

Kent Housing Group's Housing, Health and Social Sub Group Meeting

Monday 14 June 2021

Held via Microsoft Teams

Attendance:

Cathy McCarthy	West Kent Housing Association (Chair)
Helen Charles	Town and Country Housing (Vice Chair)
James Young	Tunbridge Wells Borough Council
Sarah Martin	KCHFT
Duncan Wilson	West Kent Housing Association
Cythnia Allen	KSS CRC
Ian Long	MHS Homes
Marie Royle	Canterbury City Council
James Cox	Tunbridge Well Borough Council
Richard Stanford-Beale	Kent Fire and Rescue Service
Hanna Gaston	Maidstone Borough Council
Helen Campbell-Wroe	Pathways
Kimba Layton	Folkestone and Hythe District Council
Mel Anthony	KCC
Paul Stephens	KCC
James Young	Thanet District Council
Mike Barrett	Porchlight
Sian Harris	Clarion Housing Group
Tina Dust	Sanctuary
Mike Williams	Dartford Borough Council
Sonia Bramley	Clarion Housing Group
Mark Breathwick	Medway Council
Rebecca Wilcox	Sevenoaks District Council
Sarah Tickner	Kent Housing Group (notes)

Apologies:

Jane Lang	Tunbridge Wells Borough Council
Nicki Treadwell	Optivo
Linda Hibbs	Tonbridge and Malling Borough Council
Louise Taylor	Dover District Council
Lucy Hallewell	Golding Homes
Tim Woolmer	KCC
Jane Miller	KCC
Robert Lee	Riverside
Sally Allen	Kent and Medway CCG
Mumtaz Samad	Moat Foundation

1.	<p>Welcome</p> <p>Welcomed new members and introduced the Housing, Health and Social Care sub group as a place for networking, sharing good practice, generating of good ideas and we also have our own work programme.</p>															
2.	<p>Minutes and Matters Arising</p> <p>Minutes and matters agreed as correct.</p>															
3.	<p>Action Plan Update</p> <p>CM and ST introduced the high-level detail of the proposed 2021-2023 action plan, asking for feedback from members on; the themes, what is proposed within each theme and what each member’s delivery priorities would be. This feedback is to inform the final draft.</p> <p>CM set the scene by explaining that the Housing, Health and Social Care sub group action plan had been informed by the following;</p> <ul style="list-style-type: none"> • KHG Kent and Medway Housing Strategy • Social Housing White Paper • Public Health Priorities • Kent Housing Options Group health action • Member priorities <p>ST shared the themes and their proposed content:</p> <table border="1" data-bbox="209 1256 1321 1951"> <tr> <td data-bbox="209 1256 539 1352">Tenancy Sustainment & Support</td> <td data-bbox="539 1256 1321 1352">Aids & Adaptations, Fuel Poverty and service integration</td> </tr> <tr> <td data-bbox="209 1352 539 1449">Safe In Your Home</td> <td data-bbox="539 1352 1321 1449">Hoarding, Fire Safety, Dementia Awareness, Hospital Discharge and Domestic Abuse</td> </tr> <tr> <td data-bbox="209 1449 539 1545">Reduce and Prevent Homelessness</td> <td data-bbox="539 1449 1321 1545">Service mapping and analysis, Kent and Medway wide offer to the homeless community, support vaccination programme</td> </tr> <tr> <td data-bbox="209 1545 539 1641">Smoke Free</td> <td data-bbox="539 1545 1321 1641">Smoke free campaign, training staff to refer, smoke free spaces and smoke free tenancy pilot</td> </tr> <tr> <td data-bbox="209 1641 539 1778">Tackling Social Isolation, Loneliness & Social Exclusion</td> <td data-bbox="539 1641 1321 1778">Explore use of technology, identify and share best practice, Befriending schemes</td> </tr> <tr> <td data-bbox="209 1778 539 1874">Mental Health</td> <td data-bbox="539 1778 1321 1874">Promote and participate in Release the Pressure campaign, mental health training, seek best practice</td> </tr> <tr> <td data-bbox="209 1874 539 1951">Cross Cutting Themes – Integration & Learning</td> <td data-bbox="539 1874 1321 1951">Housing awareness training, cross sector working case study exercise, explore partnership working opportunities</td> </tr> </table>	Tenancy Sustainment & Support	Aids & Adaptations, Fuel Poverty and service integration	Safe In Your Home	Hoarding, Fire Safety, Dementia Awareness, Hospital Discharge and Domestic Abuse	Reduce and Prevent Homelessness	Service mapping and analysis, Kent and Medway wide offer to the homeless community, support vaccination programme	Smoke Free	Smoke free campaign, training staff to refer, smoke free spaces and smoke free tenancy pilot	Tackling Social Isolation, Loneliness & Social Exclusion	Explore use of technology, identify and share best practice, Befriending schemes	Mental Health	Promote and participate in Release the Pressure campaign, mental health training, seek best practice	Cross Cutting Themes – Integration & Learning	Housing awareness training, cross sector working case study exercise, explore partnership working opportunities	
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3.1	<p>We also asked; Does the action plan make sense? Is anything missing? We will be asking the same from those members who were unable to attend today by seeking their feedback via a response to the minutes of the meeting.</p> <p>The following feedback was provided by those members present:</p> <ul style="list-style-type: none"> - action plan looks good, - it was flagged that fuel poverty is just one small indicator of poverty and links to the wider poverty agenda, - how do we link with agenda to influence service change? - safeguarding, - concern that we do not duplicate with KHOG and their work, - how do we tackle health inequalities at the earliest opportunity, - mental health to also include work place mental health, - issues with mental health interim support and who to sign post to when at crisis point, - mental health first aider training desired, - would like rough sleeping and street homelessness to be included as a priority - noted that under tenancy sustainment and support those on probation have huge difficulty getting into the private rented sector, women in particular are disadvantaged. Questioned if there should be a focus on protected characteristics. - it's an exciting plan but also ambitious for two years and thinks we should focus on what can be achieved. For us to focus on inequality and where we can really make a difference to those groups. - we should focus on additionality and the extra things we can do by working together. - we should focus on positive relationships when thinking about reducing loneliness, isolation and exclusion and look at befriending schemes and holistically look at the whole new positive lifestyle. - it was highlighted that there are many links to the One You Service and support they could provide. <p>We asked members present to tell us their top three priorities from the themes presented in the action plan. A vote followed.</p> <table border="1" data-bbox="209 1514 1321 1839"> <thead> <tr> <th>Theme</th> <th>Votes Received</th> <th>Top 3 Priorities</th> </tr> </thead> <tbody> <tr> <td>Tenancy Support & Sustainment</td> <td>18</td> <td>1</td> </tr> <tr> <td>Safe in your Home</td> <td>10</td> <td></td> </tr> <tr> <td>Homelessness</td> <td>12</td> <td>2</td> </tr> <tr> <td>Tackling isolation, exclusion and loneliness</td> <td>3</td> <td></td> </tr> <tr> <td>Smoke Free</td> <td>9</td> <td></td> </tr> <tr> <td>Mental Health</td> <td>13</td> <td>3</td> </tr> <tr> <td>Integration and Learning</td> <td>10</td> <td></td> </tr> </tbody> </table>	Theme	Votes Received	Top 3 Priorities	Tenancy Support & Sustainment	18	1	Safe in your Home	10		Homelessness	12	2	Tackling isolation, exclusion and loneliness	3		Smoke Free	9		Mental Health	13	3	Integration and Learning	10		All
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4. Housing and Mental Health

An exploratory discussion on the possibility of pursuing a housing and NHS jointly funded role within housing that takes the form of a mental health worker. Discussion led by Jody Bulman, Housing Landlord Services Manager at Gravesham Borough Council.

Jody share with us the role of Mental Health Navigators, as piloted in a partnership arrangement in Wakefield. Jody is interested in this role because of a big increase in cases where the root causes are mental health issues. Jody explained she wants to better support tenants but also to better support staff where cases are time consuming, complex and involve multiple agencies.

Wakefield and District Housing, Wakefield Clinical Commissioning Group and NHS Trust for South West Yorkshire came together to jointly fund three Mental Health Navigators.

Mental Health Navigators were based with Wakefield and District Housing to provide quick and early responses to mental health concerns, primarily from Wakefield and District Housing. The mental health navigators consisted of a mental health nurse, a social worker and an occupational therapist. They sat within a Wellbeing Team (of four officers) and essentially provided a triage system and referred onto the mental health navigators.

For the three navigator roles cost £167,000. They provided support via a number of methods; direct telephone support, face to face, referral and by liaising with other practitioners representing tenants needs.

Over an 8 month period, 187 people were referred to the mental health navigators. 9 out of 10 cases came from the housing team whilst other referrals were generated by the NHS Trust, community mental health and 3% were self-referral by tenants.

Of the housing team referrals, the majority of them were from housing officers and the wellbeing team, but also from debt recovery officers and their community safety team.

Outcomes from the Wakefield project are:

- 187 people who had their mental health needs met by targeted services
- 22 decrease in the number of people losing their tenancy due to mental health problems
- 4% decrease in rent arrears

Gravesham Borough Council do not have the same scaling or resources but would like to trial one mental health navigator role. Jody is looking for someone to partner with to support the viability of a post asks if anyone is interested in exploring a jointly funded role?

Members present provided the following feedback:

4.1	<ul style="list-style-type: none"> - One You Health Lifestyle Service can be used to link to local health and wellbeing services. - Town and Country shared their new sustainment team sounded similar to the mental health navigator role in that they will refer into One You and mental health teams. They average a 100 caseload at any one time and approximately a third of these cases have direct mental health issues. The team is missing expertise in mental health and the knowledge to navigate barriers in to support services as well as understanding on how to work better with those support services and to have those services work better for residents. - Maidstone Borough Council shared that through RSI funding they have just commissioned a mental health regional service team for West Kent districts. It offers direct, assertive outreach support for people in crisis who are homeless, rough sleeping or at risk of homelessness. Although this programme has been great there is a conversation to be had with KMPT and CCG on how services are currently delivered and believe the service needs to change to meet the needs of the clients. - Canterbury City Council shared that as an East Kent partnership they Folkestone and Hythe and Ashford are working together as part of the integrated care partnership and have also identified mental health as an issue, as well as work place wellbeing. They have recognised the police and the ambulance service are being relied upon because people are trying to find work around to get help for people at crisis point. East Kent are trying to map out a local pathway for someone in crisis. - Sevenoaks shared that they are in the process of recruiting a One You Plus Officer to provide more support for more complex cases. They also have an AFO bid in for more complete case worker too. Agreed that the main issue is about access to services and also the issues of the door getting shut when the crisis point involved behavioural issues rather than medical. - Is it worth exploring anything with public health to see if homelessness is seen as a public health issue? <p>Members were asked if anyone is currently jointly funding any roles with the NHS or is it all via other funding like the RSI?</p> <p>No one.</p> <p>Question: Is anyone interested in working with Gravesham? Jody.bulman@gravesham.gov.uk</p>	All
4.2	<p>Medway expressed an interest.</p> <p>Agreed that we will have a future discussion dedicated to how we can better support those in crisis and how to better understand the system.</p>	All
4.3	<p>It was suggested that this group could map out services already in place so we can make better use of them, e.g. Live Well Kent, One You Kent and social prescribing through the Integrated Care Partnerships.</p>	ST

4.4		ST
5.1	<p>5. Hot Topics</p> <ul style="list-style-type: none"> • KRFS Mobile Misting Unit Project – update Town and Country have met with Richard at KFRS to discuss putting this in place for those at high fire risk. If anyone else is interested, please get in contact with Richard at KFRS. • No Smoking – member call to action ST sought commitment from members to share quit smoking literature across their resident communication channels, eg online, social media and newsletters. • Mel Anthony shared that there have been significant changes in domestic abuse legislation recently. As it is one of the groups priorities wondered if it would be good for her to come and explain how they are responding. • Marie Royle raised awareness to the KCC initiative Policy in Practice. KCC have 75% funding this year for a data analysis tool and districts are being asked if they want to make a contribution of 25%. It works by inputting all your data into the system that will then allow you to make individual profiles of residents and you can use this insight to make targeted interventions/campaigns. • Chair Cathy McCarthy shared our intentions for Septembers meeting where our theme will be Homelessness and asked members to step forward to assist: We are seeking people with examples of good practice in homelessness in this area from difference perspectives. For example; from a local authority, from a landlord and from providers of support services. We are seeking examples of how you have intervened to prevent homelessness, how you have worked to house rough sleepers and/or if you have any examples of Housing First models please. • Future Meetings: After some discussion it was agreed that we will continue to meet online with one meeting a year to be held in person. The in person meeting will be longer and provide an opportunity for networking. <p>End.</p>	ST/MA
5.2		All