Specialist Homelessness Services Access, Eviction and Withdrawal Policy Implementation, and Accessibility Checklist: What We Heard – Part 1 of 2

Post policy release questions and feedback

March 2025

Overview

Purpose of this document

- The *SHS Access, Eviction & Withdrawal Policy* went live on 1 February 2025
- The policy has been created in response to the 2022 NSW Ombudsman report: *Specialist homelessness services: helping people with high or complex needs*
- This document is Part 1 of 2 'What We Heard' documents post policy release.
- This document focuses on practical guidance for policy implementation and responses to questions and concerns which have been addressed or resolved.
- What We Heard Part 2 will address questions and feedback which require further consultation across multiple Homes NSW teams.
- Part 2 will be distributed and posted online as soon as practicable.

Further feedback

We rely on your feedback! Please complete our survey to inform our 6-month policy review: https://surveys.dcj.nsw.gov.au/jfe/form/SV_6lOAy477cdvOpjE

Please feel free to complete this survey multiple times, up until **31 August 2025**, so that we can capture your continuing insights into the policy and its implementation.

For any queries, please contact the SHS mailbox at: SHSProgram@homes.nsw.gov.au

Table 1. Theme - General questions & feedback

Feedback:	Response:
• Will the policy always remain an addendum to the Guidelines/contracts and/or will it be integrated into SHS specifications?	The policy clarifies and enhances existing guidance throughout the SHS specifications and will remain an addendum to them. This is a notified policy, so providers' compliance is a contract requirement.
• How does the policy relate to the upcoming recommissioning process?	The policy will continue to apply across whatever contractual arrangements are in place post-recommissioning in 2026.
• Did Homes NSW consult with regional stakeholders in the formation of this policy?	Consultative surveys were shared with the sector twice during the policy development process. The first survey, issued between June-July 2023, received 119 responses. The second survey shared with providers in November 2023 collected feedback on draft policy version 1.1, with 32 submissions received. The submissions were representative of the sector including 42% regional, 29% metro and 19% rural (see https://www.nsw.gov.au/sites/default/files/noindex/2025-03/What-We-Heard-Policy-Development-Process.pdf). Our working group for the policy comprised 11 providers, 7 of which were regional organisations. As with any new policy, we anticipate that processes may need to be refined or amended, or that additional supports will be required during the implementation phase. Homes NSW relies on open and honest feedback from our partner-providers about any challenges encountered in implementing the policy so we can address them accordingly.
• Did Homes NSW consult with Link2home?	Link2home was consulted in the development of the Accessibility Checklist. Further engagement will occur to facilitate the implementation of the policy.

Table 2. Theme – Who completes which forms and when?

Feedback:	Response:
• Clarification needed regarding who fills out **Implementation Checklist,** when and how often, and timeframes for completion.	The purpose of the **Implementation Checklist** (IC) is to support policy implementation and inform discussions with contract managers during the contract-level Annual Accountability process.

Feedback:	Response:
	All SHS contracts (whether they provide crisis accommodation or not) must complete the IC. Our expectation is that all frontline teams are familiar with the policy and have considered any service-level changes required. Based on feedback received, we have amended the IC for usability. We have added a 'Not Applicable' tick box to item 4 for SHS providers without crisis accommodation and we have added an item for lead providers to indicate distribution to subcontractors to ensure the policy is read, understood and will be implemented (where relevant). The time frames for actions within the IC are *suggested* only, providers can address the actions in the IC in an order and way that suits their organisation. The only deadline is that the IC must be completed and returned to the SHS mailbox (shsprogram@homes.nsw.gov.au) by 30 September 2025.
• Clarification needed regarding who fills out **Accessibility Checklist,** when and how often	The Accessibility Checklist (AC) is a tool designed to support providers to self-assess and document the accessibility of their crisis accommodation properties for persons with additional or differing support needs. Currently, only services providing crisis accommodation need to complete the AC in CIMS. Providers are not required to send a completed AC back to Homes NSW but are encouraged to save them for internal reference. An Accessibility tab has been added in CIMS to record responses from the AC, which will also be available as a PDF on CIMS in 'Documents'. The Accessibility tab is available from the Admin/Services page in CIMS. If your SHS contract includes a crisis accommodation service, your CIMS service record should include a vacancy type of "Supported Crisis Accommodation". Use the AC to collect information about the accessibility features of the crisis accommodation property/ies related to your service record. You may choose to complete a single AC covering all of the properties related to the service record or use a separate AC for each property. The information from each of the headline sections (numbered 1 through 7) in the AC should be summarised appropriately to fill out the related sections in the Accessibility tab in CIMS. If you tick any of the non-mandatory accessibility fields on the service record, the CIMS Vacancies page will show a tick in the newly added Accessibility column of the VMS.

Feedback:	Response:
	The accessibility related changes to CIMS were rolled out on 1st April 2025. Providers are expected to complete audits of their crisis accommodation properties between April and June 2025 and update the CIMS Accessibility tab to reflect the outcome of that audit. The accessibility tab should be updated as needed whenever changes or modifications occur, or new properties are acquired.
• What are the policy requirements for providers that do not use CIMS?	Providers that do not use CIMS for client case management are still required to actively maintain their service record in CIMS including updating the accessibility tab and vacancies in the Vacancy Management System.

Table 3. Theme – Applying the new policy

Feedback:	Response:
• Can people access SHS support and/or Temporary Accommodation whilst in custody? These clients need to supply an address for bail purposes.	SHS providers can support people in custody and any additional supports required to overcome access barriers in these instances are endorsed by the Policy. People in custody can access Temporary Accommodation (TA) through Homes NSW or Community Housing Providers which offer TA via the 'Set2Go' program coordinated via Corrections Services NSW.
• Is there a cultural component to the policy?	As a policy designed to enhance access equity, creating cultural safety is essential. Several suggestions are made throughout the document as to how this might be achieved. See Section 4.2 and 4.5 of the policy.
• Some providers have additional rules governing crisis accommodation stays and exits which are not specified in SHS Program Specifications or contract agreements. How does the new policy apply to these situations?	The objective of the policy is to support SHS providers to have fair, clear and accountable decision-making processes when providing services to clients, or if services are withdrawn; that is strengths-based, and trauma informed. Section 4.5. (*Unacceptable and discriminatory exclusion practices*) states: "If a SHS provider has in-house policies, procedures or practices that intentionally or unintentionally exclude people, outside of any agreed contractual targets, these will need to be reviewed and amended" (p. 13).
• What is the escalation process for clients who are denied service access for aggression, are these cases escalated to the CPO?	As per the policy, if service is declined due to risk of violence, the SHS provider should undertake the following steps (adapted from p. 8 of policy): • Provide reasoning for denied access or withdrawal of services.

Feedback:	Response:
	- Advise re-engagement and re-access options and timeframes
- Advise how to provide feedback, make a complaint or have the decision reviewed if the client feels they have been unfairly excluded from a service,
- Provide details of alternative options or warm referrals to other services
- Record details of engagement with client to show the decision-making process, justification and referral process (documentation can be a case note)

This policy is designed to enhance access equity, not to replace or impede safety processes. Where the immediate safety of staff or other clients is at risk, staff should always address safety concerns first (e.g. by calling police, sheltering in place, etc).

There is no need for providers to escalate instances of service denial to their CPO, although of course providers are welcome to discuss this with their CPO or seek support as needed. |

Table 4. Theme – Concerns about the future

Feedback:	Response:
- What is the plan for properties which are non-compliant with accessibility guidelines? Will they be transitioned out of use or decommissioned?	Making SHS properties as accessible to clients as possible is a key goal for the Policy. Homes NSW recognises that we cannot afford to lose any available accommodation in the context of the current housing crisis. There are no plans to transition or decommission non-compliant properties.

Instead, the homelessness accreditation assessment process looks at the physical access of properties from which homelessness services deliver assistance, including whether people with disabilities can be accommodated on site or be employed at the service.

If a gap in physical access is identified in an assessment, providers will be given a plan by their assessor and have 3 or 6 months (depending on the standard being applied) to address the issue. |

Feedback:	Response:
	Service providers are not expected to complete building modifications within the 3-to-6-month period. Where this is an issue of physical accessibility that requires modifications, providers are encouraged to speak to their property manager or landlord about their options. To address the plan, services need to demonstrate how they aim to facilitate accessibility and advocate for their service and clients in ensuring increased accessibility over time For more information about homelessness accreditation see: https://www.nsw.gov.au/housing-and-construction/social-affordable/specialist-homelessness-services/accreditation-for-homelessness-providers
• What assurances can DCJ offer to affirm that property accessibility will have no bearing on recommissioning of future contracts?	Property accessibility will not have a negative impact upon services ahead of recommissioning. Homes NSW recognises that some crisis properties (included government-owned) are older and would require extensive and costly amendments to meet accessibility standards which may not be feasible.

Table 5. Theme – What supports are available to providers to implement policy?

Feedback:	Response:
• Is there a plan in place to update the Case Management Kit 2012? This is a vital tool for guiding and training staff.	The SHS Case Management Resource Kit (2012) is currently under review. Homes NSW will keep the sector updated on an approximate timeframe for the development and release of an updated resource.

Table 6. Theme – General CIMS queries

Feedback:	Response:
• Will providers need to do anything to enable CIMS changes related to the Accessibility Checklist?	Changes to CIMS will be rolled out on April 1st. Providers do not need to action anything.
• Will CIMS training for new features related to the Accessibility Checklist be provided?	No additional training will be provided, however a quick reference guide will be available in the 'Documents' tab in CIMS. The slide pack that includes details on the CIMS changes will be made available online.

Table 7. Theme – Client data queries

Feedback:	Response:
• Should a person be marked as unassisted on CIMS even if alternative options were presented to them? A shared understanding across the sector is that warm referrals count as assistance. Is this correct?	This relates to the degree of client data recorded. If an initial needs assessment/intake process is conducted and the person is presented with alternative options (ideally with a warm referral), this counts as a support period and therefore the person should not be marked as unassisted. Persons who do not get to complete an initial needs assessment/intake process are to be counted as unassisted. Documenting the level of engagement with people seeking assistance for homelessness is important for Homes NSW to track unmet demand to inform future service delivery.

'What We Heard' Part 2 will explore...

- The alignment between SHS eligibility criteria and social housing eligibility criteria and the impact on accommodation options
- How the policy interacts with Homes NSW provision of TA via local offices and Link2home
- Gender access equity in shared or congregate accommodation settings

If we have inadvertently missed a question in Part 1, please let us know so we can address it in Part 2.