

To: London ICS Conveners
London Clinical Commissioning Group Accountable Officers
London Community and Mental Health Trust Chief Executives

Cc: London Borough Chief Executives
London Borough Directors of Adult Social Care
London Borough Directors of Housing
London Borough Directors of Public Health
London ICS Homeless Health Leads
London ICS Homeless Health Clinical Leads

7 July 2020

Everyone in for good – providing settled accommodation for people who sleep rough

Dear colleagues,

In the coming weeks, formerly street homeless people placed in temporary accommodation will be resettled in the London boroughs. I am writing to bring this to your attention and ask Integrated Care Systems (ICSs) to plan local responses to meet the NHS commitments to adults who are being resettled in London (see Appendix A). Each London ICS has a lead for homeless health, and through liaison with their local authority directors of housing they can be kept informed on the emerging pattern of resettlement.

During the pandemic London's local authorities and the Greater London Authority have provided temporary accommodation for some 5,000 adults who would otherwise have slept rough. The work is now underway to secure move-on accommodation and support people to move into settled arrangements. This programme of work has received additional funding from the Ministry of Housing Communities and Local Government.

Luke Hall MP, Minister for Rough Sleeping and Housing, has written to all local authority chief executives in London setting out expectations for the accommodation work that they will be undertaking. A national task force overseeing this work is chaired by Dame Louise Casey. In his letter, the Minister stated:

“As ever, support for individuals ongoing physical and mental health is important. So, we also ask that you seek to work with health partners to plan for continuity of care for people as they move out of emergency accommodation to support their ongoing physical and mental health, substance use, social care and housing needs.”

Some excellent work has been carried out to provide individual health needs assessments for those staying in hotels, but further support from ICSs are needed. ICS homeless health leads have supported the work of University College London Hospital in delivering individual needs assessments through a bespoke health needs assessment tool – the CHRISP tool, which also aggregates data to provide a pan-London picture of health and care needs. UCLH would very much welcome further support wherever ICSs have clinical workforce who could assist in local delivery to build a comprehensive local picture. Dr Binta Sultan is the contact and can be emailed at binta.sultan@nhs.net.

As people leave hotels their housing support workers, along with NHS staff, will have made every effort to ensure individual health and support needs have been assessed and planned for. Where individuals have consented, their CHRISP health needs assessments will be shared with providers and their GP so it can be included in their electronic records. Individuals themselves will have a pack of information about how to access ongoing health services. People who require shielding should have been identified.

The cornerstone of access to the NHS remains GP registration, but information to date suggests 20% of those in emergency accommodation are still not registered. It is essential therefore that all people moving to their new location are registered with a GP as soon as possible, in line with the requirements in the [Standard Operating Procedure \(SOP\) for General Practice in the context of coronavirus \(Covid 19\)](#).

The London Homeless Integrated Care Systems Partnership, hosted by the Healthy London Partnership, is supporting activity to ensure that partners in London are working to reconfigure and recommission services to meet needs in new ways.

This includes:

- Ongoing Covid19 surveillance and testing
- Step-down provision to support hospital discharge
- Community mental health provision in primary and secondary care
- Substance misuse services
- Co-production with experts by experience

Any queries about local issues can be addressed to your ICS homeless health lead. Pan-London queries can be sent to hlp.homelesshealthcovid19team@nhs.net

Yours sincerely,



Jane Milligan

SRO, London Homeless Health Programme

SRO, Healthy London Partnership

Appendix A – London NHS commitments to adults being resettled in London

- Housing support providers and the NHS who are working with people in the hotels, where individuals have given consent, will share a health and care needs assessment for that individual's NHS record and will endeavour to provide hotel residents with a handheld record of their assessed needs. This will enable local providers where people are housed to plan for a rapid response to assessed need.
- General practice in the receiving borough will register individuals rapidly and arrange for all health responsibilities to be transferred urgently including prescribing, mental health services, and the management of any long-term conditions. For individuals who have already been identified as needing shielding this must happen immediately. Clients will be supported by housing provider support staff where possible to ensure this happens.
- A number of clients will need support with depression and anxiety. Where an individual is waiting to receive a mental health assessment or treatment, they should not be disadvantaged by a move from one ICS area to another, if it has been identified but not carried out this may need to take place in the new location.
- A number of clients have also been identified as requiring dental treatment which may need to be carried out at their new location, either through community dental services or from general dental practitioners.
- Where a hotel or hostel resident with an identified substance misuse need is going to be transferred, the professional effecting the transfer will either inform the current treatment provider or the pan-London Homeless Hotels Drug and Alcohol Support (HDAS) service (9am-5pm weekdays, 020 8066 3738, HDAS-London@turningpointpublic.onmicrosoft.com)
- If the resident is currently in substance related treatment, and is transferring to a new borough, based on this information, the current treatment provider will ensure continuity of care (e.g. communicating the transfer to the provider in the new borough, ensuring continuity of prescribing, liaising with GP and pharmacy).
- If the resident is not currently in treatment, based on this information HDAS will review their need and agree a suitable onward plan with the professional effecting the transfer, e.g. referral into treatment in the receiving borough.