

AGENDA ITEM 9

HEALTH AND WELLBEING BOARD



TO:	Blackburn with Darwen Health and Wellbeing Board
FROM:	Dominic Harrison, Director of Public Health
DATE:	29 th September 2015

SUBJECT: Charter for Homeless Health

1. PURPOSE

To request that Blackburn with Darwen Health and Wellbeing Board sign the St Mungo's Broadway Charter for Homeless Health, thus reinforcing their existing commitments to reducing health inequalities for vulnerable people.

2. RECOMMENDATIONS FOR THE HEALTH & WELLBEING BOARD

It is recommended that the Board:

1. Note the content of the Charter for Homeless Health
2. Agree to the Chair signing the Charter on behalf of the Board

3. BACKGROUND

St Mungo's Broadway is a national charity, formed in April 2014 by the merger of two well established, respected homelessness charities; St Mungo's and Broadway. The charity is dedicated to supporting people who are homeless and also works with MP's in order to influence national policy, raising understanding of the issues facing homeless people and calling for greater action to support them.

Their *Homeless Health Matters* campaign aims to highlight the health inequalities experienced by homeless people and it calls on health leaders at the local and national level to make a commitment to understanding and meeting the needs of homeless people. They are asking all 152 Health and Wellbeing Boards to sign the Charter for Homeless Health in order to raise awareness of the campaign and make concrete commitments to measuring, understanding and meeting the health needs of homeless people in their areas.

4. RATIONALE

A key aim of the Health and Wellbeing Board is to address inequalities, particularly those relating to health and wellbeing. Under the auspices of the Health and Wellbeing Board, there is a history of partnership working to address issues of homelessness and supporting homeless people, consequently this Charter is complementary to the priorities of the Board.

Blackburn with Darwen is well below the national and North West average level for statutory homelessness, which is reflective of the coordinated activity to address this issue. In 2013/14 the rate of statutory homelessness (measured by homelessness acceptances) in Blackburn with Darwen was 0.7 per 1000 population, compared to 1.2 per 1000 population for the North West and 2.3 per 1000 population for England.

At their recent Development session in April the Board supported a review and needs assessment of health and housing issues for Blackburn with Darwen, with a view to the review providing recommendations for a Health and Housing Strategy to support the Joint Health and Wellbeing Strategy objective, *“Ensure people have opportunities to live in healthy homes and neighbourhoods”*.

5. KEY ISSUES

By signing up to the Charter, the Health and Wellbeing Board commit to the following three activities:

1. **Identify need:** We will include the health needs of people who are homeless in our Joint Strategic Needs Assessment (JSNA). 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.
2. **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.
3. **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.

A copy of the Charter for Homeless Health is attached as Appendix A.

These three activities are already priority areas for Blackburn with Darwen, and work is underway to embed them, for example the JSNA (story of place) recognises that there are a number of adults with complex needs living in the borough, some of whom are homeless or are residing in one of the borough's many Houses of Multiple Occupation (HMO's). The Blackburn with Darwen Making Every Adult Matter programme, aims to address health and social inequalities for these adults with multiple complex needs and is starting to achieve positive outcomes for this group of people.

The Borough's Integrated Homelessness Strategy, adopted by the Council's Executive Board in October 2014, describes how the Council and its partners aim to address homelessness and highlights a number of activities that demonstrate leadership on addressing homeless health, including:

- Developing strategic and operational protocols between the CCG, Social Care services and Public Health to ensure the re-organisation of mental health services focusses on better access for people who live in supported accommodation or who are at risk of homelessness, including those in transition from child to adult mental health services
- Developing the physical and mental health outreach team to provide healthcare and referral services for people living in hostels
- Developing recovery-focussed housing in which communities of people, who have reached the abstinence stage, live together in shared houses and can support each other's recovery

The Health and Wellbeing Board will have a dedicated discussion on the feedback from the Health and Housing Review, at a future development session. This will give the opportunity to consider the improvement actions recommended from the review, and give thought to how the Board can continue to work to prioritise health, housing and homelessness.

6. POLICY IMPLICATIONS

By signing this Charter, the Health and Wellbeing Board are openly ratifying their strong commitment to measuring, understanding and meeting the health needs of homeless people in their areas. Delivering on these commitments can help the Board achieve their ambitions, set out in the draft Joint Health and Well-being Strategy for 2015-2018

7. FINANCIAL IMPLICATIONS

There are no financial implications resulting from this report.

8. LEGAL IMPLICATIONS

There are no legal implications resulting from this report.

9. RESOURCE IMPLICATIONS

There are no direct resource implications resulting from this report. Resources to deliver on the commitments in the Charter, already exist within the Council and these activities are already included within the relevant officers' work plans.

10. EQUALITY AND HEALTH IMPLICATIONS

The commitments in the Charter for Homeless Health aim to ensure that any inequalities, either health or social, being faced by homeless people, are identified and responded to accordingly by Health and Wellbeing Boards. Therefore by agreeing to these commitments, the Board is intending to have a positive impact on the lives of people who find themselves homeless.

The Integrated Homelessness Strategy, which outlines the partnership activities to reducing inequalities for homeless people, underwent a full EIA, details of which are available on the Council's internet site through the following link:

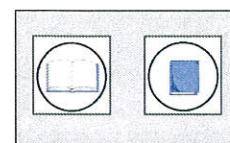
<http://www.blackburn.gov.uk/General%20EIA/Homelessness%20Strategy%202014-19%20EIA%20v1%200.pdf>

11. CONSULTATIONS

The Integrated Homelessness Strategy that captures the key actions to be undertaken to improve health and social conditions for those people who are homeless, was developed in consultation with a wide range of agencies; service users and partnership boards. A full list of consultees can be found within the Homelessness Review document on the Council's internet site, through the following link:

<http://blackburn.cmis.uk.com/blackburn/Meetings/tabid/70/ctl/ViewMeetingPublic/mid/397/Meeting/1033/Committee/419/Default.aspx>

VERSION:	0.3
CONTACT OFFICER:	Philippa Cross
DATE:	17 th August 2015
BACKGROUND PAPER:	Blackburn with Darwen Integrated Homelessness Strategy 2014-2019 Blackburn with Darwen Homelessness Review 2014





St Mungo's
Broadway
Rebuilding lives, day by day

Charter for homeless health

People who are homeless face some of the worst health inequalities in society. They are at much greater risk of mental and physical health problems than the general population and their experiences of homelessness often make it more difficult to access the healthcare they need.

The **Health and Wellbeing Board** is committed to changing this. We therefore commit to:

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.

Signed:

Chair: **Health and Wellbeing Board**

Date: