child in a family has been supported towards re-engaging in formal education at secondary age and others at primary age appear to be making positive progress. This suggests that GHH is on track to deliver positive Education, Training and Employment outcomes, as envisaged by the Cost-Benefit Analysis (CBA).

Feedback from CWAC services suggests that they believe children in at least one family have been supported to avoid potential escalation to being taken into care (for at least two children). GHH staff believe, based on their professional experience, that at least one other child's situation has been stabilised, avoiding re-escalation.

Assumptions as to the need for mental health support (or the risk of escalating conditions) appear to be supported by findings from WEMWBS and CORE reviews, but also the feedback of tenants, staff and other stakeholders. This appears to support assumptions made in the CBA around avoided costs of intervention.

During the course of this evaluation, CWAC has shared analysis with GHH around its assessment of service costs saved or avoided. This data materially aligns with the assumptions around cost savings in the original CBA report. As such, we have not amended the assumptions made on public service cost savings compared to the original calculation.

The average age of children (excluding the 17 year old) is 9.25, slightly younger than the assumed age of 10 in the CBA projection.

⁶ Not in education, employment or training

Overall, adjusting the CBA to reflect changes to cohort composition, gives an updated net saving of £1.2m compared to the original projection of £1.4m. The most significant driver of this change is the number of children per family, which reduces the number of children at risk of being taken into care.

The savings/economic benefits relating to children are measured at present value, with key items being measured over:

- 8.75 years (for costs of residential children's home provision between their age at moving-in and age 18, when those services are assumed to end); and
- Economic impact of being NEET includes lost economic productivity and welfare benefit costs for four years between age 18 and 22 (discounted to present value), with a lifetime earnings deficit added being the present value of a longer-term earnings shortfall compared to peers who were not NEET at this age.

Further detail on these calculations, underlying assumptions and the discount rates/methodology used can be found in the Cost Benefit Analysis projection report. Whilst the change in age for the actual group has some impact, the more significant effect comes from the number of children included in the workings.

Overall, the findings from this evaluation appear to validate the Theory of Change, published on the GHH website in September 2024. There are indications of positive progress towards long-term target outcomes (notably employment and tenancy sustainment). As was expected, progress at this stage primarily relates to the 'gateway' outcomes: confidence, social connection and engagement with support that will lay the foundations for further service delivery and progress towards achieving longer-term outcomes. We also see signs of tenants developing life and tenancy sustainment skills including working to manage the condition of their homes independently and adhering to agreed rent payments (or working with GHH to implement and adhere to a debt repayment plan).

Validating the Theory of Change

Indicators of mental wellbeing may reduce or stabilise for a period after moving-in: it is important to track this as a sign that trust is building alongside measuring 'outputs' that show active engagement with support (particularly during the first year after a tenant moves in).

It has been observed that the Theory of Change does not explicitly include physical health outcomes. The CBA projection published in August 2024 includes some physical health manifestations of mental health (e.g. costs of medical treatment where there is a risk of self-harm) that have been validated by stakeholders and tenants in interviews for this report. GHH may wish to assess whether tenants have physical health conditions that could be aided either by their provision of safe, suitable housing or through other forms of support that align to, but are not specifically articulated in the Theory of Change: for example, encouraging tenants to 'walk and talk' as mental health intervention has a potential physical health benefit. This needs further exploration to ensure any savings/impacts claimed are robustly attributable to intervention by GHH.

George

George moved in to GHH after a series of temporary placements in residential care, with family and in semi-independent accommodation. This led to feelings of instability and uncertainty that were affecting his ability to build social connections and achieve his potential.

Support from GHH has enabled him to feel secure and safe, and to build connections within the community and the workplace. GHH's job brokerage scheme supported him to achieve his goal of getting a job. This is underpinned by feeling safe and stable in his own home for the first time since he was 9 years old.

He is better able to take care of himself, eating healthily for the first time in years, causing a noticeable improvement in his physical appearance. GHH's weekly foodbox delivery has helped build his routine. He is regaining his confidence, and he feels that his mental health is improving.

He has taken up a hobby and is bringing knowledge from his job back to benefit the community.

George has told GHH that he believes he would have been driven to take his own life if he hadn't been placed at GHH. Now he has a sense of safety, stability and purpose, and is regaining control over his life.

“ I feel it's a lot better because for the first time since I was about 9, I've got confidence. That's cause I've moved around so much in my life, bouncing between different care homes. I feel like for the first time I've got security 'cause I know that I can stay where I'm at the moment. It's improved a lot.

“ Employment gave me a clear goal and focus to do, which has made me feel better than I did a few months ago.

“ I like it when it's just talking casually; they listen and respond to what I'm saying, which makes it really easy to talk freely and have a conversation about different stuff.

“ What makes the difference is *who's* doing it. I never had a social worker who would do the job to put it bluntly, most of them wouldn't even do the notes. And if I ask them to do something, they would just keep putting it off. That's the difference with Grosvenor. They care, if that's the best way to put it. It's a lot of little things put together.

Critical Success Factors

What's making the difference at local level?

System-wide lessons learned

A key reason GHH is proving effective – consistently recognised across all interviewed groups – is its highly relational approach, built on intensive efforts to establish trust with tenants. This is made possible by the diverse skills within the team and manageable caseloads.

While the support provided isn't beyond the capability or training of Social Workers or NHS mental health professionals, GHH is able to deliver its service, often exceeding the scope of statutory services, with a level of intensity that public sector services simply can't sustain due to resource and workload constraints. The UK has a highly trained and skilled workforce with the knowledge, expertise and skill to deliver similar support, but often lacks the time, capacity, and flexibility to do so at the same depth as the GHH team.

Alongside this, patience is key to developing trust. In the short term, this involves creating a welcoming shared space where tenants can drop in without pressure or expectation, giving them time to feel comfortable. Over the longer term, it means giving tenants the space to engage with support and make decisions about their future at their own pace and on their terms.

This approach has been key to developing trust during the first year of delivery, such that tenants have felt comfortable to make disclosures to GHH that they have not previously spoken about.

Staff report feeling empowered to take a creative and flexible approach when supporting tenants, tailoring their interactions to meet people where they are – whether that's through a walk-and-talk in the park or a chat while out shopping.

This contrasts with statutory services that tend to meet either in formal settings like offices, treatment rooms or in service user homes. The **flexibility and creativity** that GHH is able to offer is a third key lesson for wider systems seeking to improve support to families and care leavers.

Local lessons

The close working relationship between CWAC and GHH, as well as between GHH and other partners (including employers) is critical to successful outcomes. In this sense, the strength of a relational service extends beyond its ways of working with the priority group, to the way it relates to all stakeholders, partnering together to achieve good outcomes.

GHH has reached capacity at the first site in Chester. This means that new vacancies will become available when tenants begin to feel ready to move-on, which is expected to happen in around two years' time. The acquisition of a new site in Ellesmere Port will deliver additional housing to meet demand from CWAC. When the time comes to fill vacancies in the proof-of-concept site, GHH will need to balance CWAC preference to refer higher complexity cases, with the need to maintain a stable community. This will need careful discussion at the Matching Panel: the existing robust review and application process will be critical.

Features identified from other similar evaluations

The October 2024 Housing First end-of-pilot evaluation⁷, which represents a broadly comparable housing plus support intervention for a comparable cohort of tenants, highlighted a number of recommendations that appear to be pertinent to GHH. The table below summarises selected recommendations from Housing First evaluation and highlights how GHH fits with, meets and enables action against these:

Housing First recommendation	GHH as a response
Moving more quickly to agree a housing placement – there was an issue with some professionals seeking to develop 'readiness' for housing before making a placement (where the HF premise is to move quickly to housing before other actions are planned).	Subject to the matching process, GHH is in a position to offer a quick move-in without the need to 'bid' for a house. The service is specifically aimed at people who are not 'ready' to sustain a tenancy independently, hence delays between referral and move-in are minimised.
A new source of Housing is needed because reliance on social housing providers still leaves a HF initiative subject to a waiting list for property to become available.	GHH has accessed investment from the Duke of Westminster to fund the acquisition and fit-out of high quality homes as a responsible landlord. As such, it has released flexible resource that sits outside the statutory system and is available for immediate use for tenants who meet referral criteria.
There is a need for communal space and/or community social activities and Group Work within the programme to help people in the service to build connections. This is challenging where service users/tenants are dispersed around social housing units across a Local Authority or regional area (and it can even be challenging in a more contained area such as a London Borough);	GHH properties are in close proximity to each other, comprising market rent tenancies, tenancies on rates equivalent to general needs social housing and Priority Group tenancies referred by CWAC. This has built a community, where 'non-supported' tenants commit to engage in activities to help those who are receiving support. The tenant hub and community space on site is readily accessible to tenants during office hours and is well used for a wide range of engagement opportunities.
There needs to be a stronger emphasis on achieving Employment, Education and Training (EET) outcomes – although it is recognised that these require time and patience and may require longer than any of the evaluation studies/pilots on the HF programmes covered.	GHH has placed strong emphasis on EET outcomes as a key long-term target, and has already achieved three positive outcomes of helping tenants to access paid employment. These outcomes have been achieved sooner than expected.
There needs to be a stronger therapeutic focus and better access to mental health interventions.	The introduction of a Mental Health nurse role has added to GHH's capabilities in this regard. The service has also been able to facilitate direct access to therapeutic support from partner agencies.
The HF service needs stronger links with Corporate Partners (again, looking at routes to achieve EET outcomes) and partners involved in EET readiness work in general.	GHH is in the process of developing its job brokerage scheme. It has already built strong connections with local employability skills organisations/programmes as well as its direct connection to other Grosvenor-owned operations in the area. Work is also underway to partner with local VCSEs who offer volunteering opportunities. This development is ongoing as more tenants build towards readiness to begin to develop confidence and skills.
There needs to be better information and training for referral partners on eligibility criteria and better information flows to ensure risk is assessed clearly enough and planning for service delivery is detailed enough. Specifically, there needs to be a formalised approach to information sharing between referrers and the HF service.	GHH's strong connections with CWAC, from initial concept through detailed design and now into delivery have ensured that there is good understanding between GHH and the Heads of Service who manage its referral pathways. The data sharing agreement between CWAC and GHH has formalised the process to enable tenant information to be reviewed by GHH prior to matching panel.

Overall, GHH addresses some of the significant recommendations emerging from the 2024 Housing First evaluation. This was not intentional, given that GHH entered conceptual development in 2020 and detailed development progressed prior to launch during 2023/4. Rather, it is a by-product of a design process that was outcomes- and needs-led and which took a system-wide view of support to achieve those outcomes.

⁷ https://assets.publishing.service.gov.uk/media/671a70221898d9be93f75db4/Housing_First_Final_Synthesis_Report.pdf

The Housing First evaluation identified positive wellbeing outcomes, amongst others, but noted that the timeframe in which it was undertaken was too short to report substantive EET outcomes. The evaluation plan for GHH will be to re-visit in one year to report on wellbeing, EET and tenancy sustainment outcomes.

Enablers and challenges to the proof-of-concept site and further expansion

Proof-of-concept site

To secure the long-term sustainability of the Chester site, GHH will need:

- Visibility over long-term income streams: This is key to successfully encouraging tenants to engage. Exploration of the potential to obtain funding from commissioners is needed, alongside other potential revenue sources to enable the service to continue beyond the initial three-year term (and as a demonstration for other potential commissioners);
- To manage staffing carefully to protect the manageability of their case load; and
- To consider options to offer flexible support outside normal working hours, as more tenants begin to achieve EET outcomes and cease to be available to access support during current GHH office hours.

Further expansion

If the GHH service is to be expanded beyond the CWAC area, it will need:

- **Ongoing access to capital for investment and suitable communities of housing to acquire:** The majority of properties at the proof-of-concept site has been acquired by Grosvenor Hart Homes, a Registered Provider. Of these properties, General Needs properties are allocated under a local lettings policy and Priority Group properties sit outside the public sector waiting list and allocation system. This has enabled GHH to accept referrals based on need within specified parameters and has allowed greater flexibility in the management of tenancies. Where urgent housing with support is needed, this private sector housing response offers a more agile solution. It relies upon a landlord having a strong ethical framework and a willingness to accept sub-market rent for some properties (differing tenures to deliver a blended rent yield on properties acquired);
- To invest time into **building strong connections with Local Authorities and other potential commissioners, and delivery partner agencies before launch at new sites;**
- To be prepared to **present and explain its risk appetite.** Tenants at the proof-of-concept site are perceived by LA stakeholders not to be the 'highest complexity' end of the CWAC services caseload (which appears to be a fair comment). However, as is clear from the alternative scenarios presented (including by CWAC Heads of Service) and from data shown earlier on the needs that GHH is identifying before and after tenants move in, they are far from 'low' needs; and
- Expansion relies on **identifying sites that meet the GHH specifications and profile** that are available for acquisition to develop similar communities elsewhere.

Risks and Opportunities

As GHH looks to the longer term, there may be opportunities to discuss a commissioned service model with funding (or a meaningful contribution) from statutory services, perhaps aligning to the savings/benefits identified in the eventual Cost Benefit Analysis work. Other income streams may also need to be evaluated and considered. GHH is currently exploring potential for central government funding to sit alongside the LA. As is noted earlier, if this involves broadening service parameters, care needs to be taken to ensure that communities of tenants are balanced and that there is sufficient expertise and capacity to meet their needs. It is agreed, for example, that there would need to be additional specialist staff to enable GHH to accept referrals of tenants who are seeking recovery from substance misuse.

Liz

Liz and her daughter moved to GHH from temporary accommodation, where they lacked basic amenities, including for preparing food and cleaning clothes. Liz's mental health was deteriorating, with hospital admissions. Her daughter's anxiety escalated, and she was missing the final years of school. They had significant debt, further compounding mental health challenges.

GHH provided a safe and stable home, with support to buy furniture and household items. They now eat at a dining table instead of on the bed. They are building positive relationships through community events and Liz's daughter is beginning to rebuild her confidence.

Liz received support to enable her to return to work, helping her to improve her sense of purpose and bringing additional income to improve control over household finances, including a plan to repay outstanding debts. GHH has been supportive in allowing time for rent arrears to be repaid and supported Liz to access financial advice. GHH provided a private tutor to support Liz's daughter, who is gradually building back towards the aim of returning to formal education.

GHH is helping them on their journey, and they have the confidence to know who to ask for the help when they need it, and security in the knowledge that help will be provided when they need it.

“They are very supportive, very understanding, and caring. And they're there to listen. You feel confident because I'm quite a quiet, shy person, but with the GHH team, you feel like you can just go to them about anything, and they would be there for the family.

“Having a home and feeling secure in an area, especially with measures like ring doorbells and cameras in the street, really helps us feel safe.

“We have community activities like barbecues, sports days and movie nights... It's lovely to feel like we have a say in what happens here.

“It felt good to buy my children things for Christmas knowing I worked for it.

“[Work is] really nice, you go home in a positive mood because you know you've made a difference that day to somebody.

“With me going out to work, it's giving [my daughter] more confidence to go out herself. She's done things like her own shopping and managing her own money, which is a massive step.

Conclusions and recommendations

Achievements so far

GHH has successfully filled the available housing units at its proof-of-concept site with a group of young adults and families who have various support needs. After the first year, the service is making striking progress towards helping its tenants to process their previous experiences (including trauma), to begin rebuilding confidence and to work on improving their mental health as significant gateway outcomes. Where appropriate, GHH has moved ahead of expectations to support some tenants into paid employment. As other evaluations have highlighted, these outcomes often take longer than one year to achieve for a similar cohort. GHH appears to be on track to deliver key target outcomes that align with its Theory of Change and Cost Benefit Analysis (CBA) projection.

Our review findings support the assumptions used in the CBA's counterfactual scenario, which assumes that without GHH support, tenants would likely face delays in securing housing, a higher risk of housing breakdowns, worsening mental health, increased chances of children entering Local Authority care, and poor outcomes in education, employment, or training, among other challenges. Alleviating these issues has potential to deliver significant impact. GHH is focused on helping tenants to improve their circumstances, and Local Authority staff have emphasised that simply bringing stability is a valuable outcome compared to the likelihood of continuing decline.

Cost Benefit Analysis updates

Primarily as a result of changes to the cohort composition (with fewer children than expected in families who have moved, partially offset by a reduction in the average age compared to the original projection), the projected net saving to society would be projected to reduce to £1.2m from £1.4m.

The outcomes included in the projection appear to be validated by evidence gathered during this evaluation and some employment outcomes have been achieved sooner than expected.

Lessons for wider systems

This evaluation highlights this importance of:

- **Delivering services with patience and care**, ensuring support is available when vulnerable tenants reach out, being responsive, consistent and following through on promises.
- Being **quick to move to offer stable housing** (with support service provision) as a move-on route from Local Authority Care or temporary accommodation. The damage, particularly to children and young people, from instability in relation to this basic need can be significant. Waiting for people to demonstrate 'readiness' to move on may be counter-productive.
- **Flexibility to meet the needs** of the priority group when referrals are made is key. This is because Priority Group housing units sit outside and operate independently of the Social Housing and Council Housing systems, which involve waiting lists, priority criteria, and a 'bidding' process that can require a high level of emotional resilience to navigate.
- **Housing tenants who need support within one and the same community** improves access to that support and enables GHH to deliver it more efficiently. It also enables social connections to be built. The pepper-potting approach including market rate tenants enhances that community further.
- The techniques used by GHH team (who have moved to their current roles from the public sector), which are aligned with the formal training they received for and in their former public sector roles. They would say the reduced caseload and flexibility of resourcing at GHH has enabled them to apply their training properly, rather than doing anything that was unfamiliar to them. **The system elsewhere has staff who would know how to deliver GHH support but are prevented from doing so by their caseload.** The skills are readily available in the market to support the scaling-up of GHH.

Lessons for the remainder of the proof-of-concept site and expansion of GHH

- As the service grows and evolves, it is essential for GHH to preserve the key factors that underpin its success – namely, staff patience, flexibility, and availability, supported by manageable caseloads.
- We can see that there is good progress towards employment outcomes: this means that more tenants are likely to be away from their homes during GHH's working hours. GHH may need to look at ways to offer support outside of normal working hours (staff appear to be willing to consider options for this).
- Planning will be needed to gradually reduce GHH support on a case-by-case basis, ensuring tenants are clearly able to manage and sustain a tenancy independently before they transition out of the service.
- The process of managing a move-in, enabling tenants to be involved in planning and preparing the property, is highly valued, but needs to be done minimising delays before they begin their tenancy. Future sites need to be brought close to readiness before referrals are accepted so that prospective tenants aren't left with uncertainty.
- GHH should take time, as it has with CWAC, to build relationships with key stakeholders and influencers in Local Authorities if it is expanding to new areas in advance of a launch. In particular, robust processes for data sharing and collaboration have been important foundations for the success of the proof of concept so far.
- GHH's acceptance that tenants have a high risk of struggling to sustain a tenancy without intensive support has been key to facilitating rapid move-in compared to other housing plus support schemes. This differentiator is key to enabling people to access the support they need when they need it.

Recommendations on future commissioning approach

Cost Benefit Analysis (CBA) implications

Commissioner behaviour is likely to be driven strongly by value for money. For some, that may be limited to a view of their own budget and over short time horizons. The CBA projection from August 2024, adjusted for changes to the cohort composition during the course of this study, highlights significant potential net benefits at strategic level for local and national public bodies. The most significant value remains to Children's Services⁸ and Housing Services⁹.

However, GHH's service should be considered at a strategic level across a number of Local Authority and other public services and looking at the wider value to society of providing effective support to vulnerable young people and families. Other important value is derived from supporting people into paid employment, bringing value to local economies and helping people to live independently of support from welfare benefits to the greatest extent possible.

Rationale for and value of supporting Care Leavers

A November 2024 Parliamentary Briefing highlights that¹⁰:

- 36% of Care Leavers aged 18 were moved into semi-independent transitional accommodation, which can attract high weekly costs that GHH understand can be in the range of £5k to £7k in some circumstances.
- Care Leavers are expected to live independently at age 18, compared to the average age for the wider population at which children move on to their first independent home of 24 (having benefitted from parental support prior to moving out and with ongoing access to advice and support after they move out).
- Nearly half of Looked After Children meet the criteria for diagnosis with psychiatric disorder (compared to an average of 1 in 10 across the wider population).
- 39% of Care Leavers go on to be NEET at ages 18 to 21.

The CBA highlights the short term value delivered by GHH in avoiding higher alternative provision costs (e.g. semi-independent accommodation) as well as the long-term value from supporting young people to engage with education, training and employment.

Beyond the positive CBA findings, GHH's service offers a robust option to meet the LA's Corporate Parent responsibilities and statutory duties to provide support for Care Leavers through to age 21.

⁸ £0.6m saving, primarily relating to avoiding children being taken into Local Authority Care or requiring statutory services interventions, but also avoiding costs of temporarily housing Care Leavers in residential Children's Home accommodation until suitable independent housing is available.

⁹ £255k saving, primarily relating to avoided costs of temporary accommodation, where GHH offers a faster move-on route for families who would struggle and are not ready to sustain an independent tenancy.

¹⁰ <https://researchbriefings.files.parliament.uk/documents/CBP-8429/CBP-8429.pdf>

Rationale for and value of supporting families to move on from temporary accommodation

In March 2025, Inside Housing ¹¹ estimated that 38,800 families with young children (aged 5 or under) are living in temporary accommodation, including 3,500 in Bed & Breakfast accommodation. 67% of these are estimated to spend more than six months in temporary accommodation. Shelter ¹² estimated in August 2024 that there are 151,000 children in total living in temporary accommodation, an increase of 15% compared to 2023. In 2022, Shelter ¹³ found that two thirds of families in temporary accommodation had been there for over 12 months: this aligns with the view of one stakeholder who reported an expectation that one family would have been resident in temporary accommodation with them for at least a further 12 months had they not become tenants of GHH. The cost of providing temporary accommodation in England during 2024 has been assessed at £2.3bn¹⁴. Beyond that direct costs, the damage to education outcomes alone (e.g. research from Shelter¹⁵) highlights the significant long-term impact of temporary or poor quality accommodation on outcomes for children. There is a strong incentive for Councils to consider options that support a swift move-on to suitable, safe and long-term housing options: even more so to find options that offer support aimed at improving longer term outcomes and ability to sustain a tenancy independently for these households.

Commissioner appetite to purchase GHH's service

Feedback on GHH's performance to date has been positive. It is expected that some commissioners would want GHH to accept some referrals with a higher risk profile (e.g. less progressed along a recovery pathway from substance use challenges). The GHH proof of concept has demonstrated strong indications of success working with a cohort who appear to have significantly above average need, and with that success there is strong potential for the service to be broadened. However, we note that GHH must have care in building a community in which all Priority Group households are able to access support in an environment that feels safe. If higher complexity tenants are to be accepted, potential commissioners we have spoken with appear to accept that there would necessarily be an increase in the cost of the service, because higher risk would have to be held by the team. We would expect that the savings arising from supporting higher complexity tenants would also increase, such that the cost/benefit result would remain positive.

Recommendations for commissioners

Overall, it is positive to hear that potential Commissioners would actively consider paying for the GHH service, in principle. Based on feedback from stakeholders and the value of providing a housing plus support model identified in the August 2024 CBA and in updated research for this report, Local Authorities should consider using the GHH model as an option to facilitate a swift move on from temporary accommodation or children's social care settings in a way that creates potential for positive long-term outcomes. The wrap-around support is viewed extremely positively by both tenants and CWAC, enabled by their patient, relational approach, lower case load and flexibility to move at the tenant's pace.

¹¹ <https://www.insidehousing.co.uk/insight/how-many-toddlers-and-babies-are-living-in-temporary-accommodation-in-the-uk-86337#:~:text=Extrapolating%20our%20data%2C%20we%20estimate,with%20children%20aged%20under%20five.>

¹² https://england.shelter.org.uk/media/press_release/children_homeless_in_temporary_accommodation_hits_shameful_new_record_of_151000_up_15_per_cent_in_a_year

¹³ <https://blog.shelter.org.uk/not-so-temporary-accommodation/>

¹⁴ https://england.shelter.org.uk/media/press_release/homelessness_bill_doubles_in_five_years_to_2_3bn

¹⁵ https://assets.ctfassets.net/6sxvmndn0s/AZvOBS2tanDweEV0ckiiP/71a9a9d622c24680c358fb49b7c7094c/Teachers_Research_Report.pdf

Appendix to GHH Interim Evaluation

Cost Benefit Analysis overview

June 2025

Cost benefit overview

The diagram below summarises the updated Cost Benefit Analysis projection:



The tenant archetypes and modelling assumptions are set out in the August 2024 CBA Report. In brief, the archetypes are:

- **Care Leaver (8 tenants):** typically, aged 18 moving on from Local Authority care into a first tenancy, where there may be a risk that the tenant is not ready to sustain a tenancy independently and requires additional support.
- **Family moving on from temporary accommodation (2 tenants):** a family that has been provided temporary accommodation and is seeking to move on but requires support before they are able to sustain a tenancy independently (e.g. mental health, employment/employability, tenancy management skills etc.).
- **Single parent fleeing Domestic Abuse (1 tenant):** similar to the family archetype, but with the nuance of moving on from refuge accommodation and a likelihood of higher intensity support needs in some areas e.g. mental health.

Breaking down savings by policy area

The diagram (right) shows the breakdown of the £2.3m projected saving by policy area:

- **Children's services:** savings from avoiding children being taken into LA residential children's home provision and resources saved from avoiding the need for cases to be supervised by LA social workers;
- **Economy:** productivity gains from supporting adults to secure employment (measured over three years), and longer-term savings from supporting young people to engage with education and employability initiatives to reduce the risk of being NEET in early adulthood (including lifetime earnings penalty avoided);
- **Police and crime:** reduction in risk that young people and families might be drawn into or become victims of crime or Anti-Social Behaviour, including costs of arrest, investigation and broader costs of crime;
- **Housing:** reduction in costs of providing temporary accommodation, including the risk of future journeys into and through temporary housing, as well as avoided costs of rough sleeping services; and
- **Health and Mental Health:** reduction in resources needed for drug and alcohol services and mental health interventions including crisis services and in-patient support.

The most significant savings are to Children's Services, due to the potentially significant costs avoided for residential provision over an assumed 8.75-year period per child (average age is 9.25 years on move-in to GHH, statutory duty ends at 18). The local economy also benefits significantly from productivity gains by supporting adults into work three years earlier and helping young people avoid being NEET at ages 20 to 24, thus preventing a lifetime earnings penalty.

Updates have been made by Sonnet in computing projected CBA savings from the interim evaluation. These reflect the tenant split, average number of children per family, and their average age on moving in. In summary, the reduction in the average age of children extends savings duration and increases the value delivered. This is offset in part by the reduction in the number of children per family. Other assumptions remain as agreed between GHH and CWAC.



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