

HiAP Case Study – Preventing Homelessness in Warwickshire: a multi-agency approach

BACKGROUND

It is recognised that homeless populations have significantly worse physical and mental health outcomes compared to the general population. For example, evidence shows that those who experience homelessness have reduced life expectancy, are more likely to experience accelerated aging and are more likely to suffer from a range of health issues including drug and alcohol misuse. Despite facing more health challenges, this cohort are known to face barriers in accessing primary care. Therefore, addressing health inequalities for those experiencing homelessness should be considered a key public health issue.

AIM

Organisations work together to promote and deliver changes expected by the government in the Homelessness Reduction Act 2017 with reference to prevention duty and Duty to Refer. In Warwickshire, five priorities have been identified including health, financial inclusion, young people, domestic abuse, and offending. A key aim of the health priority is to reduce the inequalities and improve the health of people at risk of homelessness, homeless or sleeping rough.

RELATIONSHIP WITH PUBLIC HEALTH

The Joint Health and Wellbeing Strategy 2021-26 has identified reducing inequalities in health outcomes and the wider determinants of health as one of its three main priorities. The Health and Wellbeing Board approved a Warwickshire-wide Preventing Homelessness Strategy in March 2021.

To support the reduction of health inequalities at both national and system level NHS England have introduced the Core20PLUS5 model. Coventry and Warwickshire ICS have chosen 'Transient communities – people who are experiencing homelessness' as one of the Plus Groups. This group has been chosen because local data and evidence has shown that this group are experiencing poorer than average health access, experience, and outcomes.

PARTNERSHIP

To achieve our collective aims as outlined in the first ever Warwickshire-wide [Preventing Homelessness Strategy](#), a partnership has been formed with the county, district and borough councils of Warwickshire. Partnership members liaise and engage with the widest range of statutory and voluntary organisations operating across the county.

OUTLINE OF THE WORK

- A partnership has been formed to action the Preventing Homelessness Strategy. Detailed action plans are in place and each chapter theme and service user involvement incorporated wherever appropriate.

Under the Health Chapter Action plan the following has been achieved:

- Provision of a Homeless Street Outreach Physical Health Nursing service and CWPT Community Mental Health Team for Homeless people to provide healthcare in the community.
- Provision of the Housing- Hospital Liaison Service to provide practical support for discharge where 'housing' has been raised as an issue for patients preventing timely discharge.
- Pathway Trust Needs Assessments of the care, management and discharge of people who are homeless.
- Dual Diagnosis protocol and pathways developed into mental health/drugs and alcohol services covers a broad spectrum of substance misuse and mental health challenges that an individual may face at the same time. The protocol describes a joint approach that will be taken by organisations involved to support these individuals.

ENGAGEMENT

On behalf of Public Health, Coventry University undertook an independent published review "[Nurse-led mental and physical healthcare for the homeless community: A qualitative evaluation](#)". This consisted of semi-structured interviews with statutory health and local authority professionals, and voluntary and community sector professionals. The evaluation confirmed the benefits of homeless health care in reducing health inequalities and promoting a more accessible, flexible and personal centred approach to holistic care

More recently Coventry University have undertaken an additional review of homeless health and housing provision with people who have experienced homelessness in Warwickshire. Findings shown clients perceived the homeless health service to be helpful in providing access to healthcare service.

An Experts by Experience group has now been set up in collaboration with Homeless Link, Hope4 and P3 to ensure services are informed a continuous basis by service users.

CHALLENGES

There was a requirement to allocate significant time to go through the governance processes for the County and the five District and Boroughs.

The strategy enabled several pilot programmes to take place, however allocating recurrent funding for successful pilot projects has been a significant challenge.

WHAT DIFFERENCE WAS MADE?

Under the Health Chapter Action plan, key successes have included:

- The Homeless Street Outreach Physical Health Nursing service were able to mobilise quickly and work with partners to provide Covid-19 vaccinations to people experiencing homelessness during the height of the pandemic.
- Between Jan 2020 to May 2022 the Homeless Street Outreach Physical Health Nursing service has had 888 referrals, coming from a variety of sources including

community health services, acute services, Change Grow Live, housing charities and local authorities. It is expected that this in turn has reduced the number of A&E admissions from this cohort.

- The CWPT Community Mental Health Team for Homeless people service have recently acquired a camper van that has been specially adapted to enable all aspects of treatment. Previous experience with this cohort has informed the need to take health care interventions to the individual and the mobile clinic offers a safe, private space to offer health interventions to those on the street or in unsafe places to visit.
- Between March 2020 and June 2022, the Housing- Hospital Liaison Service have dealt with 454 cases, providing outcomes such as providing equipment and referrals to cleaning services so that the individual has a suitable home to return to, and assisting with the Duty to Refer process.
- The Pathway Trust Needs Assessments have identified key recommendations for action which are currently being addressed at a trust and system level.