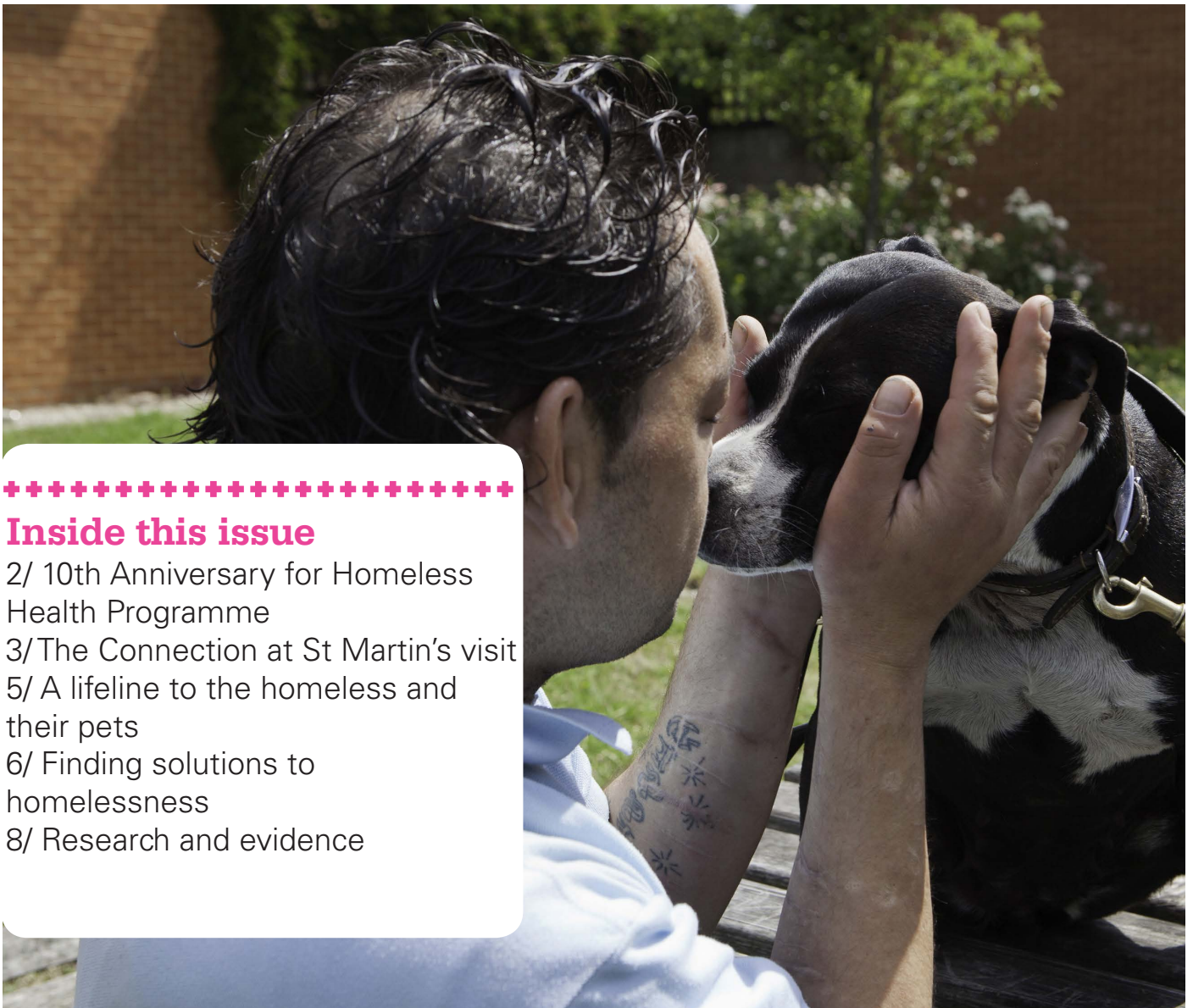


Homeless Health News



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Editorial

David Parker-Radford, Homeless Health Programme Manager



10 Years Old!

As of November 2017, the Homeless Health Network is ten years old. Thanks to the vision of two nurses, Jane Cook and Jane Gray, the idea for a network for nurses working with homeless people was developed. Since 2007, a large group of nurses and dedicated staff at the QNI and funders have helped the network to survive, thrive and grow. Over the years it has given community nurses a vital platform and networking opportunities. It has helped nurses share challenges, gain support and contribute to and learn from guidance relevant to homelessness and health.

Given the opportunity to reflect on achievements over the past ten years, the QNI has added a web page dedicated to the history of the network in our [Homeless Health section](#).



Pippa Bagnall, Chair of the Homeless Health Steering Group from 2007-2010 with Jeremy Corbyn MP at 2007 launch event

For 10 years Anne Pearson, Director of Programmes, has overseen the management of this network and she was awarded an Outstanding Service Award by the QNI this year. Many in the network know that Anne is due to retire at the end of February. I'm sure you will want to wish her well and thank her for the work she has done to support and champion homeless health nursing over the years.

Homelessness in Nursing Education

A [QNI scoping report](#) evaluates the different approach taken by universities offering BSc Nursing, when it comes to covering the topic of homelessness.

Some universities are starting to offer a proactive syllabus in terms of homelessness, including service user case studies, speakers and homelessness placements while others offer no homelessness education to nurses at all.

The report aims to stimulate universities to think about their new requirements and incorporate more homeless and inclusion health into their curricula. [Read more in this blog](#).

Transition to Homeless Health Nursing

The QNI's Transition to Homeless Health Nursing resource will shortly be available in printed, spiral bound copies perfect for taking notes and as a reference for practice. The resource is useful for student nurses on placement, new community nurses in post, new homeless health nurses, or experienced community nurses in need of a refresher. Over 100 experienced community nurses working in homeless health were involved in producing the resource with the QNI, alongside the input of service users.

You can pre-order a copy of the resource for no cost (you only pay postage and packing).

It is still also available as a [free download](#).

Big Issues

In The QNI's June event we heard how significant childhood trauma is on neuropsychology across the life course, with impact on behaviour, society and health. You can link to the [fascinating slides from the event](#).

At our October event, we heard about other early years and parenting issues with relevance to tackling health inequalities. One such health issue was the importance of identifying, supporting and preventing Fetal Alcohol Syndrome, and campaigning for this to be recognised as a significant public health issue. [Slides from the day](#) are available to learn from.

Looking Ahead

Finally, we'd like to wish you a Happy New Year from the team at The QNI. Thank you for your dedicated work in 2017 and we look forward to seeing you at one of our [events in 2018](#).

The Connection at St Martin's visit

William Carter, Intern, The ONI



I was lucky enough to meet the Central London Community Healthcare homeless (CLCH) nursing team and have a look around the largest homeless day centre in Europe, The Connection at St Martins. Located on quiet Adelaide Street in central London, it is easy to forget that bustling Trafalgar Square is only two minutes' walk away. As well as being a busy area for tourists and commuters, the area is known for its high density of homeless people. Westminster sees the highest incidence of rough sleepers in the UK, with some 260 people recorded as being homeless on any given night in 2016. This group forms part of the estimated 4,134 people sleeping rough each night in England, with many more at risk.

After only a few minutes in the shelter, it is clear that The Connection provides a welcome relief from the hardship of the street. It is warm and inviting and there is a great smell wafting up from the café. People are chatting, eating and watching TV. Adults of all ages are present but the majority of service users are men (we later learnt that the ratio is 10:1 men to women). It is also, unfortunately, clear that a fair few of the service users are in need of medical attention and emotional support.

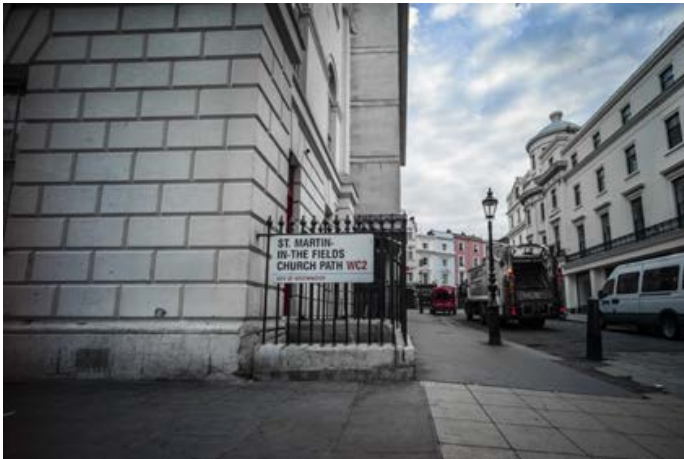
“ Homeless people go for long periods without any ‘witness to their lives’ – with no-one to share in the diverse successes and failures that we all experience. ”

Our first stop was to meet the nursing team. The CLCH homeless service is nurse-led and the nursing team directs a group of dedicated staff and volunteers. Nicky is the Lead Nurse for Homeless Health Care for the Central London Community Healthcare NHS Trust. He showed us the health clinic in the centre and explained that it represented the NHS coming to its homeless patients, as they often encounter difficult accessing services in the traditional way. He explained that they often rely on A&E services and struggle to access GPs – complicating and delaying treatment and creating a financial cost to the health service.

The clinic treats patients suffering from mental illness, chest infections, musculoskeletal problems, minor injuries and neglected chronic conditions (often asthma, diabetes and heart disease). The nurses do more than provide exclusively clinical care however. It is the role of the nursing team, following treatment, to advocate for the rehousing of the patient. As such, often nurses write support letters and attend Multi-Disciplinary Team meetings on the patient's behalf.

Given the transient lifestyles that homeless people often lead, Nicky's clinic is vital for addressing health concerns whilst the patient is available. As Nurse Practitioners, Nicky's team has the authority to dispense vital medicine such as painkillers, vaccines and insulin to those in need. A podiatrist visits weekly to tend to foot problems. The clinic and centre were both busy and we learnt that the clinic treats an average of 50 patients daily, whilst around 150 people visit The Connection generally.

We then went on a tour of The Connection's facilities and learnt more about the activities on offer. Firstly, we saw the laundry room, with lockers and ironing facilities. We were shown the TV room, the reading room and a computer area, where visitors to the centre could charge their phones. Nicky explained that these facilities are crucial, as their availability is not contingent on visitors having to use them 'productively' – for job applications for example. Homeless people need spaces to safely unwind, watch videos, read and catch up with friends and family online like everyone else. There is a crafts corner and an activity space where volunteers lead skills workshops, such as sewing. Visitors can use a fully equipped art room to nurture their creative sides, something very difficult to do when sleeping rough. It was wonderful to hear that the art displayed around the centre was produced by the service users themselves. Although it was important to carve out a space purely for relaxation, Nicky demonstrated that the centre approaches employment issues proactively. There is a separate computer suite for job applications and CV workshops. Volunteers are on hand to



St Martin in the Fields

charities, including Depaul and Groundswell. Some of Groundswell's work in particular resonated with me. Their peer advocates travel with service users to important meetings, such as job interviews or hospital appointments – including serious procedures such as chemotherapy. If the service user would like to, they go for a coffee afterwards and chat about what has happened and how the service user feels. As Nicky put it, homeless people go for long periods without any 'witness to their lives' – with no-one to share in the diverse successes and failures that we all experience.

Nicky explained that the service operates a policy of "No Nos": if a particular service cannot be provided by The Connection itself, the patient will be referred to another organisation that can. This system of 'meaningful referrals', where users are tracked to make sure that they receive the care they need, means that no one falls through the gaps. I was struck by how highly the staff prioritised the patient's own agenda in order to empower them at a time when they are likely feeling disenfranchised. Nicky's other policy of 'Kindness, kindness, kindness' came across clearly through the compassion, patience and empathy of the staff. At all times the service users were helped to feel 'normal', whilst recognising the profound emotional and physical challenges of their situations.

“ Nicky's other policy of 'Kindness, kindness, kindness' came across clearly through the compassion, patience and empathy of the staff.

Just across the road from The Connection is St Martin-in-the-Fields, the Anglican Church with a large yet welcoming entrance facing Trafalgar Square. The church owns the building in which the day centre operates and has a long history of providing support and relief to the homeless. St Martin's has been caring for the vulnerable since the return of traumatised soldiers from the World Wars. Now it is the hub of homeless health in London. Every morning a team of volunteers conduct a sweep of the area to inform rough sleepers of the services available and encourage them to come into the centre. This encouragement and welcoming approach is vital as homeless people can often feel wary of services if they have had a negative experience in the past. Nicky told us that certain statutory services can be made contingent upon relocation of the homeless person, uprooting them from what community they have managed to form. With this in mind, it is unsurprising that some rough sleepers are wary about accepting help.

The statistics on UK homelessness are grim. According to Crisis, rough sleepers are 17 times more likely to have been victims of violence, with more than a third having been deliberately hit or kicked whilst sleeping rough. Rough sleepers are more than nine times more likely to take their own lives than the housed population. Only 20% of private landlords are willing to take homeless people on as tenants, which entrenches homelessness further.

The comprehensive and compassionate service operating at The Connection could not be more vital. The centre clearly excels at alleviating the suffering of people experiencing homelessness and helping them get off the streets for good.

Find out more

- [Central London Community Healthcare](#)
- [The Connection at St Martin's](#)

help service users top up their basic IT skills – something which much of the homed population takes for granted. Smart shoes and a suit were also available to borrow for interviews.

Having benefits stopped can be the tipping point for someone on the edge of homelessness. Understandably, people in such complicated or vulnerable situations are often ill-equipped to negotiate the benefit system. To help with this, a Department for Work and Pensions outreach officer visits The Connection daily to help service users sort out benefits issues and advocate for them. As with the nursing clinic, it was clear that an ethos of kindness and non-judgement is core to this service.

Nicky explained that The Connection cannot do its work alone, and has close working links to other homelessness

A lifeline to the homeless and their pets

Zoe Edwards, Head of Animal Welfare, Mayhew



Last year, Mayhew marked 17 years of helping and providing personal support for the homeless and their pets. Since 2000, we were one of the first animal welfare charities to start working with the homeless.

As well as reaching out to rough sleepers on the streets in many London boroughs, Mayhew's Animal Welfare Officers visit 15 homeless centres regularly each year and work tirelessly with several organisations including Thames Reach, Spitalfields Crypt Trust, The Salvation Army, St Mungo's, Crisis, and Broadway Homeless Hostel and Drop-in Centre to offer support and advice to homeless people.

A dog is often a homeless person's only companion, but the added expense of vet and food bills puts an extra burden on people who are already in a vulnerable situation. Our Animal Welfare Officers offer all homeless dog owners free general health checks and microchipping and provide light-up safety collars with tags and leads, jackets for the dogs in the winter months, dog food, treats and poo bags. Not only do we supply vital items for the animal, we are also there to support and advise the owner too. However difficult the situation may be, we never judge and we are always available to help. We encourage and offer their dogs free neutering, vaccinations and a general health check with a Mayhew Vet at our on-site Community Vet Clinic in Kensal Green.



Pet Refuge

Mayhew also runs a Pet Refuge programme, which provides support for pet owners facing a personal crisis including hospitalisation, rehab, detox for alcohol and drug addiction, or even those sent to prison.

Pet Refuge involves our Animal Welfare Officers ensuring that the animal receives the best possible care and is placed in a safe environment for the duration of the crisis period. For many people facing a personal crisis, our service is a lifeline.

Crisis at Christmas

We also attend the annual 'Crisis at Christmas' and set up a temporary clinic with our Vet Team and Animal

A homeless person's companion

Welfare Officers. Christmas can be an incredibly difficult time of year for a homeless person, so Mayhew and Crisis work together to ensure they are not separated from their dog during the festive period.

The dogs are brought by their owners to specially built, temporary kennels, where they have their own pen and plenty of comfortable bedding and blankets. The dogs can spend the time being supervised and cared for by Crisis volunteers, while Mayhew's expert team give them a thorough health check and preventative veterinary care. Mayhew also offers advice and assistance to owners on caring for their dog while they also receive help and support from Crisis. We will be on hand again this year on Wednesday 27 December 2017.

Further information

E: awo@mayhewanimalhome.org

W: www.themayhew.org/about/local-community-work/working-with-the-homeless/

Finding solutions to homelessness

Amy Varle, Founder and Creator, Social Property Investment



In 2017, over 100 million people worldwide are homeless.¹ They have no shelter, no security and no hope. Homelessness expenditure in Britain is said to exceed £1 billion² each year; the human costs, however, are much higher. Homelessness is dangerous, destructive and devastating, to any individual or household. Ultimately, it can be fatal; with the average homeless person having a life expectancy of just 47 or 43, for men and women respectively³.

Since 2012, I have worked independently to identify economical and compassionate solutions which can be tailored towards the crisis of modern homelessness. Throughout this time, I have regularly engaged with the street homeless community in my home city of Manchester and I have sadly, borne witness to many tragic, premature and some might say, preventable deaths. As someone who had the misfortune of suffering homelessness as a teenager, I feel a deep sense of empathy for the plight of those who have no home to call their own.



Amy visiting Silicon Valley's jungle camps with CHAM Deliverance Ministry, May 2016

Modern research robustly supports the theory that homelessness is primarily a housing crisis, and therefore should be addressed, without stipulation or barrier, precisely through housing. Pioneered in New York in the 1990's, 'Housing First' an evidence-based practice which is now widely-cited across developed nations as the most effective approach to ending all types of homelessness⁴.

My work, therefore, focuses on creating - or, removing barriers to - sustainable living situations for vulnerable or disadvantaged individuals. Over the last few years, I have supported over 100 people into permanent homes via my practical research work.

In May 2016, I was delighted to be awarded a Travelling Fellowship from the Winston Churchill Memorial Trust, affording me the life-changing opportunity to travel to the United States of America in order to conduct fieldwork, which would enhance my strategic designs to address homelessness with international influence and flare. Connecting with the very best of industry practice from across the globe, during a six-week solo pit-stop-tour of the USA, I examined the infrastructure behind world-leading mission-led enterprise focused on best practice for homelessness resolution.



Amy with Dave Heath (Bombas Socks) and Terence Gerchberg (Back on My Feet) in New York

In New York, I visited award-winning housing provider Breaking Ground, as well as national fitness and lifestyle club for the homeless, Back on My Feet. In San Francisco, I was wowed by inter-sector support co-ordinator, Project Homeless Connect and inspired by Housing First champion, Delivering Innovation in Supported Housing. I also toured Skid Row in Los Angeles, Silicon Valley's infamous jungle camps and more unusual options available to the most displaced members of mainstream society, such as the Dome Village. Each appointment offered its own unique approach, allowing me to explore some of the most radical and successful techniques being deployed to address challenging social issues in the world today.

Further igniting my drive to inspire positive, transformational change, I've channelled much of my energy since my return into promoting a movement of 'Housing First' led approaches towards homelessness in Britain; working to increase confidence in new practice across the public,

1 <https://homelessworldcup.org/homelessness-statistics/>

2 <http://www.homeless.org.uk/facts/understanding-homelessness/impact-of-homelessness>

3 https://www.crisis.org.uk/media/236799/crisis_homelessness_kills_es2012.pdf

4 <http://housingfirsteurope.eu/guide/what-is-housing-first/housing-first-in-europe/>

private, third and sectors. With the UK Government recently announcing £28 million in funding to support the launch of 'Housing First' pilots across three major cities⁵, professionals who work with people experiencing homelessness must be rapidly recruited, educated and nurtured if the project is to succeed - and further evolve.

Now is the time for Britain to get behind 'Housing First' and begin to adapt methods and practices which will suit the inevitable national roll-out at a later date. As Breaking Ground state: Bringing a homeless person inside – or preventing them from sleeping outdoors in the first place – is not only effective, as well as cost-effective; it's also the right thing to do.

Learn more about international approaches to homelessness and housing instability, or get some support to manage homelessness with a housing-led response. 'Social Property Investment: Pioneering Strategies For 21st Century Homelessness Prevention and Response' will be available for download from February 2018.

Further information

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W: www.socialpropertyinvestment.co.uk

⁵ <https://www.insidehousing.co.uk/news/news/government-announces-28m-funding-for-housing-first-pilots-53329>

News

UK Budget puts more emphasis on housing and homelessness

The Chancellor Phillip Hammond announced in his November budget a number of measures focused on housing and homelessness, including new 'Housing First' pilots, a new government Homelessness taskforce, and a focus on more housebuilding. The QNI gave a response on what the budget means for community nursing and St Mungo's gave their verdict on what the budget would mean for homelessness. The Government has also announced that the Local Housing Allowance (LHA) cap will not apply to supported housing from April 2019.

Minimum Unit pricing ruled to be legal

The UK Supreme Court has ruled that minimum unit pricing for alcohol is legal, with implications for legislation planned for Scotland. This may lead toward wider legislation in Northern Ireland and Wales to reduce alcohol harm through pricing. Read more.

High Court rules Government redefinition of torture in immigration detention policy is unlawful

In October, the charity Medical Justice and a group of people who experienced torture and were subsequently held in immigration detention successfully proved that the Government's redefinition of torture in its immigration detention policy is unlawful. This may open up the door to other cases of people who have been held in immigration detention centres. Read more.

Events and Opportunities

Giving Physical Activity Advice Training - Public Health England

Public Health England is offering free locally tailored training sessions for nurses and other interested health care professionals in relation to giving guidance on physical activity. Very brief advice on physical activity from healthcare professionals has been shown to improve health.

This training focuses on practical tips to integrate this into every day clinical practice. 1 in 4 patients would be more active if advised by a GP or nurse. Over 40% of nurses are unaware of the recommended guidelines for physical activity. This training is supported by resources and guidance from the Chief Medical Officer. It is available in England until 31 March 2018. Book your free session.

Patient Safety Awards

The Patient Safety Awards are a fabulous celebration of the good work being done every day in the NHS to improve care for patients and reduce harm. Each award is independently judged by some of the biggest names in healthcare improvement who select the very best projects at an awards evening. See all of this year's categories and enter your service for an award.

Research and Evidence: Qualitative analysis of life stories of homeless people

Dr Mzwandile A. Mabhala, Department of Public Health and Wellbeing, University of Chester



It is increasingly acknowledged that homelessness is a more complex social and public health phenomenon than just the absence of a place to live. This view signifies a paradigm shift, from the definition of homelessness in terms of the absence of permanent accommodation, with its focus on pathways out of homelessness through the acquisition and maintenance of permanent housing, to understanding the social context of homelessness and social interventions to prevent it.

This study aims to examine the stories of homeless people to gain understanding of the social conditions under which homelessness occurs, in order to propose a theoretical explanation for it. 26 semi-structured interviews were conducted with homeless people in three centres for homeless people in Cheshire, North West England.

The analysis revealed that becoming homeless is a process characterised by a progressive waning of resilience capacity to cope with life challenges created by series of adverse incidents in one's life. The data show that the final stage in the process of becoming homeless is complete collapse of relationships with those close to them. The most prominent pattern of behaviours participants describe as the main causes of breakdown of their relationships are:

1. engaging in maladaptive behavioural lifestyle including taking drugs and/or excessive alcohol drinking
2. Being in trouble with people in authority.

The participants believe that their social condition affects their life chances; these conditions were responsible for their low quality of social connections, poor education attainment, insecure employment and other reduced life opportunities available to them.

Several participants stated that childhood experiences and damage that occurred to them as children had major influences on their ability to negotiate their way through the education system, gain and sustain employment, make appropriate choices of social networks and form and maintain healthy relationships as adults.

Participants identified drugs or alcohol and crime as the primary -cause of their relationship breakdown. However, when listening to their full stories the researchers often found that alcohol 'appears to be a manifestation of other issues including financial insecurities and insecure attachment'. Although some participants claimed drinking alcohol was not a problem until their employment circumstances changed, the researchers gained 'a sense that alcohol was partly responsible for creating conditions that resulted in the loss of their jobs'. All the participants explained that they drank alcohol to cope with multiple health (mental health) and social challenges.

Research summaries

If you have completed research or are undertaking research in the areas of homeless and inclusion health, then we would like to hear from you. Please email David at david.parker-radford@qni.org.uk, if you would be interested in writing a research summary for a future issue of Homeless Health News.

Research and Evidence

- **Outcomes of specialist discharge coordination and intermediate care schemes for patients who are homeless: analysis protocol for a population-based historical cohort / Research / Cornes et al**

The QNI is on the steering group for this study which is investigating the access homeless people have to different forms of tailored healthcare on release from hospital and assessing their relative effectiveness.

- **Far From Alone / Report / Shelter**

This report gives an overview of the geography and numbers of people homeless and in temporary accommodation across Britain, and highlights the number of people without a home in Britain is now bigger than the population of Newcastle. It also shows how concentrated homelessness is in specific urban areas (Newham in London has 1 in 25 people homeless or in temporary accommodation against a national average of 1 in 200).

- **Research About Nursing Care for People with Liver Disease / Research / Núria Fabrellas**

This research investigates nursing care around key diseases of the liver - cirrhosis due to hepatitis C or B infection, and both alcohol-related, and non-alcoholic fatty liver disease, discusses their growing prevalence and contribution to risk of death, and discusses how they are mainly caused by three preventable factors (obesity, alcohol, and viral infection). As such the nurse plays a vital role in educating patients to reduce risks of harm and prevent liver diseases.

- **Behind bars: The truth about drugs in Prison / Literature Review / O Hagan & Hardwick, Nottingham Trent University**

Some useful data about current drug trends in prison is included in this report.

- **The Impact of Homelessness on Health: A Guide for Local Authorities / Report / LGA**

The information in this briefing aims to support local authorities in protecting and improving their population's health and wellbeing, and reducing health inequalities, by tackling homelessness and its causes.

- **Five Practical Ways for Housing Services to Address Health Needs / Blog / James Harding**

Some useful evidence based guidance from Shelter for housing services focused around health on the Health Foundation website

Please note: Due to software issues, some of the links might not work, if that is the case, please copy and paste the titles into Google. We apologise for the inconvenience.

Resources

The Healthy London Partnership has a series of homeless health resources which may be useful to you, and you do not need to be London-based to access them as they are all online for free! Commissioning guidance, e-learning, videos, resources, and patient rights cards are all available.

The No Recourse to Public Funds Network has produced a helpful document to explain which NHS services will ask migrants to pay charges.