


Health and Wellbeing Board 29 September 2015	
Report of the London Borough of Tower Hamlets	Classification: Unrestricted
Charter for Homeless Health (St Mungo's Broadway)	

Lead Officer	Somen Banerjee, Director of Public Health
Contact Officers	Martin Ling, Housing Strategy and Partnerships Manager Paul Wishart, Vulnerable Adults Commissioning Team, Commissioning Manager Adults Services Tim Madelin, Senior Strategist Public Health
Executive Key Decision?	No

Summary

St Mungo's Broadway is a national level homelessness charity that has contacted Health and Wellbeing Boards across the country to request that they consider signing the Charter for Homeless Health

The Charter seeks commitment from the Health and Wellbeing Board

- to include the needs of people who are homeless in the Joint Strategic Needs Assessment
- to provide leadership across the partnership to address homeless health
- to ensure that across the local authority and clinical commissioning group, local health services meet the needs of people who are homeless (commissioning for inclusion)

This report outlines at a high level the homelessness strategy and specific initiatives to meet the health needs of people who are homeless.

The commitments of the Charter are in line with existing work and it is recommended for the Health and Wellbeing Board to sign the Charter in order to demonstrate continued partnership commitment to working together to protect and improve the health of people who are homeless.

Recommendations:

The Health & Wellbeing Board is recommended to:

1. Sign the Charter for homeless health

1. REASONS FOR THE DECISIONS

- 1.1 To publicly demonstrated partnership commitment to improving the health of people who are homeless

2. ALTERNATIVE OPTIONS

- 2.1 Not to sign

3. DETAILS OF REPORT

Background

- 3.1 St Mungo's Broadway is a national level homelessness charity which runs a range of initiatives for homeless people including housing , advice, health and employment services
- 3.2 The organisation, in its campaigning role, has been contacting Health and Wellbeing Boards across the country to sign the Charter for Homeless Health.
- 3.3 This recognises the substantially worse health of people who are homeless. The average age of death for a homeless person is 47 which is around 30 years lower than the national average.
- 3.4 Underpinning this are very high levels of physical and, particularly, mental health issues coupled with substantial barriers to accessing basic health and social care services.
- 3.5 The charter seeks commitment from the Health and Wellbeing Board
- to include the needs of people who are homeless in the Joint Strategic Needs Assessment
 - to provide leadership across the partnership to address homeless health (noting the lead role of the Director of Public Health)
 - to ensure that across the local authority and clinical commissioning group, local health services meet the needs of people who are homeless (commissioning for inclusion)

Homelessness in Tower Hamlets

- 3.6 Based on public health outcomes framework data, there were 1,935 households in temporary households in Tower Hamlets in 13/14 (equating to a rate of 17.7 per 1000 population – the ninth highest in London). There were 377 people seen sleeping rough in 14/15. There is an existing Homelessness and Health JSNA and the data is currently being refreshed.
- 3.7 The Council and its partners are continually striving to improve services and reduce homelessness in the borough through strong partnership working. The

emphasis continues to be on preventative case work intervention in order to reduce statutory homeless acceptances.

- 3.8 In addition the Council has extended services to single “non-statutory” homeless people and reduced the number of people sleeping rough under the No Second Night Out initiative whilst working with the hostel sector to ensure they are more responsive to the needs of the borough, with the neediest and vulnerable prioritised for vacancies
- 3.9 Since 2011 the Council has attempted to reduce the use of temporary accommodation and bed and breakfast for homeless households but the introduction of welfare reforms and the heated private sector housing market has provided significant barriers.
- 3.10 The Council is about to refresh its current homelessness statement which was adopted in 2013. The overall aim of the statement is to tackle and prevent homelessness in Tower Hamlets, which includes: preventing homelessness; supporting those who are homeless or at risk of homelessness; and providing accommodation for homeless households.
- 3.11 This will be achieved through four strategic themes which will be retained for the 2105/16 refresh:
- Focus on homeless prevention and tackling the root causes of homelessness
 - Access to affordable housing options;
 - Children, families and young people; and
 - Supporting vulnerable adults
- 3.12 There are a range of health specific initiatives to improve the health of people who are homeless including
- The London Pathway model at the Royal London ensures those who are homeless or insecurely housed and who access hospital, are moved on as speedily and effectively as possible through a multi-agency approach
 - Health E1 is a primary care practice for vulnerable homeless people and those in hostels, day centres or supported by the London Pathway project

What is the added value of signing up to the Charter?

- 3.13 Signing up to the charter demonstrates recognition at the highest level of the importance of the issue of health and homelessness and a commitment to addressing the health needs of people who are homeless
- 3.14 The Charter provides impetus to track progress around the three key elements of its framework – identifying need, providing leadership and commissioning for inclusion

- 3.15 As part of a network of other Health and Wellbeing Boards across the country (currently 32) there will be an opportunity to share information, guidance and case studies

Recommendation

- 3.16 It is recommended to sign up for the Charter and ensure that the commitments continue to underpin council and CCG strategies and commissioning to address the needs of people who are homeless.

4. COMMENTS OF THE CHIEF FINANCE OFFICER

- 4.1 The commitments in the Charter are in line with existing work, there are no additional financial implications as a result of the recommendations in this report.

5. LEGAL COMMENTS

- 5.1 The Health and Social Care Act 2012 (“the 2012 Act”) makes it a requirement for the Council to establish a Health and Wellbeing Board (“HWB”). S.195 of the 2012 Act requires the HWB to encourage persons who arrange for the provision of any health or social care services in their area to work in an integrated manner.
- 5.2 This duty is reflected in the Council’s constitutional arrangements for the HWB which states it is a function of the HWB to have oversight of the quality, safety, and performance mechanisms operated by its member organisations, and the use of relevant public sector resources across a wide spectrum of services and interventions, with greater focus on integration across outcomes spanning health care, social care and public health.
- 5.3 Further, it is a function of the HWB to identify the needs and priorities across Tower Hamlets and publish and refresh the Tower Hamlets Joint Strategic Needs Assessment (JSNA) so that future commissioning and policy decisions are based on evidence.
- 5.4 Additionally, under the Care Act 2014 the Council has a number of general duties in ss.1-7 including a duty to co-operate generally with those it considers appropriate who are engaged in the Council’s area relating to adults with needs for care and support. Further, there is a general duty to prevent needs for care and support from developing.
- 5.5 The Council has broad powers to provide different types of accommodation in order to meet people’s needs for care and support. The Act is clear that suitable accommodation can be one way of meeting care and supports needs. However, the Act is also clear on the limits of responsibilities and relationship between care and support and housing legislation, to ensure that there is no overlap or confusion. Section 23 of the Act clarifies the existing boundary in law between care and support relevant housing legislation, such as the Housing Act 1996. Where the Council is required to meet accommodation

related needs under housing legislation as set out in the Housing Act 1996 or under any other legislation specified in regulations then the Council must meet those needs under that housing legislation.

5.6 The aims of the Charter may assist with the Council's general duties and is within the functions of the HWB.

5.7 When considering the recommendation regard must be given to the public sector equalities duty to eliminate unlawful conduct under the Equality Act 2010. The duty is set out at Section 149 of the 2010 Act. It requires the Council, when exercising its functions, to have 'due regard' to the need to eliminate discrimination (both direct and indirect discrimination), harassment and victimization and other conduct prohibited under the Act, and to advance equality of opportunity and foster good relations between those who share a 'protected characteristic' and those who do not share that protected characteristic.

5.8 In light of the equality duty consideration may be given to other initiatives and charters seeking the same aims.

6. ONE TOWER HAMLETS CONSIDERATIONS

6.1 This is a proposal that relates to improving the health of people who have the poorest health in the borough

7. BEST VALUE (BV) IMPLICATIONS

7.1 No direct implications although the proposal encourages partnership working between commissioners and providers of services to meet the needs of people who are homeless and this could promote efficiencies

8. SUSTAINABLE ACTION FOR A GREENER ENVIRONMENT

8.1 No direct implications

9. RISK MANAGEMENT IMPLICATIONS

9.1 The commitments in the charter are very much in line with Council and NHS approaches to addressing health and homelessness so there are no obvious risks

10. CRIME AND DISORDER REDUCTION IMPLICATIONS

10.1 Reducing homelessness would be expected to have positive impacts on crime and disorder

Linked Reports, Appendices and Background Documents

Linked Report

- [List any linked reports, for example those that went to other Committees on the same issue]
- State NONE if none.

Appendices

- Charter for homeless health

Local Government Act, 1972 Section 100D (As amended)

List of “Background Papers” used in the preparation of this report

List any background documents not already in the public domain including officer contact information.

- State NONE if none.

Officer contact details for documents:

- Somen Banerjee, Director of Public Health