

Westminster Health & Wellbeing Board

Date:	15 September 2016
Classification:	General Release
Title:	Draft Rough Sleeping Strategy 2017-20
Report of:	Julia Corkey, Director of Policy, Performance and Communications Ed Watson, Executive Director of Growth, Planning and Housing
Wards Involved:	All
Policy Context:	Rough Sleeping Strategy
Financial Summary:	As set out in section 6.1.
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1. Executive Summary

- 1.1 This report provides background information for the presentation which the Health and Wellbeing Board will receive about the health related objectives in the draft Rough Sleeping Strategy 2017-2020.

2. Key Matters for the Board

- 2.1 The Health and Wellbeing Board will receive a presentation on the health related objectives in the draft Rough Sleeping Strategy 2017-2020, which is planned to go out for public consultation later in the month.
- 2.2 The Health and Wellbeing Board will be asked to provide early comments on the health-related objectives in the strategy. Comments from the Board collectively and from individual members during the consultation stage would be greatly welcomed.

3. Background

3.1 Westminster has more rough sleepers than anywhere else in the country, with 2,857 identified on its streets in 2015/16. The current 2013-16 strategy is due to expire; a new strategy is being drafted to cover the next three years. This builds on the achievements and best practice that are already in place. At its centre is recognition that rough sleeping is dangerous and damaging to health for those concerned, and that it has wider impacts on community wellbeing. The programme therefore focuses on both diverting and preventing people from rough sleeping, but also supporting those already living on the streets to improve their lives.

4. Considerations

4.1 Rough sleepers have higher rates of physical and mental health problems than the general population. Some aspects of poor health are attributable to, and exacerbated by, sleeping rough. Some can also play a role in becoming homeless in the first place, such as substance misuse and mental health problems.

4.2 National research identifies common health needs of homeless people – treatment and care for substance misuse, mental ill-health and dual diagnoses that cover both mental illness and substance misuse. This is supported by the self-assessments of former rough sleepers in our accommodation services and evidence from our Joint Strategic Needs Assessment of Rough Sleepers Health and Healthcare carried out in 2013¹.

4.3 Over the course of the last strategy period 2013-2016, there have been great strides made in addressing health issues related to rough sleepers, with considerably effective joint working with CCGs. For example, the Integrated Care Network has been successful in providing physical and mental health bed spaces in our hostels for people who need extra support, in order to support patients discharged from hospital and reduce admission to hospital. The use of Homeless Health Peer Advocates to support service users to navigate the health system has also been successful. These innovations are having an impact - 99% of people in the rough sleeping pathway and over 90% of our core rough sleepers on the streets are now registered with a GP. Over the course of the period covered by the new strategy, it is proposed that this work will continue, but also with a particular focus on addressing mental health issues and tackling the sharp increases in the use of 'novel psychoactive substances' (NPS) - often known as

¹ <http://www.jsna.info/document/rough-sleepers>

'legal highs' - including 'spice'. The Health and Wellbeing Board will receive a presentation on the specific health-related proposals.

- 4.4 The draft strategy also aligns with the priorities on rough sleeping in the draft Health and Wellbeing Strategy, to build on the expertise within Westminster to deliver better health and wellbeing outcomes for those individuals.

5. Legal Implications

- 5.1 There are no direct legal implications arising from this report or presentation.
- 5.2 The recently enacted Psychoactive Substances Act 2016 bans the production, supply and importation of the 'novel psychoactive substances' (NPS) referred to in 4.3.

6. Financial Implications

- 6.1 The council spent £6.4m in 2015/16 on rough sleeping commissioned services.

**If you have any queries about this Report or wish to inspect any of the
Background Papers please contact:**

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