



East Ayrshire CHP Committee

Monday 6th June 2011

Subject	Health and Homelessness Action Plan 2011-2012
Purpose	To present the CHP Committee with the revised Health and Homelessness Action plan for the period 2011- 2012
Recommendations	The Committee is asked to: <ul style="list-style-type: none">• consider and approve the action plan; and• otherwise note the content of the report.

1 Background

- 1.1 The current Health and Homelessness Action Plan (2009-2011) is due to expire on 31 March 2011. The CHP Committee has previously received monitoring reports describing progress in implementing the action plan. The final monitoring report in this cycle covering the period January to March 2011 will be tabled at a future meeting of the CHP Committee.
- 1.2 NHS Health Scotland has recently been identified as the organisation which will provide future strategic leadership for health and homelessness in Scotland and work is planned over the coming year to revise the Health and Homelessness Standards and develop an outcomes approach to planning around health and homelessness.
- 1.3 In line with national developments and planning processes across NHS Boards in Scotland, it is proposed that a one year interim action plan be prepared for the period 2011/12; followed by a subsequent 4 year action plan which will dovetail with Local Housing Strategies and reflect new national guidance.

2. Action Plan Development Process

- 2.1 In order to inform the 2011/12 action plan, the Health and Homelessness Action Plan Implementation Group (HAHAPIG) hosted an event on 26 November 2010 to promote engagement with a wide range of stakeholders in Ayrshire and Arran in order to inform priority setting in the revised Health and Homelessness Action Plan.
- 2.2 The event was structured around three plenary speakers providing the policy context for health and homelessness and national and local overviews of progress and workshops themed around key priorities for health and homelessness as follows:
- Access to services/ care pathways
 - Addictions
 - Public Health Topics
 - Mental Health
 - Prison
 - 18-25 age group
 - Housing and homelessness
 - Children of Homeless Families

In addition, a wide range of organisations and services provided displays and information in the market place.

- 2.3 Eighty-eight people attended the event which was significantly in excess of the number who originally registered. Participants were representative of NHS Ayrshire and Arran, the three Ayrshire local authorities and various voluntary sector and charitable organisations. In addition, a small number of homeless clients attended, although this was not one of the intended target groups for the event.
- 2.4 A number of cross cutting themes were identified in the workshops, which have been central to informing the direction of the action plan for the coming year. These are as follows:
- There is a need to develop buddying, befriending and support provision for homeless people in order to enable them to keep appointments and access services, better maintain and sustain tenancies and to reduce social isolation. Key target groups include older people and young people in throughcare.
 - Further development of service pathways is required in order to ensure equity of access to services for homeless people. Priorities include mental health services and out of hours health care (A&E and ADOC). Key target groups include the prison population and young people in throughcare.
 - A holistic, flexible approach to service delivery is required in order to support homeless people to successfully engage with services. This should include drop in services, person centred approaches and, where appropriate, the development of specialised services.

- Supported accommodation models require to be explored and developed for those who find it difficult to sustain or do not want the responsibility of a tenancy. Target groups are people with addiction and mental health problems.
 - A continued focus on partnership working is required. Sustained effort is required to improve communication between organisations and providers and to raise awareness of homelessness.
- 2.5 In addition, the need for stronger, more effective partnership working arrangements to support the most vulnerable individuals with the most complex needs, in order to prevent crisis, has been identified by the HAHAPIG as an issue which requires particular consideration and support from the CHP Committee. This is in line with the Adult Support and Protection (Scotland) Act 2007.
- 2.6 The draft action plan for 2011/12 has been developed in partnership by the Ayrshire wide HAHAPIG and the three local health and homelessness implementation groups. It is proposed that these groups continue to be the mechanism for overseeing the delivery of this work in Ayrshire and Arran.
- 2.7 In parallel to this process a short life working group developed an action plan in response to the findings of the Single Homeless Addiction Pathway Evaluation (SHAPE) report and all relevant actions have been integrated into the Health & Homelessness Action Plan. The full SHAPE report action plan is appended.
- 2.8 An evaluation of the approach to implementing the Health and Homelessness Standards in Ayrshire and Arran is currently being undertaken by the Public Health Research team in NHS Ayrshire and Arran. This is focused around the core standards where significant development work and investment has taken place in Ayrshire and Arran such as the development of service pathways and the role of the Public Health Nurse/Facilitator (Homeless Clients). The evaluation will be informed by engagement with key stakeholders including people experiencing homelessness. The results of this evaluation will inform the implementation of the action plan.

3. Recommendations

- 3.1 The CHP Committee is asked to:
- consider the action plan;
 - Approve the action plan; and
 - otherwise note the content of the report.

Jean Hendry
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(Chair of the HAHAPIG)

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