



Llywodraeth Cymru
Welsh Government

Rapid Rehousing planning: Supplementary Guidance for Local Authorities 2027 to 2031

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Rapid Rehousing planning: Supplementary Guidance for Local Authorities

1. Introduction

Rapid Rehousing (RRH) continues to prioritise minimising time spent in temporary accommodation, increasing access to settled housing, and ensuring people receive the right support to sustain a home, as local authorities continue to transform homelessness services in line with [national guidance](#).

The main elements of RRH remain unchanged:

- Everyone is assumed to be 'housing ready' with the right support
- People spend as little time as possible in temporary accommodation
- When people do need temporary accommodation, it is of a high standard
- People are able to access the right home in the right place for them
- For most people, an independent, mainstream home will be the default approach, but others may choose supported accommodation
- People are able to access high quality, multi-agency support, tailored to individual needs, where this is required

All local authorities have developed Rapid Rehousing Transition Plans (RRHTPs) setting out the steps needed to deliver a prevention-focused, long-term settled housing approach. These plans are due to end April 2027.

This updated guidance builds upon the [Rapid Rehousing Transition Plan \(RRHTP\) guidance](#) published in October 2021 to support local authorities to continue to embed their RRH approach within their wider planning processes.

2. Welsh Government's vision

Plaid Cymru government's [2024 manifesto](#) explicitly committed to tackling homelessness through a combination of the Housing First model and RRH.

The [Programme for Government 2026 to 2030](#) commits to a Housing First, trauma-informed and person-centred approach to homelessness and to ensuring everyone has a safe and secure home. RRH supports this vision by prioritising prevention, timely access to settled housing and tailored support to help people sustain their homes.

In June 2026 the Welsh Government committed to deliver 20,000 additional social homes by 2030. This target will focus on delivering genuinely affordable homes that remain accessible to communities over the long term i.e where affordability is secured in perpetuity.

Rapid Rehousing and the Homelessness and Social Housing Allocation (Wales) Act 2026

The principle of RRH is embedded in the [Homelessness and Social Housing Allocation \(Wales\) Act 2026](#) (the Act), which sets the direction for the future of homelessness support in Wales. For example, new duties such as the duty to help retain accommodation, and

the duty to contact certain applicants to assist with tenancy sustainment are rooted within the principles of RRH.

The Act will be delivered in three phases:

- **Phase 1** (from September 2027): Strengthens prevention, support and system flow, introducing measures to improve outcomes and reduce pressure, alongside new guidance and training.
- **Phase 2** (from September 2028): Expands responsibilities across public services, introducing duties such as “ask and act” and duties relating to multi-agency case coordination and co-operation.
- **Phase 3** (between September 2029 and March 2031): System expansion includes the removal of the priority need and intentionality tests and the introduction of the local connection to Wales and deliberate manipulation tests

Each phase supports a gradual transition to a reformed homelessness system based on the following:

- Homelessness should be rare, brief and unrepeatable.
- Homelessness services should be trauma informed and person-centred.
- Those who are homeless should be able to obtain long term housing quickly, increase their own self-sufficiency, and stay housed (RRH).
- Preventing homelessness is the responsibility of the Welsh public service.

3. Integrating Rapid Rehousing within wider housing planning processes

3.1 Future approach

To support better integration of RRH within wider housing planning processes, local authorities should incorporate their renewed RRH needs assessment, and any actions required to continue to embed the approach and meet housing support and supply needs, into their Homelessness and Housing Support Programme (HHSP) Strategies (2027-31), [Local Housing Market Assessments](#) (LHMAs) and [Housing Prospectus](#).

Local authorities will not be required to produce a new RRHTP from April 2027. The next phase of RRH is about embedding the approach as the default homelessness response demonstrating measurable reductions in the use of temporary accommodation alongside improved access to settled housing and tenancy sustainment.

While RRHTPs end in March 2027, it is recognised that local authorities will be at different stages of their transition to RRH; with any ongoing and outstanding actions to be carried over to their HHSP Strategy (2027-31) and next iteration of their LHMA. However, it is expected that by April 2027, local authorities will have an agreed accommodation model in place with a clear pathway to settled accommodation; though may be at different stages of implementation.

The following sections set out the actions local authorities are expected to undertake to support the continued delivery and embedding of RRH.

3.2 Needs Assessment

3.2.1 Assessing Support Needs

To enable the continuation of transition planning, a renewed assessment of need will be required to build on the intelligence gathered from the previous assessment and ensure an up-to-date evidence base.

In particular, two things are required:

- A breakdown of the numbers in each of four support group categories (low, medium, high, intensive and
- An estimation of the ratios of presentations likely on an annual basis moving forward.

This exercise will inform (alongside other data sources) the needs assessment at section 2 of the HHSP Strategy (due April 2027).

In addition, there is an expectation assessments undertaken alongside those partners who provide specialist support, such as health and social care, will ensure a more accurate and consistent assessment is undertaken for those who require those support services.

Support Groups:

In order to ensure a level of consistency, we recommend that individuals are categorised within four cohorts:

- **Low Needs** - likely to be a significant proportion who have no or very low support requirements and who can be supported into settled accommodation with either a low level of support or potentially just signposting.
- **Medium Needs** – alongside Low Needs, likely to be the majority who will require a Rapid Rehousing service with temporary floating support. May also require support from other professional services in order to live independently in settled accommodation.
- **High Needs** - this category is where we would expect to see those who have persistent complex needs and/or a history of repeat rough sleeping and who should be offered, as a default, a form of intensive housing-led support such as Housing First.
- **Intensive Needs** (potentially 24/7 support requirements) - these should be those who are unable to live independently, perhaps due to concerns around risk to self or others or perhaps even choice. Our expectations would be that professionals are engaged from a health and social care sectors in order to ensure their care and support is fit for purpose. Where someone is identified as falling into the Intensive

Needs category, moving into settled accommodation must continue to be the objective.

Support Requirements:

There are five broad areas of support that can be used to inform assessments and focus advice and assistance for people to help them move on and sustain their accommodation in the longer term:

- *Practical* – includes support to set up utilities, source furniture and white goods packs, make benefit claims, budgeting as well as general tenancy sustainment support, etc.
- *Specific/specialists* – includes addressing physical health needs (including registering with a GP), emotional and mental health needs, drug and alcohol needs as well as supporting someone to cope with issues of isolation and where they have learning or language difficulties.
- *Engagement* – support required to engage with people, including assertive outreach requirements.
- *Stabilising* – support required to maintain existing accommodation, including temporary accommodation.
- *Progression* – includes supporting people to develop additional learning and skills, by possibly facilitating access or signposting to employment, education or volunteering opportunities.

Housing/Accommodation Requirements:

In addition to support, housing requirements must also be considered – they will also influence the level of support required:

- *Location* – to include preferred area for the individual (including proximity to places of worship, family, friends and community support) but also include consideration of affordability, transport, local facilities and community and specialist facilities, etc.
- *Tenure* – based on available stock in the preferred area.
- *Affordability* – whether the accommodation costs can be met, but also includes determining income sources.
- *Size* – i.e., single, family or shared, etc.
- *Accessibility* – in the context of whether an individual is disabled and/or has access requirements

There will be a need to consider wider issues, which are not strictly housing stock related but will impact on people's ability to occupy settled housing. Such as:

- *Equipment* – includes such items as vacuum cleaners, bedding, carpets and curtains, etc. Consideration needs to be given to the timescales around their provision.
- *Other issues important to individual* – e.g. whether pets are allowed where relevant

The Excel Transition Tool accompanying this guidance will provide more detail, but the expectation is that the following table is completed and included in the HHSP Strategy needs assessment and Statement of Need (see section 2 of the HHSP Strategy template)

Support Group	Recommended Housing	Recommended Support	Current case volumes (inc %)	Anticipated trend (inc %)
Low/None	Mainstream housing	Individualised support		
Medium	Mainstream housing	Individualised, Lilley to include multi-agency support		
High	Mainstream housing	Housing First/intensive floating support, including multi-agency support		
Intensive Needs (24/7)	Supported housing	Residential (fixed) support		

3.2.2 Assessing housing need

Analysis undertaken in 2022 for local authorities original RRHTP (2022-27) provided a clear position of the housing needs of people who require homelessness assistance. In this section local authorities should use the latest available data to assess how demand and housing need have changed since their 2022 assessment and whether the findings underpinning the original RRHTPs remain current.

A comparison of current data against the baseline established within the original RRHTP should be undertaken and any significant variances identified in the following areas:

- client background information;
- household type;
- cause of homelessness;
- tenure of accommodation prior to presentations;
- rate of repeat presentations;
- use of temporary accommodation;
- rough sleeping
- local connection information; and
- outcomes information under homelessness duties

A description of how trends have changed over time, implications for service delivery and housing supply and actions required to support the continued implementation of RRH should be identified. Consideration should be given to the following:

- which cohorts have increased or decreased;

- whether household composition has changed;
- whether homelessness drivers have changed;
- whether repeat homelessness levels have reduced; and
- whether outcomes have improved over time

Local Housing Market Assessment (LHMA) –relate this to the ongoing LHMA exercise, explaining, as appropriate, where supply gaps have been identified. Where housing supply gaps are identified in the LHMA for relevant areas, they are considered here and will inform future LHMA. Practitioners should ensure consistency between the data used within the LHMA and the RRHTP.

3.2.3 Review of Temporary Accommodation

A review of temporary accommodation should be undertaken, including an assessment of progress made in transforming temporary accommodation provision since the original RRHTP and reducing reliance on temporary accommodation. The review should:

- review changes to temporary accommodation provision since the original RRHTP;
- assess whether current provision continues to meet local demand;
- consider how effectively temporary accommodation supports the RRH approach;
- identify gaps in provision, quality, suitability and accessibility;
- evaluate the extent to which temporary accommodation is operating as a short-term intervention within the RRH approach;
- identify progress made in reducing dependency on temporary accommodation and increasing timely access to settled homes; and
- assess the impact of previous transformation activity, including what has worked well, where progress has been limited, and what further action is needed

Drawing on findings from the review, the LHMA, and evidence gathered through the wider RRH and HHSP needs assessment, evaluate the effectiveness of previous transformation activity, identifying gaps, pressures or areas for improvement and identify future priorities required to support continued delivery of a RRH approach. The overarching aim should be to demonstrate how the local authority is reducing the use of temporary accommodation and where it is required, it is used for the shortest possible period before a move into settled accommodation.

These priorities should be incorporated into the strategic priorities and action plan within the HHSP Strategy (see section 3.2) and should align with the Housing Supply Resource Plan, LHMA and wider RRH objectives.

3.1.5 Housing Supply Resource Plan

Drawing on the findings of the needs assessment (steps 3.21 to 3.2.3), the Plan should explain how housing supply will be secured and resourced to meet both existing unmet need and projected future housing need. Alignment should be made with the requirements of the LHMA to identify current and future housing need and set out how housing supply will be secured to meet that need.

This should include an assessment of existing unmet need, future demand, supply gaps and specific housing requirements, alongside a clear explanation of how these will be addressed through existing stock, planned supply, new development, acquisitions, buybacks, conversions, adaptations and bringing empty homes back into use.

Resources and partnerships required to deliver housing supply should be identified, and an explanation how increased access to appropriate settled accommodation will support the RRH approach and reduce reliance on temporary accommodation.

Findings from relevant sections of the LHMA, such as the [Overview of Housing Market and Socio-economic and Demographic Trends](#) focus on the use of temporary accommodation, particularly temporary accommodation which falls outside the Suitability Legislative requirement, should be considered here.

3.3 Action Planning

Reflecting on the data collected in the needs assessment, Housing Resource Plan, and any outstanding actions to be carried forward from your RRHTP, identify the key priorities over the next four years, including objectives and specific areas that require focused work and actions to ensure continuation of the RRH approach.

Priorities and actions identified should be incorporated into **section 3 - strategic priorities and Action Plan at Annex A** of the Homelessness and Housing Support Programme (HHSP).

Housing Supply needs requirements should inform the authority's next update of their [LHMA](#) via your Housing / Planning department(s). What should be considered:

- *Accommodation model* – do you have an agreed outline of the pathways to settled accommodation, including the different types of accommodation and how support requirements are included?
- *Support* – how is the right support going to continue to be available to the right people at the right time? Is there enough support for the High Needs Support Group, including the provision of Housing First or an intensive housing-led approach, and a high-quality multi-agency response.
- *Supply and Transformation* – what supply shortages are there and how will this be addressed to ensure there is sufficient supply to meet both temporary and settled accommodation needs? Includes use of capital funding, but also includes

identification of empty homes, buybacks, refurbishments, acquisition, improved access to the PRS, etc.

- *Prevention* – Prevention remains the most efficient way of tackling homelessness and must remain a key priority. Do you have any gaps in your early prevention services, particularly primary and secondary prevention services, and how will these be strengthened?
- *Partnership working* - How will you continue to work with key partners, both internal and external, to ensure that the RRH response developed is able to meet its key aims and objectives. This includes potentially changes to local allocation policies, etc.
- Have you considered how your shift to RRH aligns with your preparation for implementation of the Homelessness and Social Allocation (Wales) Act 2026?
- *Allocations* – How effective have allocation arrangements been in supporting the RRH approach, and what further changes are needed to increase access to settled accommodation and reduce time spent in temporary accommodation.
- *Staffing* – Do current staffing structures, capacity and workforce skills support the delivery of RRH objectives, and what further workforce development is required?
- *Socio-economic/Equalities Impact Assessment* – What have been the socio-economic and equality impacts of the transition to date, and how will any identified inequalities or unintended impacts be addressed?

Annex A

Good practice examples of Rapid Rehousing

Local authorities across Wales are seeking solutions and demonstrating examples of good and innovative practice as they seek to transition towards the RRH approach and overcome barriers.

This collection of case studies illustrates a range of good practice examples shared across the work of the Task and Finish Group and presented at the national RRH summit in September 2025. It aimed to take a solutions focused approach to driving forward RRH, as well as sharing thinking and good practice. Hosted by Cymorth Cymru in partnership with the Welsh Government, the summit was aimed at people holding senior/strategic positions across local government, housing, third sector organisations and public services whose roles involved any aspect of RRH.

Further Good Practice examples are hosted on Cymorth Cymru's webpage: [Rapid Rehousing Summit 2025 - Cymorth Cymru](#).

Lack of affordable and suitable settled housing

Over recent years, there has been a significant reduction in affordable private rented sector accommodation. In addition, the demand for social housing has been high. With local authorities facing difficulties with a limited supply, especially of one-bedroom properties, homeless households are remaining in temporary accommodation for extended periods. This, of course, runs counter to the principle of RRH.

Examples of Good Practice in seeking solutions to this barrier:

The **Isle of Anglesey County Council** has worked with private rented sector landlords, using the Leasing Scheme Wales to convert sub-standard quality and unaffordable properties into affordable, high-quality, longer-term housing options. Both the **Isle of Anglesey County Council and Powys County Council** have worked collaboratively with Registered Social Landlords (RSLs) and sought to increase their use of council and RSL housing as temporary accommodation and then, subsequently, 'flipped' the temporary accommodation to permanent housing, allowing households to remain in a suitable and settled home. This approach has helped to reduce the use of congregate temporary housing and reduced the number of times people need to move to resolve their homelessness.

Powys County Council has also increased its support for people at risk of becoming homeless by offering bonds and/or loans to enable people to move into private rented properties. In addition, it has reviewed and amended its allocation policies to increase the priority given to some people to access permanent accommodation (such as people who are ready to move on from supported housing), alleviating pressure points within the system.

Meanwhile, **Cardiff City Council** reports that it has prioritised expanding the amount of housing options available across the authority. This has included investing in the redevelopment of the Council's Private Rented Sector team, purchasing properties directly from the open market. The council has also focused on building more accommodation for people with complex needs, recognising the rise in demand and that temporary accommodation can present even further challenges when people have additional support requirements. In particular, it has introduced a new "managed accommodation" scheme with onsite support. The council has also expanded its offer of Housing First, delivering hundreds of units of accommodation to adults and young people who would ordinarily be unable to manage a home in the community.

While the RRH approach looks to move people into settled homes as swiftly as possible, the scale of the demand for temporary accommodation – as well as the longer time frames required to build permanent homes – has meant that some areas have also needed to invest simultaneously in adding to temporary accommodation housing stock as a transitional measure. **Cardiff City Council** has removed hundreds of shared sleeping spaces and hotels by increasing the availability of self-contained accommodation. In particular, the council has utilised the development of modular homes to meet the urgent housing needs of families experiencing homelessness. In the meantime, Cardiff Council has also sought to increase managed accommodation and Housing First offers, to help reduce temporary accommodation stays for single households with more complex needs. Furthermore, the council reports that work is ongoing to substantially increase the amount of affordable homes in the city, with Cardiff's housing development plan aiming to provide 2400 homes by March 2028.

Both RRH and prevention approaches have the aim of achieving stable housing quickly, with RRH focusing on immediate resettlement and prevention targeting early signs of

housing instability. Linking RRH to prevention approaches is an effective way to identify people who can avoid spending any time in temporary or emergency accommodation and further reduce costs as well as better outcomes for individuals.

The presentation delivered at the RRH summit described how Cardiff's Health Inclusion Services are being developed through strong multi-agency partnership working between Cardiff Council, Cardiff and Vale University Health Board, and third-sector and criminal justice partners. Building on the Council-led Homelessness Multi-Disciplinary Team, the programme is progressing towards a hub-and-spoke model, combining specialist outreach—including GP and nurse clinics in high-need hostels, probation offices, and third-sector settings—with hospital in-reach and the development of a Health Inclusion Hub, to improve access for people experiencing homelessness and other inclusion health groups.

Central to the model presented is the use of data to understand need and demonstrate impact, including analysis of NHS activity, homeless deaths, and cohort-based tracking. Since the expansion of outreach services and the introduction of a hospital in-reach team, the data shows reductions in emergency department attendances, hospital admissions, bed days, and associated costs for established cohorts. A key learning highlighted is that integrated, co-located health, housing, and social care responses, supported by strong governance and partnership working, are more effective than single-service approaches in improving outcomes and reducing system pressure.

With strengthened prevention duties in the Homelessness and Social Housing Allocation (Wales) Act 2026, examples below show how ***Rhondda Cynon Taf County Borough Council***, ***Neath Port Talbot Council***, and the ***Isle of Anglesey County Council***, have already started to place a significant focus on preventing households becoming homeless in the first place.

In ***Rhondda Cynon Taf County Borough Council***, officials have sought to develop a good understanding of prevention and the resources needed to support this work through working closely with a range of key partners, including health, probation and HMPPS – recognising that the triggers for homelessness can span wide. The council has looked closely at regular reviews of operational practice and data reports.

In ***Neath Port Talbot Council***, a service restructure has ensured that the First Point of Contact team includes four Prevention Housing Options Officers and two Early Intervention Officers. These officers deliver support such as benefit advice, budgeting, and arrears resolution to prevent homelessness before it begins. The council reports that this ensures issues are addressed early, reducing crisis presentations and strengthening housing security. Within the council's Prevention and Resettlement Service, dedicated RRH workers focus provide ongoing, person-centred support to help individuals sustain their accommodation.

The ***Isle of Anglesey County Council*** has also sought to re-model its Housing Options Homeless function, ensuring that the structure now incorporates both a Prevention Team

Leader and a Crisis Team Leader. The council states that this new structure enables the teams to prioritise both prevention and crisis work, which is leading to more positive outcomes and a reduction in the need for crisis intervention. Targeted pathways have also been developed to help identify vulnerable groups approaching transitional points, so that support can begin before they reach crisis point. These include a prisoner pathway, mental health pathway, general discharge pathway, domestic violence pathway and young people's pathway.

Building strong partnerships across sectors

A fundamental principle of RRH is to ensure that people are able to access the support they need to rebuild their lives. The triggers for homelessness and the support needs that can develop as a result of experiencing the trauma of homelessness extend far beyond the doors of housing. For example, support needs can include health, managing relationships, developing financial skills, mental health or addressing substance use. As such, ensuring people can access the support they need requires collaboration across multiple stakeholders, including RSLs, Housing Support Grant providers, private landlords, internal local authority departments, health, social services and probation. Each partner has different priorities, pressures, and operational constraints, which can lead to challenges in aligning objectives. For example, in some areas it can be difficult to encourage health teams to be actively involved in RRH.

Examples of Good Practice in seeking solutions to this barrier:

The ***Isle of Anglesey County Council*** reports that open communication about the realities of homelessness pressures, identifying the mutual benefits of partnership, and shared goals helps foster cooperation. The council has established regular engagement forums, which it reports have been pivotal in bringing support providers closer to statutory services, ensuring everyone works from a single plan. These relationships have required sustained work, especially when resources are stretched or when policy changes impact service delivery. Clear agreements, shared accountability, and demonstrating positive outcomes for all parties have been key strategies to overcome these difficulties. Regular multi-agency forums (e.g. Temporary Accommodation panels) are held by the council with the aim of ensuring transparency and coordinated action. The council states that this has improved efficiency and outcomes.

Meanwhile, ***Rhondda Cynon Taf County Borough Council*** shares that it has worked closely with partners to share the vision and journey of RRH and ensure all key partners understand their role in delivering it. This includes holding regular catch-up meetings to share data and outcomes. The Council has earmarked staff resources to set up any new ways of working, such as dedicated members of staff to oversee Housing First, which includes establishing a local authority point of contact for referrals, partner queries, and setting up and chairing Housing First operational and steering groups.

Furthermore, the Council has also established a multi-disciplinary outreach team with Cwm Taf Morganwg University Health Board, comprising mental health and substance

misuse nurses, therapists, a social worker and substance misuse third sector specialists. These partners work alongside housing and homelessness colleagues to help deliver the support needed. This service provides ‘wrap around’ support for groups of homeless households, including people with complex needs who are supported through Housing First and people living in temporary accommodation.

In North Wales, the Area Planning Board executive group includes a standing agenda item on RRH and housing, which helps to facilitate continued and ongoing discussions with key partners on supporting those experiencing homelessness and substance misuse.

A further example of a RRH approach in Swansea is through **Crisis Skylight Wales**, which has been trialling the Critical Time Intervention (CTI) approach with prison leavers. There is strong evidence from the US and Denmark in support of this approach as an effective intervention to prevent homelessness for people at a transition point in life, such as leaving prison. The approach works by providing access to settled housing and intensive, time-limited and focused support to help people settle into their home and access mainstream support services. Crisis CTI teams work with people before, during and after their release from custody to support people into training, employment, and stable housing. Their flexible approach allows them to work with individuals coming out of custody, including those on remand, probation, or with outstanding cases, offering support for months after release and significantly longer than other schemes like the Community Offender Management service (CAS 3), which provides support for 12 weeks for people with no fixed address on release.

In Cardiff, Health Inclusion Services are being developed through strong multi-agency partnership working between **Cardiff Council, Cardiff and Vale University Health Board**, as well as third-sector and criminal justice partners. Building on the Council-led Homelessness Multi-Disciplinary Team, the programme is progressing towards a hub-and-spoke model, combining specialist outreach—including GP and nurse clinics in high-need hostels, probation offices, and third-sector settings—with hospital in-reach and the development of a Health Inclusion Hub, to improve access for people experiencing homelessness and other inclusion health groups. Central to this model is the use of data to understand need and demonstrate impact, including analysis of NHS activity, homeless deaths, and cohort-based tracking. Following the expansion of outreach services and the introduction of a hospital in-reach team, the data shows reductions in emergency department attendances, hospital admissions, bed days, and associated costs for established cohorts. A key learning from this work is that integrated, co-located health, housing, and social care responses, supported by strong governance and partnership working, are more effective than single-service approaches in improving outcomes and reducing system pressure.

Ensuring accurate data informs decision making

An important element of developing RRH is ensuring that the limited resources available to local authorities are directed where they will have the greatest impact. The importance of accurate, relevant and meaningful data on the varying housing and support needs of

people experiencing homelessness has routinely been raised across the work of the Task and Finish Group as a key aspect of enabling good and informed decision-making on housing and resource planning. Unfortunately, the lack of IT systems capable of capturing all the data required, as well as the need to constantly review data and reports can be a barrier to good decision making.

Examples of Good Practice in seeking solutions to this barrier:

Neath Port Talbot Council reports strengthening frontline delivery through data-driven insights and strategic oversight. Using housing data on stock, turnover, and demand, the council's Housing Strategy team has sought to guide targeted interventions, improve partnerships, and enable tailored support for people with complex needs. The council reports key achievements including, Cabinet approval to purchase council-owned stock, successful occupation contract 'flips' (i.e. changing a temporary home into a permanent home), and the launch of the *Homes for Me* pilot. This pilot profiles clients to create personalised housing and support packages. The council emphasises that data-led decision-making is now central to shaping services.

Cardiff City Council reports that it has established robust processes to ensure that any data identifying housing need is shared with the teams responsible for making strategic decisions. This includes ensuring that frontline housing and homelessness teams systematically report key data to senior management on a weekly, monthly, and annual basis. The council also reports utilising insights from the Local Housing Market Assessments and annual housing prospectus to inform its Homelessness and Housing Support Programme Strategy.

Meanwhile, **Rhondda Cynon Taf County Borough Council** has sought to review its data, working with the council's Data Officer and Service Managers to provide clarity on the data reports required for service areas. This helps to ensure that the most relevant data is always being collected and analysed. The 'Built for Zero' project in the area has involved collaborative data sharing and relationship building between multiple partners. This project, acknowledging the high rates of homelessness among prison leavers in the area, as well as the range of support needs that can exist within this group, has worked closely with partners – including HMPPS, health, the council, Crisis and the third sector. It seeks to share and hold live data on those expected to leave prison, and to collectively plan for their support and housing needs. The project has recognised the importance of developing shared key performance indicators across partners and is reported to be making a significant difference to how partners now work with prison leavers.