Female Entrenched Rough Sleeper Project

- Funded for a year from 27th July 2015 to work with a cohort of up to 50 women
- living in unassisted 'hidden' and transient lifestyles
- traditionally difficult to engage by homelessness and mental health services

FERSP

The first year of the project 2013/14 was a great success

At the end of the year **33** of the original cohort of **52** were no longer on the streets.

The first year demonstrated the value of a central coordination point, bringing different organisations together to respond to these women's unique needs at the right time.

FERSP

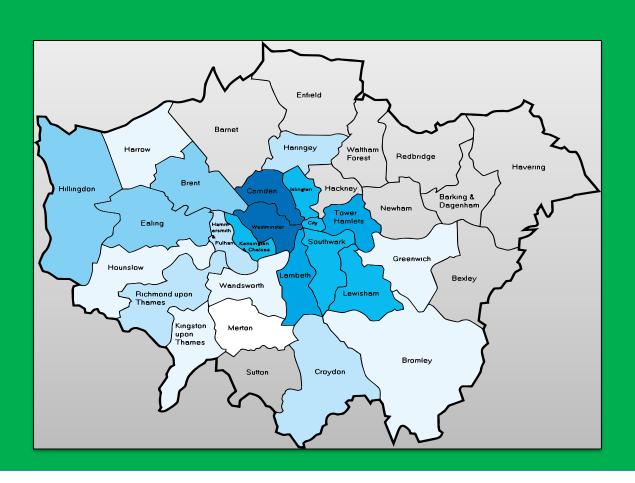
- To work in partnership with homeless services across London
- To piece together information from across services and boroughs
- To create an immediate and then sustainable action plan on CHAIN to help them off the street and reconnect them to relevant services.

FERSP

Cohort for 2015/16

- Aged 40+
- rough sleeping (but not necessarily on CHAIN) or not using accommodation they do have
- drugs or alcohol are not their primary issue
- indicators of mental health issues
- travelling across borough boundaries

Map of London Boroughs



Managing Expectations

Common disappointment after initial excitement.

"But you have no accommodation and no funds"

But I, like you, am holding out my net

Networking and engagement

- Meeting teams
- Sharing the criteria for referrals
- Explaining what I can do
- Explaining what I can't do
- Cross referencing
- Joining outreach
- Looking for women in known locations

Liaison and Joint Working

Forums and Teams

Wanderers Meeting

Women's Outreach Network Meeting.

Frequent Attenders Meeting.

Romford Town Hall

Barking

Lewisham Homeless Forum

NSNO TRAINING SESSION

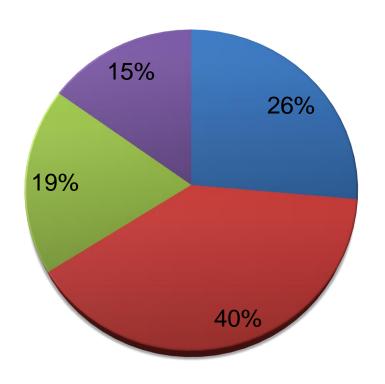
Trio

Joint Working

- Outreach Teams
- Faith Groups
- Park Rangers
- Police
- Statutory Services
- Housing Providers

Cohort =45

Chart Title



- Plan is to assess when seen
- Face to face contact
- Liaison Contact with service
- Not taken on and information given

Sensitivity Example

Liaison about can be best way forward.

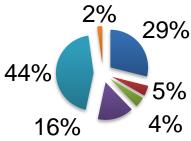
In this particular example what is known is that this woman can quite quickly decide that a worker has done or said something that she feels offended about and refuses to deal with that person again.

This woman was in hospital but had previously identified a Borough that she would work with. She was referred directly to that service and engaged with them.

Where are the cohort?

Last known FERSP status

- In accommodation
- In hospital
- own accommodation
- Still street homeless
- Whereabouts unknown
- mental health supported accommodation



wandering example



One woman seen in a London Borough that she had no connection to. She was linked to a South of England Coastal Town, had been in the Midlands. She was traced to have been in Cornwall and in the North East of England.

Example

One woman was sleeping out but returned to her own home after an intervention to address hoarding in the household.



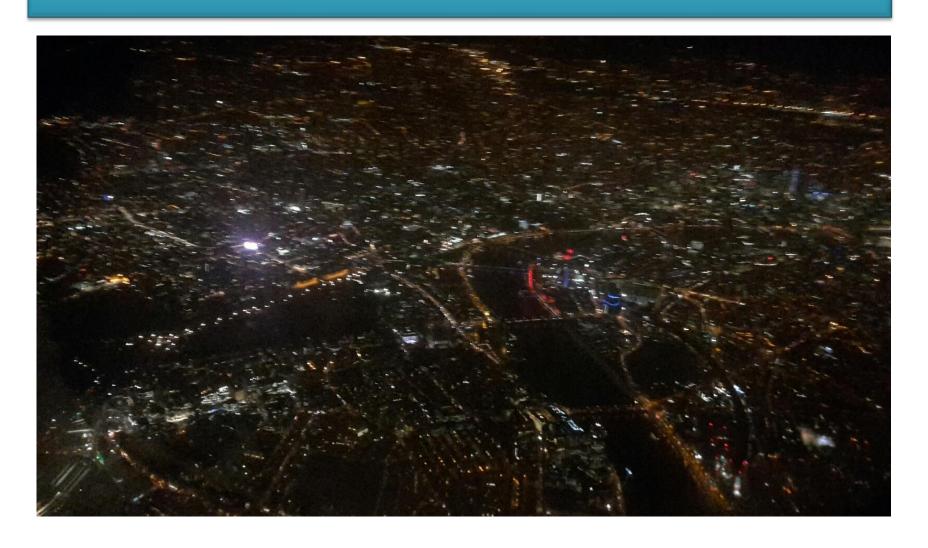
Other locations

- Scotland
- Wales
- Hong Kong
- Bournemouth
- Middlesbrough
- Newcastle
- Birmingham

Boroughs so far women seen

- Barking
- Bexleyheath
- Camden
- Croydon
- Ealing
- Kensington and Chelsea
- Havering
- Wandsworth
- Westminster
- City of London

Where are they?



Where are they?

Women tend to use quieter facilities in public buildings

They do not visibly bed down at night

They do not get verified

They move from one location to another often passing through several London Borough's in a 24 hour period.

Where are they?

 Some will use Nationwide Coach services to either use up a large chunk of time with the opportunity for an undisturbed sleep or to locate to a different area.





Locations

Parks

Outreach Teams

Hospitals

GP Surgeries

Train Stations

Bus Stations

Bus stops

Day Centres

Car Parks

24 Hour MacDonald's*

Probation Service

Building stairwells

Crisis at Christmas

Libraries

Pre- Engagement Levy, J.S. (2013)

Developmental Stage

Trust versus Mistrust

Issues of Safety

Intervention

Observe

Identify potential client

Respect Personal Space

Assess safety

Attempt verbal and non verbal communication

Offer essential need item listen for client language

Establish initial communication etc.

Responses

Not wishing to engage

 Early stages of relationship building. Greet keep interaction brief. Rationale; Well being check

Not seeing the point of accepting a short term solution

Offering short term solutions at appropriate opportunities

Not wanting to use Mental Health Vulnerability as part of their assessed needs.

Address stigma that people apply to themselves when discussing mental wellbeing

Dislike of hostel based on past experiences

 There are different types of hostels and even Hostels themselves change

Not understanding ever changing service reconfiguration

An area of Common Ground

Engagement and some Frameworks

Risk Assessment

Mental Capacity Act

Mental Health Act

The Care Act including Safeguarding.

The Housing Act

Risk Assessment

What can be assessed when a person not engaging

- the environment
- Appearance
- Interactions

Risk assessment

- All kinds of services will want to know what risks they take in offering a service to a person.
- Engaging someone in a risk assessment and a risk management plan can make more sense than asking people to divulge their personal details and issues.

Risk assessment

- Risk to self
- Risk to others
- Self neglect
- Drugs
- Alcohol
- Nutrition
- Ability to keep safe
- Vulnerability

Mental Capacity

- Mental Capacity Definition: the ability to make a particular decision at the time it needs to be made.
- Presumption of Capacity
- Support with decision making
- People are entitled to make decisions others may think are unwise
- Best Interests
- Least Restrictive alternative

Mental Capacity Act

- In this example the mental capacity Act was used as the least restrictive option for a woman who would have remained street homeless otherwise.
- This woman had her benefits stopped after the transition to ESA did not go smoothly for her. She lost her accommodation and ended up street homeless again.
- The woman was not able to grasp the change to Benefits.

Attempts to explain to her led to altercations with workers and within the DWP office.

This woman is thought to have a Persistent Delusional Disorder. A capacity assessment was completed.

An application for Benefit Entitlement via Appointeeship was made.

Work continues to gradually introduce the idea of the change in welfare benefits to her.

Mental Health Act

- The Mental Health Act is the law which sets out when you can be admitted, detained and treated in hospital against your wishes. It is also known as being 'sectioned'.
- For this to happen, certain people must agree that you have a mental disorder that requires a stay in hospital. There you will have an assessment and be given treatment if needed.
- This is only done when you are putting your own safety or someone else's at risk.

The Mental Health Act

- You can sometimes be given treatment even if you don't want it.
- There are different sections of the Mental Health Act that have different aims.
- You have certain rights under the Mental Health Act, including the right to appeal and the right to get help from an advocate.

Mental Health Act

- The Mental Health Act defines the term 'mental disorder' as 'any disorder or disability of mind'. It includes mental health conditions such as:
- schizophrenia
- depression
- bipolar disorder
- anxiety disorder
- obsessive-compulsive disorder (OCD)
- eating disorders
- personality disorders

Drugs and Alcohol

 If you have problems with alcohol or drug use you can only be sectioned if you have a mental disorder as well as a drug or alcohol problem.



The five year forward view for mental health February 2016

Over 20,000 people responded to the review. The priorities that emerged were

Prevention

Access

Integration

Quality

A positive experience of care.

The task force were told by many people

That their main ambition was to have a decent place to live, a job or good quality relationships in their local communities.

Mental Health

The Independent Mental Health Taskforce Feb 2016

"The NHS needs a far more proactive approach to reduce the long term impact for people experiencing mental health problems and for their families, and to reduce costs for the NHS and Emergency Services"

Recommendation for Government regarding Mental Health Act from the Task Force

 The Department of Health should work with a wide range of stakeholders to review whether the Mental Health Act (and relevant Codes of Practice) in its current form should be revised in parts to ensure stronger protection of people's autonomy, and greater scrutiny and protection where views of individuals with mental capacity to make healthcare decisions may be overridden to enforce treatment against their will.

The Care Act

Local Authorities have to

Carry out an assessment of anyone who appears to require care and support regardless of their likely eligibility for state funded care.

Focus on person's needs and how they impact on their well being and the outcomes they want to achieve

Involve the person in the assessment and, where appropriate their carer, or someone else they nominate

Provide access to Independent Advocate

Consider other things beside care services that can contribute to outcomes

Use the National Minimum Threshold to judge eligibility for publicly funded care and support.

The Care Act Chapter 14 Safeguarding

- Safeguarding Duties apply to an adult who
- Has needs for care and support (whether or not the local authority is meeting any of those needs)
- · Is experiencing, or at risk of abuse or neglect
- As a result of those care and support needs is unable to protect themselves from either the risk of or the experience of abuse or neglect

Safeguarding Enquiry Objectives

- Establish facts
- Ascertain the adults views and wishes
- Assess the needs of the adult for protection and support and consider how they may be met
- Protect from abuse and neglect in accordance with the wishes of the adult
- Make decisions as to what follow up action should be taken with regard to the person or organisation responsible for abuse or neglect
- Enable the adult to achieve resolution and recovery

The Housing Act

The Housing Act

Section 184 of the 1996 Act the Housing Authority has a duty to carry out enquiries where it has a reason the believe an applicant may be homeless or threatened with homelessness.

Why not in accommodation

- Won't pay rent or service charge
- Declined offers made
- Declined to complete application
- Declined to agree for information disclosure to investigate homelessness or eligibility
- Want a bigger accommodation
- Dispute in another area.
- Did not go to placement
- Did not stay at placement

Housing Law The meaning of Vulnerablility

- Hotak v Southwark
- Kanu v Southwark
- Johnson v Solihull

The Judgement in these cases widens the definition of Vulnerability.

The Court decided that a proper comparator is "with an ordinary person if made homeless, not with an ordinary actual homeless person"

Intentionally Homeless?

Women can remain homeless and lose their links and Connections.

This can be seen as 'intentional' and the women will even tell you that they have had to do this.

The determination for the decision maker is whether this 'having to leave' is Intentional.

We also have to ask ourselves and the decision makers why women are seemingly purposely losing their rights.

Housing: Not Eligible?

- A person may be ineligible if they haven't lived in the area for long enough, or if the local authority believes that they (or any other members of the household) are guilty of unacceptable behaviour.
- Some people are deemed ineligible because they have breached a previous tenancy – for example, because they were in arrears with their rent. This can happen even if the council has agreed they are eligible and should have priority.

Supported Housing

The Department of Health Communities and Government NHS England HM Treasury and other agencies should work with local authorities to build the evidence base for specialist housing support for vulnerable people with mental health problems and explore the case for using NHS Land to make more supported housing available for this group.

Reconnection

If done early or timely Reconnection can support people to return in a planned way to

Their own accommodation

Their own support networks

People from European Union who have not had a positive experience of being in the U.K. can return home quickly and safely to access services they need to help rebuild their lives with dignity.

Autonomy

Who decides what is in a person's best interests

Mental Health professional?

Outreach Worker?

The Person themselves?

The local population?



FERSP-A day in the community

Pre engagement

Consideration for approaching has to be made.

Observing for a time.

Asking in local facilities if someone has been in the area and if there is anything specific they notice about their behaviour.

Risk assessment and management a day in the park

- Rucksack on bench Bank cards and passport on grass Shouting
- Bemused tourists
- Refuses to get in car to go to appointment which has to be delayed
- Risk taken to let her either get in car or walk away.
- She gets in the car we meet her at the location reschedule appointment.
- Female relieves herself in front garden of neighbours refuses to even look at the accommodation on offer.

Acts A short stay

- Assessment under the mental Health act leads to admission under section 2 for assessment.
- Further assessed for Treatment.
- Rights to appeal and representation
- Informed consent for medication
- Assessment under Care Act determines need for supported accommodation.

8 weeks later early recovery

- Approached by the same female following a hospital admission.
- Better engaged
- In accommodation albeit temporary
- Self care improved
- Taking an interest in life
- Thinking about her experience.

6 months later

- Still accommodated
- Taking medication
- Participating in Community Activities
- Reflecting on her experiences.



9 months later

Still accommodated

- Engaging
- Taking an interest in others
- Undertaking responsibilities within her accommodation

References and Links

For asylum and asylum support advice please contact <u>Asylum Help</u> on 0808 8000 630.

Time to change is England's biggest programme to end the stigma and discrimination faced by people with mental health problems www.timetochange.org.uk

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