Inquiry into the provision and regulation of supported accommodation in Queensland

Submission No:	192
Submitted by:	Micah Projects
Publication:	
Attachments:	

Submitter Comments:



Breaking Social Isolation Building Community

Micah Projects' Submission to Community Support and Services Committee Inquiry into Supported Accommodation in Queensland

Micah Projects is a leader in community services with 28 years' experience providing advocacy and support to some of the most vulnerable groups across Brisbane and Queensland. Micah Projects:

- provides specialist homelessness services to individuals and families;
- operates the Brisbane Domestic Violence Service supporting people experiencing domestic and family violence;
- supports young pregnant and parenting women and their families through three Young Mothers for Young Women programs;
- operates an inclusive health and wellness hub for people experiencing disadvantage;
- provides integrated support to the tenants at Brisbane Common Ground Supportive Housing;
- operates two social enterprise cafes; and
- through Lotus Support Services is the leading supporter of Forgotten Australians and care leavers in Queensland.

Micah Projects also advocates for systemic change and improvements, and is often at the forefront of innovative practice and responses to emerging need and disadvantage.

Micah Projects has worked and partnered with private supported accommodation providers for over 20 years, supporting and advocating on behalf of residents. Our Integrated Health Clinic in South Brisbane supports many Level 3 accommodation residents with their health needs and our outreach teams regularly visit facilities.

Our submission to the Inquiry responds to the issues detailed in The Public Advocate's report *Safe, secure and affordable?*

Micah Projects believes that there is a need for this type of accommodation for some people in our community such as those:

- unable to establish or maintain standard tenancies (in private, public and community housing)
- if in a single tenancy would struggle to access services and become socially isolated
- needing an initial tenancy when exiting institutional settings and hospitals, where clients would either have to remain in the institution/hospital or would become homeless.

Level 3 Residential Services Model

Residential Services should be more reflective of the proven supportive housing model. Supportive housing can work for a range of vulnerable and disadvantaged groups and in a variety of settings.

The key design of supportive housing is an innovative type of social housing with dedicated, tailored support services that offers long-term, safe, and affordable housing.

Supportive housing combines affordable housing with on-site, coordinated support services tailored to tenants' needs. This improves housing stability and quality of life for vulnerable groups.

Residents need to access a variety of services, and they should be delivered by those services who are best placed to deliver, including their capability to work with vulnerable people who are likely to have experienced trauma. The providers must work in partnership and be focused on the person and their goals.

Ideally, tenancy services and support services should be delivered by separate providers – however, in some instances it may not be cost effective for more simple services (e.g. personal care) to be delivered separately and can be the responsibility of the accommodation provider where properly regulated.

Service	Provider
Accommodation – tenancy management	Accommodation owner
Food	Catering or in-house chef (can be accommodation owner)
Personal care services	Visiting service (noting that this can be difficult to manage cost effectively, so accommodation owner could provide if properly regulated) Regulation says: "Personal care services for residents are delivered, to the extent possible, through entities external to the residential service"
Case coordination and management	Visiting service
Other support services (e.g. system navigation, transport)	Visiting service
Specialist services (e.g. health and mental health support, AOD support, legal, financial)	Visiting service

Trialling issue-specific supported accommodation would be advantageous. Evidence shows that services targeted at specific vulnerable groups, such as people with mental ill health or alcohol and other drug misuse, can provide many benefits to the individual, community, the broader service system and the economy.

These facilities do not need to have high level specialist staff in permanent attendance. Experienced nurses or social workers can have a 24-hour presence, with specialist staff visiting the service throughout the day for appointments.

Models like Brisbane Common Ground demonstrate supportive housing's potential. Tenants experienced over 50% reductions in emergency department use, hospital admissions, and justice system involvement.

Costs and Charges

The current resident contribution of 85% of their Centrelink payment is very high, leaving little funds for a resident's health, hygiene, personal, recreational and social expenses.

It is not always clear to the resident what their contribution is intended to cover, and in some cases they may not be fully utilising the benefits that they are purchasing – for example, in some residentials there is a set time for meals which some residents may miss out on.

Organising rental assistance and funding for support services and broader operational needs is essential when targeting households with low to no income and multiple support needs to successfully live independently in the community.

Service Standards

Standards need to better reflect the intensity and complexity of the support provided. Specialist services need to be held to the highest standards, and so would be best delivered by professional providers (e.g. allied health professionals).

Personal care services, while less complex, still have an element of risk for the client and should still be held to standards in line with the HSQF and NDIS Quality and Safeguards.

Food services should be held to the food safety standards (*Food Act 2006* and *Australia New Zealand Food Standards Code*) and also meet nutritional guidelines similar to those for ECEC providers.

Staff

Any staff working closely with residents need to be trauma-informed and take a personcentred approach. They need to have the right values – respect and compassion for residents and a commitment to safety and wellbeing.

Conflicts of Interest and Transparency

An emerging area of conflict of interest is in the delivery of NDIS services. It would be preferable for accommodation providers to not provide NDIS services avoiding the potential for the resident to lose their right to choice and control.

To ensure transparency, residents should have all costs and services (accommodation, food and support) separately itemised. As mentioned in the model of care above, any service or support needs to be provided by the organisation that is best qualified and experienced in providing that service or support.

Success is driven by a separation of the roles of the tenancy manager, services provider, concierge, clinical and non-clinical supports that are embedded in the housing.

Oversight and Safeguards

Existing safeguarding mechanisms already in place should be considered first (e.g. HSQF for services) and include a compliance mechanism such as independent audits.

Building and food standards need to be closely monitored.

Promoting Skills and Independence

To assist residents to progress to more independent living (if they choose), building the capacity of residents to live independently is important. This capacity building is a specialist service and should be delivered by external providers.

Complaints Mechanisms

Providers should have a standardised, person-centred complaints process governed under relevant standards (e.g. HSQF). Residents should have access to an independent body to escalate complaints to if not satisfied.

Rooming Agreements

Agreements need to provide the resident with a tenancy that is not time-limited. While most residents will not see this type of accommodation as a permanent option, they need to have the security of tenure to stay there for as long as needed to be ready to progress to a more formal type of accommodation.

People are housed first into affordable, income based long-term housing with no time limit on residency where lease conditions are met.

Informal Safeguards and Capacity Building

Strong partnerships between the support providers and accommodation providers are an effective way to safeguard residents. Allowing support service providers to advocate on behalf of residents will also help safeguard residents' rights.

The partnerships will also assist accommodation providers to better understand and support residents.

Suitability of Personal Care Services

Comprehensive and trauma-informed intake and assessment processes are important. These processes help providers to understand the full range of presenting issues for a tenant and would preferably include goal setting (developed by the tenant). The goals should be reviewed on a regular basis.

Some organisations have had success with utilising a vulnerability index to best assess and support participants.

Access to Funding

Funding is required for the three key levels of support – accommodation provision, personal care services and general/specialist services. These three levels of support will reduce costs for residents and improve the quality and safety services, which will improve outcomes for residents:

- 1. Maintain the viability of residential accommodation whilst reducing the costs to residents, Government could consider grant funding accommodation providers. This can be coupled with stricter regulation and reporting that focuses on resident safety, wellbeing and support.
- Personal care services would be funded to ensure they are accessible to all who need them. These services can be regulated via existing mechanisms such as the HSQF.
- 3. Trauma-informed and person-centred general and specialist services would be funded to also ensure they are accessible. These services can conduct comprehensive intake and assessment, help navigate and access systems/services, advocate for supports and conduct case management. These services are already regulated and would continue under their existing regulatory arrangements.

A block funding approach would be a suitable funding mechanism for all three levels of support.

External Service Providers

Micah Projects strongly recommends that external service providers are the main service providers to tenants – not the accommodation provider (see services model above). As part of any standards, accommodation providers should provide the space for external service providers to have a presence in the premises.

Unregistered Residential Services

Homelessness and other service providers are usually aware of the different types of accommodation in a location and can provide information to regulators or agencies as needed.

Emerging, Unregulated Models of Accommodation

Using the networks of homelessness and other providers. Properly funding these services to in-reach to all accommodation types will enable the identification of premises and uncover any poor practice.

Zero Tolerance Policies

The tenants residing in these types of accommodation are regularly going to have significant trauma history, mental ill health and misuse alcohol and other drugs. Without a stable place to live, these issues will never be addressed – therefore, the priority needs to be providing stable accommodation.

With better support to accommodation providers from partner organisations, and the ongoing presence of partner organisations in residences, the behaviours can be better managed so eviction is not required.

Restrictive Practices

Better education of providers and residents in restrictive practices is required. There is a need to ensure that restrictive practices policy and practice is properly implemented according to the guidelines, which will include increasing awareness of what restrictive practice means and what is considered acceptable.

Emergency and Disaster Planning

Clear business continuity planning should form part of any regulatory requirements. Strong partnerships between accommodation and service providers will assist in emergency and disaster responses.

Pathways out of Level 3 Residential Services

The first preference for all accommodation should be permanency. However, where residents choose to progress to a different accommodation setting these need to be reflected in goals-focused case plans.

Supportive housing is designed to meet the needs of vulnerable individuals and families, breaking the cycle of homelessness, and providing a path towards economic security, well-being, and social inclusion. In some cases, this includes a transition to alternative sustainable housing.

Conclusion

While private supported accommodation meets the needs of some vulnerable Queenslanders, there is an urgent need for reform to improve quality, safety and affordability of this sector.

Micah Projects calls on the Queensland Government to implement the recommendations of the Public Advocate's report, including stronger regulation and oversight, minimum standards of care, and increased social housing options. With collaboration between government, providers and advocates like Micah Projects, we can ensure supported accommodation empowers residents, upholds their rights, and enables them to transition to more independent living where possible.



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SUPPORTIVE HOUSING

A proven approach to addressing challenges homelessness creates for individuals, families and communities...and for service systems. experiencing high utilization of acute, institutional, and tertiary settings.

Why Supportive Housing is a Smart Investment for Queensland.

Social housing in its current form struggles to meet the needs of the growing number of tenants facing complex challenges. Issues like mental illness, substance abuse, trauma, and chronic health problems often undermine housing stability. Complaints of anti-social behaviour and unsafe communities erode social housing live-ability.

As a result, too many vulnerable tenants cycle through homelessness, crisis services, hospitals, and jails. This fails tenants and strains government resources. We need innovation in our social housing system.

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Supportive housing combines affordable housing with on-site, coordinated support services tailored to tenants' needs. This improves housing stability and quality of life for vulnerable groups.

Studies show it also reduces costs for health, justice, and homelessness systems. With the right design and partnerships, supportive housing can transform lives.

Success is driven by a separation of the roles of the tenancy manager, services provider, concierge, clinical and non-clinical supports that are embedded in the housing.

It aligns with Queensland Government priorities around reducing homelessness, improving community health, and supporting inclusion.

Supportive housing offers targeted solutions for key groups - women and children fleeing violence, people with mental illness, Aboriginal and Torres Strait Islander peoples, and more.

Models like Brisbane Common Ground demonstrate supportive housing's potential. Tenants experienced over 50% reductions in emergency department use, hospital admissions, and justice system involvement.

By investing further in evidence-based supportive housing, the Queensland Government can drive better social, health, and financial outcomes. It is a smart policy and fiscal strategy to help our most disadvantaged citizens and strengthen communities. The time is right for supportive housing innovation.

A Cheat Sheet for Supportive Housing.

What is supportive housing?

- Social and affordable housing combined with coordinated support services to help vulnerable tenants live independently.
- Separates property tenancy management and support services.
- On-site services may include healthcare, counselling, training, security, etc. tailored to tenants' needs.
- Aims to provide long-term stability and improved quality of life.

What are the benefits?

- Reduces homelessness and housing instability. Provides a pathway out of homelessness.
- Tenancy sustainability improves.
 Tenants assisted to maintain housing and quality of life.
- Tenant health and wellbeing increases with coordinated care.
- Cost savings for government.
 Reduces unnecessary use of hospitals, jails, emergency services.
- Stronger communities. Tenants engaged and integrated into community.
- Leverages partnerships. Links housing with health, community sectors.

The Foundations of Supportive Housing.



Is there evidence it works?

- National and international studies show supportive housing tenants spend less time homeless, have improved health outcomes, and reduced justice system involvement whilst reducing costs to crisis, emergency and justice services.
- Brisbane Common Ground reduced tenant use of emergency services and hospitals by over 50%.

Why are there opportunities for Queensland?

- Aligns with government priorities reducing homelessness, improving community health, supporting vulnerable Queenslanders.
- Allows targeted responses tailored to needs of youth, women fleeing violence, people with disabilities, mental health issues, etc.
- Provides infrastructure to coordinate government and community services more effectively.
- Innovation in social housing provision to improve outcomes.
- Investing in proven supportive housing models is a smart social policy and financial investment that will improve the lives of vulnerable Queenslanders.

Components of Supportive Housing

1. Well Designed for Mixed and Multipurpose

All Supportive Housing designs share important features, including spaces for private household activities and community interaction. Each housing unit provides adequate living space for essential daily activities, such as cooking, eating, sleeping, and studying. Each unit has a private bathroom, kitchen, and washing facilities. Integrated or single-site Supportive Housing locations typically have access to common space where tenants can choose to interact with one another and with visitors. For further information see Attachment. Alternatively, well designed share housing can be developed.

2. Affordable, Secure and Stable Housing

People are housed first into affordable, income-based, longterm housing with no time limit on residency where lease conditions are met. The household pays no more than 25 to 30% of its income towards rent, and the lease is identical to non-supportive housing. Supportive Housing is adaptable to different locations and can be delivered in a range of styles and at various scales. Supportive Housing may also include well designed and supported shared accommodation models. Affordability is achieved through subsided public housing; community managed or owned housing and/or rental subsidy to community housing in private market.

3. Support Connected to Subsidised Tenancy

Support is connected to subsidised tenancy, on site or through mobile support for duration of need and subsidy. Tenants are linked to support services tailored to meet their needs. Case management services are provided directly by staff, who may connect tenants to health, mental health, or substance use treatment, disability, employment services, and age-appropriate services such as children's services or aged care. Services are voluntary and not a condition of the lease. Services may also address needs by having multidisciplinary teams.

4. Coordinated Support Services and Property/ Tenancy Management

Property/Tenancy Managers, concierge and service providers are jointly committed to co-ordination to prevent eviction. Property/tenancy managers maintain the physical asset (leases, building, common areas) and coordinate closely with service staff on tenant needs, concerns and provide connection to mainstream specialist services and community resources. Service providers work directly with tenants to sustain their tenancy by case management to connect them to community-based and specialised support services. Both teams work together to ensure tenants have what they need to be successful. Critical to success of Supportive Housing is formalised coordination to create sustaining tenancy plans with tenants.

5. Safety and Security

Depending on scale and purpose a 24/7 concierge team who provide a welcoming entrance in a high-density model. The concierge team also provide ongoing information, assistance, and support to tenants. In other types of developments, a comprehensive safety and security strategy is designed in for tenants, visitors, and the community. Concierge team may comprise of security trained member and support worker.

6. Connected Community

Supportive Housing facilitates community connection for tenants. The tenants are supported to connect with community-based resources and activities, to interact with diverse individuals (including those without significant vulnerabilities and disadvantages), and to build strong social support networks. Quality Supportive Housing is in areas accessible to transportation, healthcare, and community amenities. Supportive Housing providers are responsive to local community feedback and involvement of tenants within the community.

7. Environmentally sustainable

The Building is designed to meet environmental standards for energy and water efficiency. Tenants are set up with energy efficient washing machines, fridges, dryers, dishwashers, air conditioners/heaters, and hot water systems.

Co-Designing for Supportive Housing.

Step 1. Identify Need.

- Identify the Target Population Group Needs including populations stuck in
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 - the revolving door of high-cost crisis care and crisis services.
- Identify place-based options to determine compatibility with the community.





· Local community partnerships.

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