

	<b><u>Agenda Item: 16</u></b>
<b>Report to:</b>	<b>Birmingham Health &amp; Wellbeing Board</b>
<b>Date:</b>	<b>30<sup>th</sup> July 2019</b>
<b>TITLE:</b>	<b>HOMELESSNESS AND HEALTH DELIVERY PLANS</b>
<b>Organisation</b>	<b>Birmingham City Council and Partners</b>
<b>Presenting Officer</b>	<b>Councillor Thompson and Kalvinder Kohli</b>

<b>Report Type:</b>	<b>For information and Decision</b>
---------------------	-------------------------------------

<b>1. Purpose:</b>
1.1 To provide the Board with an update on the Homelessness Prevention Strategy 2017 and progress one year on.
1.2 To hear from key partners in terms of their contributions to this agenda.
1.3 To advise the Board of a key area of focus for year two priorities which include a focus upon Homelessness and Health.

2. Implications:		
BHWB Strategy Priorities	Health Inequalities	✓
	Childhood Obesity	
Joint Strategic Needs Assessment		
Joint Commissioning and Service Integration		✓
Maximising transfer of Public Health functions		✓
Financial		
Patient and Public Involvement		
Early Intervention		✓
Prevention		✓
Homelessness		✓

3. Recommendations
<p>3.1 The Board is asked to:</p> <p>3.1.1 Note the year one progress of the delivery of the Homelessness Prevention Strategy 2017+ (HPS).</p> <p>3.1.2 Agree to retain specific oversight of the implementation of the homelessness and health action plan and provide a critical friend role to understand what difference this is making to the lives of people affected by homelessness.</p> <p>3.1.3 Agree to provide their organisational leadership and commitment to support the successful delivery of both the overall strategy and the proposed Homelessness and Health Delivery Plans.</p>

4. Background
<p>4.1 The impacts of homelessness are complex and intertwined which means that no one agency can respond to this issue alone. Agencies see homelessness through different lenses which means that a systemic approach is essential to:</p> <ul style="list-style-type: none"> <li>• Prevent people from becoming homeless in the first place</li> <li>• Assist people quickly if and when they do become homeless</li> <li>• Ensure recovery is resilience based in order to avoid repeat homelessness</li> </ul> <p><b>4.2 Homelessness Prevention Strategy 2017+ One Year one</b></p> <p>4.2.1 The current Homelessness Prevention Strategy (HPS) was launched June 2018 (<b>Appendix 1</b>) Local authorities have a statutory duty to undertake a homelessness needs assessment of their local area and prepare Homelessness Prevention Strategies in order to address need in their area. In August 2018 government launched its National Rough Sleeper Strategy setting out its ambition for 2027 where no one has to sleep rough. A further requirement is placed upon local authorities to repurpose their HPS to include specific plans to tackle rough sleeping.</p> <p>4.2.2 The HPS is a partner strategy, the delivery of which is overseen and supported by the Homelessness Partnership Board. The Board is facilitated by BCC Adult Social Care Commissioning in order to ensure governance reporting via the Health and Wellbeing Board and the Community Safety</p>

Partnership.

- 4.2.3 Year one progress is attached as a background document (**Appendix 2**). The focus of the first year of the strategy was to develop an excellence model for the pathway. The aim of which, is to shape future commissioning activity and service delivery of organisations to operate individually and collectively to deliver the systems change required. Parallel to this work was specific areas of focused activity relating to a commitment to collaborate which moves agencies beyond the minimum duty to refer under the Homelessness Reduction Act 2017, into a space of more up-stream preventative activity for a boarder range of partners.
- 4.2.4 The proposed Year two priorities are currently being worked up into delivery plans and due to be agreed by the Homelessness Partnership Board in the Autumn. These priorities include:
- A continuation of the commitment to collaborate
  - Specific delivery plans for key cohorts of population at risk of homelessness; young people leaving care, people leaving prisons, rough sleeper.
  - Quality assurance for the exempt accommodation sector
  - Homelessness and health.
- 4.2.5 Year two will also include encouraging cultural change in order to support the ambitions set out in the sister strategy to the HPS, the Domestic Abuse Prevention strategy 2018+ to change attitudes.

### **4.3 Health Inequalities**

- 4.3.1 There is an increasing recognition that nationally the focus on homelessness has been overly housing focused with an emphasis for accessing suitable housing and maintaining financial sustainable tenancies and not enough focus on addressing the underlying causes of people's experiences which include the complexity of health needs including adverse childhood experiences (**Appendix 3 Public Health Presentation**).
- 4.3.2 These health inequalities span beyond the very visible signs of street homelessness. The Birmingham Homelessness Prevention Strategy identified circa 20,000 households annually that fall into the broad definitions of homelessness to including those in precarious housing circumstances and temporary accommodations.
- 4.3.3 There are key cohorts of population that are at greater risk of becoming homeless. These include people leaving institutional settings, victims of

domestic or sexual abuse and households on low incomes. These vulnerabilities may be further exacerbated by multiple health conditions and use of substances.

4.3.4 Unsuitable or unaffordable housing can also affect health and wellbeing, for example properties in a state of disrepair including damp and mould or households affected by fuel poverty leading to respiratory problems and exacerbation of other health conditions.

4.3.5 National rough sleeping data identifies people with no recourse to public funds as 50% of the rough sleeping population.

#### **4.4 National Responses**

- The NHS Long Term Plan (2018) positively references the need to address the health needs of the homelessness populations.
- Public Health England (PHE) have produced a Homelessness and Health Toolkit for Practitioners.
- There is a focus from the Local Government Association and Association of Directors for Adult Social Services (ADSS) to explore the impacts of homelessness, safeguarding and Safeguarding Adult Reviews.
- Central Government Departments have also appointed Homelessness and Health Advisors which include a specific focus on young people leaving care.
- Central Government funding for Rough Sleeper Initiatives, Rapid Rehousing and Housing First include funding for health and social care interventions.
- Dedicated longer term funds are in the process of being agreed by NHS England (NHSE) for five local authority areas which related to homelessness and Mental Health.
- Public Health England have recently put out a funding call for homelessness and mental health.

#### **4.5 A Local Response**

The infra structure to provide a key focus on the homelessness and agenda is starting to evolve. Areas of recent activity within the City are set out below:

- The Birmingham and Solihull Sustainability and Transformation Partnership (STP) Population Health Management data project will

focus upon homelessness and health. A project team consisting of BCC, BSOL CCG and external partner agencies is being brought together. This is a 12 week project, which will include a focus on how we embed a sustainable systems change.

- As part of the governments National Rough Sleeper Strategy (2018) delivery Birmingham has been the recipient of targeted funds relating to Housing First and the Rough Sleeper Initiatives which has provided much needed additional support and accommodation into the city. This include small levels of funding for prescribing nurses, mental health outreach substance misuse support and an Adult Social Care Social Worker post. Whilst this is welcomed additional funds for the City, these are short term funds and therefore limited in terms of their sustainable impacts.
- Homelessness and health action plans for primary care and mental health have been produced by health colleagues following two round table discussions facilitated by Cllr Hamilton and Cllr Thompson **(Appendices 4 and 5)**.
- The local authority's Adult Social Care Directorate are creating a vulnerable adult's team which will include dedicated support for people that are either at risk of homelessness or rough sleeping.
- Adult Social Care Commissioning is currently under way, commissioning using the positive pathway approach set out within the Homelessness Prevention Strategy. This includes a range of housing and wellbeing support services focused upon universal and targeted prevention, crisis support and recovery.
- Funding has been secured for a strategic post and project management support to work across health, social care and housing.
- Birmingham is being represented at the annual conferences and events for ADASS and LGA which this year includes a focus upon homelessness, health and safeguarding.
- The West Midlands Combined Authority is leading Homelessness and Health round tables for the region. This will include an opportunity for Birmingham to present at the WMCA Inclusive Growth annual conference in September.
- Birmingham City Council Adult Social Care has been invited to form part of a national expert reference group on safeguarding and homelessness

deaths.

- MHCLG have provided expert advisors to work with Birmingham specifically on this agenda. A key role for the advisors would be to provide some critical friend challenge to our proposed homelessness and health actions and also some observation and recommendations to re-modelling reviews planned for existing services.
- BSOL CCG is awaiting confirmation of additional funds to address health and mental health NHSE. The NHSE resources would be over period of 5 years.
- Some Rough Sleeper Initiatives funds will be used to support some cultural change activity for community and faith groups to raise awareness of self - neglect and promoting charitable aims in a preventative way.

## 5. Discussion

A range of information items from NHSE have been included as information items to inform discussion and commitments moving forward.

- Homelessness and Health Draft Delivery Plan Primary care (**Appendix 4**)
- Homelessness and Health Draft Delivery Plan Birmingham and Solihull Clinical Commissioning Group and Sandwell and West Birmingham CCG (**Appendix 5**)
- Homeless Health Exchange (**Appendix 6**)

## 7. Compliance Issues

### 7.1 Strategy Implications

### 7.2 Homelessness Implications

HWBB support to ensure the effective implementation of the strategy and homelessness and health action plan is critical to addressing the health inequalities of people experiencing homelessness.

<b>7.3</b>	<b><i>Governance &amp; Delivery</i></b>
	HWBB has governance oversight of the delivery of the Homelessness Prevention Strategy.
<b>7.4</b>	<b><i>Management Responsibility</i></b>
	Management responsibility for the homelessness and health action plan will sit with the key lead health partners and adult social care.
<b>7.5</b>	<b><i>Diversity &amp; Inclusion</i></b>
	The actions in this report aim to address the health inequalities for citizens that are vulnerable due to their homelessness circumstances.

<b>Appendices</b>	
1.	Homelessness Prevention Strategy 2017+
2.	Birmingham Homelessness Prevention Strategy: One Year On
3.	Presentation: Homelessness and Health: Data and Evidence
4.	Homelessness and Health Draft Delivery Plan Primary Care
5.	Homelessness and Health Draft Delivery Plan Birmingham and Solihull Clinical Commissioning Group and Sandwell and West Birmingham CCG
6.	Homeless Health Exchange
7.	Support Provided for People who are Homeless – Birmingham Community Healthcare NHS Foundation Trust