

## First Research Results From The Outcomes Star

St Mungo's has led the sector in developing the measurement of soft outcomes for homeless clients. St Mungo's Outcomes Star is a system that enables clients to work with their keyworker to assess 'soft' outcomes, such as improvements in life skills, health and personal responsibility.

### What really helps homeless people

We are pleased to share findings from our first research and analysis. The findings, conclusions and recommendations are drawn from quantitative soft outcomes data from 122 clients in four of our hostels, plus qualitative research into a sample of 18 clients, and interviews with hostel managers and workers. The research was carried out by Triangle Consulting with funding from the London Housing Foundation. It compared clients who had completed at least two outcome stars, comparing their first and most recent star readings.

### Some Key Findings

- Outcomes star data has the potential to function as an effective management tool, and can enable homeless agencies to monitor and share achievements and identify obstacles to success
- Nearly three quarters of clients benefited from time in hostels over the period of the study\*
- There is considerable variation between hostels – with clear key indicators of success
- Positive outcomes peak at 6 -12 months, longer stays can be associated with a decline in progress and an increase in mental health problems. Clients with multiple needs were most likely to slip backwards substantially



*\*Those benefiting include 62% making clear progress and a further 11% staying stable. This figure includes some long-term, lower-needs clients in the hostel for months before the Star was introduced, who had less room for improvement*

**Some Key Findings (continued)**

- The research showed greatest change in clients' ability to manage their accommodation and in substance misuse – with drugs misuse being the most common presenting need, and clients on a script most likely to make progress. Around 80% of those with a drug problem were on a methadone script
- The clients who are most likely to do well in St Mungo's hostels are British men under 45 – the majority group. However, benefit was seen in all client groups
- Those clients engaging in activities, outings and life skills are most likely to make progress.



*The most successful hostels have funding that enables a good programme of on-site activities, outings and life skills*

**Hostels that are doing well:**

- have stable and clear management with clarity of purpose that clients are there to engage, change and move-on
- benefit from on-site specialist health services
- benefit from a good programme of on-site activities, outings and life skills
- have a client worker ratio of 5-7 clients per worker
- benefit from progression accommodation such as 'learner flats' within the hostel site
- have a majority of clients with indicators of success e.g. drugs needs and on a script rather than mental health issues
- have specialist workers for particular sub-groups of clients who share a similar profile of needs
- are smaller (up to 50 beds) and have single sex environments

**Clients that are doing well**

For individual clients the key to success would appear to be clarity about the purpose of the hostel for them. Significant results are seen from those who are engaging with specialist services and receiving the practical help that they need. Hostels can also help clients to achieve positive outcomes by being very clear about the expectation that clients engage and are proactive in making sure they do so.

***“We keep reinforcing why they are here, that it is to access support ... we are on their tails the whole time”*** St Mungo's Project Worker

**More about the St Mungo's Outcomes Star:**

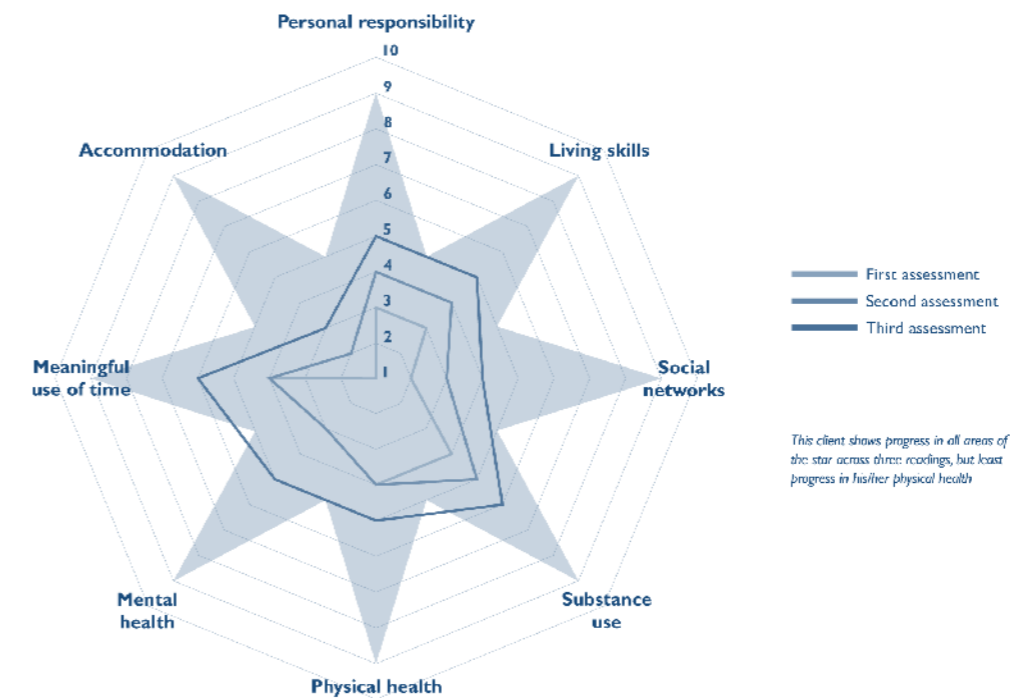
St Mungo's has led the homelessness field in identifying the need for and commissioning a soft outcomes monitoring tool to assess service user progress across all of its diverse projects. Triangle Consulting was commissioned to develop a tool and the result was the St. Mungo's Star. An updated and revised version of the St. Mungo's Star - the Outcomes Star – is now the leading outcome measurement tool in the homelessness sector and is also being adopted for use with other Supporting People (SP) client groups. Central Government and an increasing number of London Local Authorities have also shown an interest in the Outcomes Star and now see the use of a distance travelled outcomes tool such as the Star as good practice.

However, no agency (as far as we are aware) has yet taken a systematic approach to the analysis and use of data from the Star to learn about what works within its service as a basis for service improvement. That was the focus of this piece of research.

The pilot use of the Star has proved successful and we are planning to re-launch and embed it into our future work.

***“It's a good way to get people to talk and open up”***

***“One client said it made him look at himself in a way he perhaps hadn't before”***



**More on the findings — by client profile**

The clients who are most likely to do well in St Mungo's hostels are British men under 45 – the majority group in the hostels. However benefit was seen in all clients groups.

**Sex:**

Women were least likely to do well - this appears attributable to a combination of women clients having greater problems to start with (being more likely to score very lowly on the outcomes star) and currently being less well served in mixed hostel situations.

There is much less correlation between outcomes and other client characteristics.

**Age:**

74% of those aged 26-45 show some benefit compared to 71% of those over 45, but for older residents the benefit for nearly a quarter of older residents was simply remaining stable. Older people tend to have had their issues for longer, be more entrenched and possibly find it harder to change.

**Ethnicity:**

British clients seem to have an advantage. When the 15 people making most progress are drawn out as a sub-sample, 14 of the 15 (93%) are British. Caribbean and (to a lesser extent) African clients are least likely to show progress overall.

However, the ethnic group doing best overall is Portuguese residents of a large hostel, despite the highest drugs use problems of the study; on average these clients progress 2.4 points on the Star between readings. Within the Triangle research, this was attributed primarily to the fact that there were two dedicated workers for Portuguese clients in the



*A client takes part in our Wood Workshop training*



*Benefit was seen across all client groups. The research also demonstrated the benefit of targeted support to minority groups, as with our Portuguese clients*

hostel. Indications are that this is having a significant effect on this particular group of clients and indicates a similar service response could be trialled for other groups eg women.

**Language:**

The difference in results between those with English as a 'mother tongue' and not is marginal.

**Need:**

The research shows relatively little variation in how people progress according to the key needs. Overall, those with drugs problems and on a script are the most likely to make progress and those with 'other', alcohol and mental health needs are the least likely to make progress. However, the differences are relatively small and all groups make progress. Around 80% of those with a drug problem were on a methadone script.



*Hostels that are doing well benefit from on-site specialist health services*

**Length of stay:**

The research shows a significant pattern as an average across the four hostels, with positive outcomes peaking for clients in the hostel 6-12 months and then dropping off substantially after that. Of clients in the hostel over one year, only 54% make positive progress compared to 72% in the hostel for 6-12 months. Staff at some projects reported a visible drop in motivation in clients after a year. However move-on within the hostel appears to be helpful in encouraging clients to maintain motivation. Continuing engagement with keywork, plus the provision of, and participation with, onsite activities and other interventions also appears to be important in maintaining motivation. Thus two projects were able to maintain motivation for longer stayers in contrast with two that did not. It is pleasing that the project that had most problems maintaining engagement and positive outcomes after a year is currently being refurbished to provide onsite move-on progression as seen in the better performing projects.

**Clients who do not do well:**

The research also looked at clients who slipped back noticeably (i.e. by more than one point) in their Star 'scores'. For example:

- Two women slipped back at the larger hostel – both were aged 26-45 and had combined alcohol and mental health issues. One was also scripted. One was Scottish and the other Italian
- Five men slipped back markedly at the same project – all were English, most aged 26-45, four with drug problems and the other combined alcohol and mental health issues

## More about the hostels

The dynamics of the hostels in the research group was very varied.

The project that produced the best results is a medium size single sex project including training flats, with on site specialist workers, activities worker and funding that enables 5-7 clients per key worker, with good allocation for local move on. Its clients were most likely to be younger British men, with lower levels of mental health problems than for other hostels.

The research group included a large hostel housing a largely chaotic client group and, at the time, an unstable management team. For example, 85% of the clients in the research were on drugs (compared to 48% at some other projects). This project is currently undergoing refurbishment to enable the provision of progression and trainer flats within the site.

Funding for in-house specialist services is variable across the group. Only one hostel is funded to provide life skills training on-site and its outcomes were above average in the group.

The research found a very strong correlation between services being available in-house in the hostels and the take-up of those services by clients; where they are there (and staff are proactive), take up is high. Without them it is low or non-existent as few clients proved willing to travel far for services.

Formal keyworking take up varied markedly between the sites. This was attributed in the research to variations in client group and management cohesion.



## Conclusions – making more of the star

The Outcomes Star is now widely known and used within St Mungos. However, it is currently not used as widely or as consistently as it could be and the full potential of the Star has yet to be realised.

- We plan a 'management push' based on the revised New Outcomes Star and to link it to our development of person centred planning work
- We will be working with Thames Reach, Broadway and Triangle Consulting (with London Housing Foundation support) to develop a toolkit for interrogating Outcome Star data systematically
- We are employing an Outcomes Officer to work in our Performance Support Unit, whose job will be to analyse data and make service improvement recommendations
- Each hostel will be able to monitor the level of starting need on an on-going basis to assess whether it is receiving appropriate referrals, as well identify target areas for improvement with funders.

## Recommendations – improving services for homeless people

It is exciting that the first research material gives good evidence of clear ways forward:

- 1 Funders need to resource work with homeless people. The research has shown a high correlation between benefit and :
  - Good provision of on site specialist services
  - Good provision for onsite activities
  - Targeted support to identified minority groups
- 2 The research demonstrates that long stays can be problematic. St Mungo's and LA partners need to work together to ensure that clients have one or more of:
  - The opportunity to move-on within the hostel
  - A high provision of in houses services (including activities)
  - Good access to move-on to longer-term accommodation, preferably within a year
- 3 Outcomes targets will need to reflect the reality of working with very chaotic groups.
  - Many of our clients (up to 20% in the research group) are very chaotic and 'pre contemplative' (eg scoring just 1s and 2s on the Star rating) meaning that progress can be very slow. Initially, staying within accommodation can be a significant success
- 4 We need to further explore what the outcomes star data can tell us about working successfully with pre contemplative chaotic clients – initially findings suggest that smaller (or possibly segmented) projects, with generous onsite provision and a caring staff team do make a real difference.

***“There is a lot of good proactive work, a lot of running upstairs and knocking on people’s doors to get them to engage and we get feedback about the intensive and client focused work...we care about the residents and want them to do well”*** St Mungo's project worker

**For further information on St Mungo's Outcomes Star, please contact Liz Harper, Head of Performance Support Unit on 020 8762 5690 or email [LizH@Mungos.org](mailto:LizH@Mungos.org)**

St Mungo's is opening doors for London's homeless. Every year we help more than 10,000 homeless and vulnerable people find responsive and integrated solutions for problems with housing, employment, training and health.

**For information on subscribing to 'Briefings', please call 020 8762 5569**

*Dissemination of our good practice is funded by charitable voluntary income.*

St Mungo's, Griffin House,  
161 Hammersmith Road, London W6 8BS  
**Tel: 020 8762 5500**  
**Fax: 020 8762 5501**  
**[www.mungos.org](http://www.mungos.org)**

Charity exempt from registration  
I&P Society No. 20598R Housing Association No. LH0279

