1. Purpose

1.1 This report provides members of the Health and Wellbeing Board with details of the current activity designed to address the health needs of homeless people in Lewisham.

1.2 This update also services as an introduction on St. Mungo’s Broadway’s Charter for Homeless Health and seeks agreement for Board to become signatories.

2. Recommendation

Members of the Health and Wellbeing Board are recommended to:

2.1 Note and comment on the current activity to address homeless health needs in Lewisham.

2.2 Agree to become signatories to the St. Mungo’s Broadway’s Charter for Homeless Health.

3. Policy Context

3.1 Services for homeless people are predominantly commissioned via the council’s Prevention and Inclusion Team and help deliver many government priorities. This includes ‘Valuing People’ and ‘Independence, Well Being and Choice’ and the National Service Frameworks for mental health, older people and people with long-term conditions. These service play a key role in delivering national strategies such as the Reducing Reoffending National Plan, Tackling Drugs to Build a Better Britain and ‘Sustainable Communities: Settled Homes Changing Lives’.
3.2 These preventative support services meet the following Council priorities:

- Safety, security and a visible presence, partnership working with the police and others and using the Council’s powers to combat anti-social behaviour;
- Caring for adults and older people: working with health services to support older people and adults in need of care;
- Inspiring efficiency, effectiveness and equity: ensuring efficiency, effectiveness and equity in the delivery of excellent services to meet the needs of the community.

3.3 Lewisham’s Sustainable Community Strategy (SCS), Shaping Our Future (2008-2020), provides the key strategic driver for the Preventative Support Services. The Sustainable Community Strategy has two cross-cutting key principles; “Reducing Inequality” and “Delivering Services Together, efficiently, effectively and equitably” under which sit six priority outcomes:

- Ambitious and achieving – encourage and facilitate access to education, training and employment opportunities for all citizens
- Empowered and responsible – empower citizens to be involved in their local area and responsive to the needs of those who live there.
- Empowered and responsible – champion diversity and the contribution everyone makes to the borough’s quality of life.
- Healthy, active and enjoyable – improve the well-being of our citizens by increasing participation in healthy and active lifestyles.
- Healthy, active and enjoyable – improve health outcomes and tackle the specific conditions which affect our citizens.
- Healthy, active and enjoyable – support people with long term conditions to live in their communities and maintain their independence.

4. Background

4.1 It is generally accepted that homeless people suffer from poor health outcomes. Research undertaken by Homeless Link in 2014, The Unhealthy State of Homelessness, found that homeless people experience widespread ill-health and that this is significantly worse than the general population. The headline figures show:

- Widespread ill health
  - 73% of homeless people reported physical health problems. 41% said this was a long term problem
  - 80% of respondents reported some form of mental health issue, 45% had been diagnosed with a mental health issue
39% said they take drugs or are recovering from a drug problem, while 27% have or are recovering from an alcohol problem
35% had been to A&E and 26% had been admitted to hospital over the past six months

- Worse than the general public
  - 41% of homeless people reported a long-term physical health problem (compared to just 28% of the general population)
  - 45% had been diagnosed with a mental health problem (25%)
  - 36% had taken drugs in the past six months (5%)

4.2 The full Homeless Link report is available via the link at the end of this report.

4.3 In Lewisham, the council and the CCG undertake significant activity to meet these needs and reduce health inequalities – see section 5 below.

4.4 More broadly, as a response to the Homeless Link findings, amongst others, St. Mungo’s Broadway1, have produced The Charter for Homeless Health (attached as Appendix 1) which forms a core part of their wider campaign: A Future Now: Homeless Health Matters.

4.5 St. Mungo’s Broadway are asking all 152 Health and Wellbeing Boards to sign the Charter as part of their campaign to highlight the health issues faced by homeless people as close the outcomes gap for this group.

4.6 The Charter has already been signed by the Health and Wellbeing Boards in Camden, Islington, Haringey and Lambeth with a further seven, including Lewisham, considering their support for it.

5. Current activity in Lewisham

5.1 Homelessness is a significant problem across London. Rough sleeping, the most visible of all types of homelessness, is lower in Lewisham than in neighbouring boroughs with 11 rough sleepers identified on a night in November 2014 used by boroughs as a snapshot of the current situation. The numbers on the streets of Southwark and Greenwich that night were 22 and 16 respectively. Nevertheless, 11 rough sleepers remains 11 too many with others forms of homelessness also contributing to a high demand for services.

5.2 In response to this demand, and the well recognised needs of homeless people, including their health needs, LB Lewisham and

1 St Mungo's Broadway are a homelessness charity that provides a large number of services across London and the South East
Lewisham CCG undertake a range of activity to provide specifically tailored accommodation and health services.

5.3 As highlighted in paragraph 3.1 services for homeless people are predominately commissioned via the council’s Prevention and Inclusion Team.

5.4 The specifications for all services for homeless people commissioned by the Prevention and Inclusion Team include detailed requirements for meeting the health needs of all service users. This includes hostels, supported housing and floating support services.

5.5 The Team is currently in the process of procuring a new Supported Housing services via a joint Framework Agreement with LB Southwark requiring that providers ensure that service users are supported to achieve and maintain healthy lifestyles and that they experience an improvement in health, well being and quality of life.

5.6 Specific outcome measurements in the core specification for all services include:
- Service Users are aware and confident enough to access appropriate health services
- Service Users adopt healthy lifestyles
- Inappropriate use of emergency health services is reduced
- Service Users with identified substance misuse needs are effectively engaged in treatment
- Service Users show an improvement in mental well-being
- Service Users are able to increase or maintain good levels of physical health and well-being
- Service Users receive continued support following any referral made to health care services, minimising incidences of non-compliance with follow-up medical treatment
- Service Users have improved access to health screening such as cancer screening and hepatitis C test and NHS health checks (Blood Borne Virus testing and vaccination)
- Service Users are supported to access appropriate specialist health support services to prevent moves to residential and hospital settings
- Service Users are safe from abuse

5.7 The supplementary elements of the specifications detail with particular areas of need that are likely to be prevalent amongst the target group. For example, services that are commissioned to work with rough sleepers and other vulnerable adults have specific requirements relating to drug and alcohol use including:
- Service Users are assisted to minimise substance misuse and implement harm reduction strategies
• The Provider has a specific strategy detailing how substance misuse will be addressed with Service Users and its ethos therein
• Substance misuse needs are addressed as part of a multi disciplinary approach to achieve positive outcomes for Service Users
• Service Users are supported to engage with appropriate specialist services and maintain contact
• Service Users are supported to engage with health services and access health checks
• Enable Service Users to make informed choices regarding their substance use
• Ensure that hidden and marginalised groups are identified and assisted to access services

5.8 In addition to the requirements of the providers to meet the health needs of the clients Lewisham CCG commissions specialist health services for homeless people via 2 GP practices who support individuals in two of the borough’s highest need hostels – Pagnell Street and Spring Gardens – both run by St Mungo’s Broadway.

5.9 A further peripatetic team, which is jointly commissioned across Lambeth, Southwark and Lewisham, provides a range of primary care and nursing services to homeless services based on need.

5.10 The CCG and the Council will be working together to review the efficacy and targeting of these services from April 2015.

5.11 Until recently the council supported a specialist Department of Health funded unit at Pagnell Street with dedicated health staff to enable rapid hospital discharge for homeless patients. However, the demand for this service was low and it has now been converted to provide dedicated support for those preparing for residential detoxification and/or rehabilitation services.

5.12 A full evaluation of the discharge scheme is being undertaken by St. Mungo’s Broadway but it is hoped that the lack of demand demonstrates that the current pathways out of the secondary care system are effective and efficient. To further enhance these Pathways a member of the three borough team highlighted at paragraph 5.9 is providing training to hospital staff on the particular needs of homeless people with a regular forum to discuss difficult cases planned.

5.13 The council also supports a range of providers and initiatives that meet the needs of homeless people that are not directly commissioned.

5.14 The GLA funded *No Second Night Out* hub is based at the Spring Gardens site. This service provides an emergency resource to the whole of south east London that allows street outreach teams to bring rough sleepers to a place of safety and warmth where they can stay
until they can be reconnected with their borough of origin. This ensures that the health needs of rough sleepers can be addressed in a secure atmosphere and bureaucratic delays do not keep people on the street for longer than necessary.

5.15 Local projects that are supported include Bench Outreach, Deptford Reach, the Jericho Road Project and the 999 Club. The link between these services and statutory partners have been improving steadily over the past few years and with support from the council Bench Outreach have recently opened their first supported housing project (5 beds) and the Jericho Road Project have increased their cohort of properties.

5.16 Bench run a Housing First service which enables vulnerable rough sleepers to access independent accommodation while still requiring significant support rather than the traditional model which requires a period of stability in hostels and supported housing before a tenancy is granted. This allows vulnerable people who may struggle to deal with tradition settings to achieve sufficient stability to have their health needs met immediately rather than them remaining on the streets. Housing First is in operation as a pilot this year but has now secured funding until 2017. The council’s SHIP (housing) service has been closely working with them and they have secured accommodation through Lewisham Homes and St Mungo's Broadway as well as directly through SHIP.

5.17 Bench, Deptford Reach and the 999 Club also work shifts with London Street Rescue to provide outreach to rough sleepers as well as providing their own drop in and meal every Wednesday Night (The Feast) which enables intelligence gathering on Rough Sleeping and acts as a conduit for getting rough sleepers into services.

5.18 In addition to this, the 999 Winter Night Shelter has been almost wholly targeted at Lewisham Clients for the first time ever this year. Interestingly, organisations such as Bench have stated that they feel December, January and February have been noticeably quieter because of this which suggests that the increased partnership working is helping to more effectively meet the needs of this group.

5.19 All of the work detailed above means that the health needs of rough sleepers can be identified and met at an early stage and that services can be designed to meet emerging needs. Targeted health services are provided at the 999 Club and the council and CCG will continue to work with these services as well as commissioned providers to meet the health needs of vulnerable people.

5.20 The majority of the interventions described above relate to single homeless people. There are also a wide range of services available for homeless families and those at risk of homelessness but these were...
covered in detail in report received by the Board on 3 July 2014 so are not repeated here in detail but include:

- Preventing homelessness by carrying out more home visits, mediation, providing rent deposit incentive scheme for people to access the private rented sector
- Tackling overcrowding and under-occupation in housing to free up greatly needed family accommodation
- Helping residents find 'in-situ' solutions to maintain independent living - Disabled Facilities Grants to provide aids and adaptations, the Handyperson Service, and other loans to deal with disrepair and alterations
- Providing a flexible and broad range of housing options including the private rented sector, intermediate rent and shared ownership opportunities
- Exploring sub-regional opportunities to provide greater housing choice and availability

6. **The Charter**

6.1 The Charter is a very short document that would commit the Board to three high level actions – identifying need, providing leadership and commissioning for inclusion.

6.2 The full details of the commitments as described within the Charter are:

- **Identify need:** We will include the health needs of people who are homeless in our Joint Strategic Needs Assessment. This will include people who are sleeping rough, people living in supported accommodation and people who are hidden homeless. We will work with homelessness services and homeless people to achieve this.

- **Provide leadership:** We will provide leadership on addressing homeless health. Our Director of Public Health has a key leadership role to play in tackling health inequalities and will lead in promoting integrated responses and identifying opportunities for cross boundary working.

- **Commission for inclusion:** We will work with the local authority and clinical commissioning groups to ensure that local health services meet the needs of people who are homeless, and that they are welcoming and easily accessible.

5.3 As outlined above the needs of homeless people are already considered by the local authority and the CCG as part of their commissioning cycles and these commitments simply recognise that good practice.

5.4 Lewisham’s Director of Public Health, Dr. Danny Ruta, is a leading advocate for reducing health inequalities and has given his backing to the Charter.
As such it is considered a positive endorsement of ongoing work for the Board to become signatories of the Charter.

6. Financial implications

6.1 There are no specific financial implications to the report.

6.2 Any work to fulfil the commitments described in paragraph 5 will be funded from existing budgets.

7. Legal implications

7.1 There are no specific legal implications arising from this report.

7.2 Members of the Board are reminded that under Section 195 Health and Social Care Act 2012, Health and Wellbeing Boards are under a duty to encourage integrated working between the persons who arrange for health and social care services in the area”

8. Crime and Disorder Implications

8.1 There are no direct Crime and Disorder implications to this report.

9. Equalities Implications

9.1 Homelessness is both a symptom and a cause of significant health inequalities across individuals with all protected characteristic. By better understanding and addressing these needs commissioners are better placed to reduce inequalities.

10. Environmental Implications

10.1 There are no direct Environment implications to this report.

11. Conclusion

11.1 The St. Mungo’s Broadway Charter for Homeless Health commits Health and Wellbeing Boards to addressing health inequalities for homeless people. As such it fits with the core aims of the Lewisham Board and it recommended that the Board become a signatory.

Appendices

Appendix 1: The St. Mungo’s Broadway Charter for Homeless Health

Background Documents
Homeless Link, *The Unhealthy State of Homelessness*, 2014

[http://www.homeless.org.uk/sites/default/files/site-attachments/The%20unhealthy%20state%20of%20homelessness%20FINAL.pdf](http://www.homeless.org.uk/sites/default/files/site-attachments/The%20unhealthy%20state%20of%20homelessness%20FINAL.pdf)

If you have any difficulty in opening the links above or those within the body of the report, please contact Kalyan DasGupta (kalyan.dasgupta@lewisham.gov.uk; 020 8314 8378), who will assist.

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