**Draft Kent Housing Group Housing Health and Social Care Sub Group, 11 December 2023, 10.30 – 12.30, Microsoft Teams Call**

**Present**: Alison Simmons, Chair, and Head of Housing at Sevenoaks District Council; Brian Horton, SELEP and chair of KHG; Ellen Schwartz, Kent County Council; Duncan Wilson**,** West Kent Housing Association**;** Stacey Clark, Kent County Council; Carol Cook, Kent County Council; DI Sarah Allen, Kent Police; Kellie Major, Kent Fire and Rescue Service; Sarah Porter, Porchlight; Mike Williams, Dartford Borough Council; Mel Anthony, Kent County Council; Raje Ballagan, Social Interest Group; Meg Vest, West Kent Primary Care PCN and Sevenoaks PCN; Layla Fielder, Kent Community Health Foundation Trust; Emma Mccaughan, Kent County Council; Sarah Hague; Mike Williams, Dartford Borough Council; Abi Ojo, Kent County Council; Niki Melville, Town and Country Housing; Naomi Palmer, Thanet District Council; Sharon Irvine, KHG.

**Apologies**:Sonia Bramley, Clarion Housing; Linda Hibbs, Tonbridge and Malling Borough Council; Leanne McMahon, Kent Fire and Rescue; Jill Redman, Kent Fire and Rescue; Andrea Robson, Kent Fire and Rescue; Natalie Liddiard, Kent County Council; Marie Royle, Canterbury Council; Ashley Jackson, Thanet District Council; Bob Platt, Kent County Council; Mike Bailey, Folkestone and Hythe District Council; Sian Harris, Clarion Housing; Helen Byrne, West Kent Housing Association; Kimba Layton, Folkestone and Hythe District Council; Mike Barrett, Porchlight; Helen Miller, KHG.

| Reference | Notes/Outcome | Who  | Action/Decision |
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| Welcome and Introductions | Alison Simmons, Head of Housing at Sevenoaks District Council and HHSC Subgroup Chair welcomed all participants and introductions were made. | All |  |
| Matters Arising from September 2023 | The notes from the meeting of 11 September 2023 were agreed and signed off. | All | No matters arising – notes signed off. |
| ReferKent  | Stacey Clark, Project Manager, Referrals Lead -Financial Hardship, Kent County Council, spoke on ReferKent, the county wide referral platform for Kent. This was launched in September 2022 to mitigate the action of signposting. It started with five organisations and now has 139 organisations signed up, 100 more in process, 786 users, and 1,200 referrals have been made. Organisations can sign up to solely make referrals, or to make and receive referrals. Data sharing agreements are required and the service level agreement.Primary users for organisations can download outcome activity reports showing numbers of referrals they make, and four outcome categories (e.g. health and wellbeing, debt advice).ReferKent holds spotlight sessions where organisations highlight to referrers what is available on the system, referrers can ask questions and this helps ensure more robust referrals are made. ReferKent sends out newsletters: sharing information on services and projects offered by organisations; highlighting activities in the financial hardship programme and they have a regular networking meeting. ReferKent works in partnership with the money and pension service and acting as an umbrella organization for their money guiders program. This helps frontline staff and professionals feel more confident in giving money guidance in the non-regulated space and is a 20 hour online City and Guilds accredited course.To find out more or to on board as an agency contact: referkent@kent.gov.uk, Otherwise, to join as an agency, see: <https://www.kent.gov.uk/referkent>.Layla Fielder asked about the Money Guiders enrolment sessions - can anyone apply for that on the website or do they need to be a referrer? Stacey: anyone can apply, they need to email referkent@kent.gov.uk and they will be added to the next enrolment session. |  |  |
| Right Care Right Person  | Detective Inspector Sarah Allen, Mental Health Team Inspector, Kent Police. DI Allen showed a four minute video: [How the right care, right person scheme works at Humberside Police](https://youtu.be/-hnfyDD03ds?feature=shared).This is about the core policing duties that have not changed since Sir Robert Peel’s Day and links to Human Rights Act under which the police have responsibilities. It is about looking at police resources and skillsets, and in trying to meet the needs of vulnerable people, whether there are more appropriate resources and the legal power to manage the situations to ensure the right support and outcome for individuals. The approach avoids stigmatising people with mental health needs and improves service delivery.This will be delivered over four phases in close partnership with health and social care partners with the needs of service users at heart:*Phase 1*- police stepping back from response to voluntary patients at mental health hospitals who do not return from approved leave and are reported as missing. The great collaborative work with ICB and KMPT partners has meant great progress over the last two years, with the 136 detentions reduced from 200 per month on average to 50 – 60 per month on average. *Phase 2*- stepping back from concern for welfare calls with a lower level of risk, e.g. someone has not turned up for an appointment, so will only respond to those situations where there is immediate risk, such as an immediate life threatening situation (e.g. attempting suicide).*Phase 3* – patients who walk out of or have not returned to health care facilities at the right time – here the onus will be on the health care establishments to lead on initial action, such as contact with next of kin etc. Police research around walkouts from hospitals, found that in around 40% of cases, individuals were often found still within the hospital grounds. Someone who has yet to be clinically assessed following an overdose and leaves an emergency department and is also awaiting a psychiatric assessment would justify police involvement in locating them as they would be a missing person at high risk of serious harm. Risk assessment needs to be robust. Each case will be assessed on its own merits and consider the appropriate agency to respond.*Phase 4* – trying to already minimise amount of time in conveying people between hospital sites, or a s136 detention. Ideally should not transport mentally unwell people in police vehicles as it causes distress, exacerbates the situation, and is inappropriate. The NHS have had funding to Commission a bespoke ambulance, secure transport function, which is underway.*What are the benefits of this change in approach?* It isn't about demand reduction, although inevitably it will create less demand on the police as a service. The police will still do initial triage and transfer calls from the public to the right agency. This will place the responsibility on partners to manage their risk, design services and review their own policies to support people in crisis and also to support their own staff in supporting those people in crisis. The police workforce will be able to seek support from mental health professionals when they are dealing with people in crisis and reduce the time spent with individuals by ensuring they get the right help and from the right support service.*Implementation*: they are in the process of benchmarking the current levels of demand. Close working with health and social care partners will ensure that they are equipped, not just in systems, process and development, but also in the massive cultural change (also for the police). This project started in September 2023 and will go live in April 2024.*Questions & Comments*Ellen Schwartz: The collaboration and phasing of this approach and what it means for Kent Police is important. How is the system prepared to step into joint multi agency governance mechanisms locally, (as articulated in the National Partnership agreement) that there is a crisis care concordat and that there is a joined up approach.Sarah Allen: conducted extensive surveys across statutory partners and voluntary sector services, to identify challenges, gaps and risks and these survey responses are being analysed. This program of work aligns with wider transformation program in Kent, 111 option 2, crisis cafes, newly commissioned service, so there will be better service provision for those who need it. From ICB perspective, Lousie Clack and her team are leading – she would have been able to give some detail from the health side. At earlier webinars there was concern that the Kent police would suddenly stop supporting, but it's about having service users at the heart of what police are doing, so it's going to be a considered and collaborative process.Sarah shared her contact details: [sarah.allen@kent.police.uk](sarah.allen%40kent.police.uk). |  |  |
| Social Prescribing  | Meg Vest, West Kent Primary Care PCN Deputy Operations Manager, Health Inequalities Project Lead, Sevenoaks PCN.  | SI | Meg Vest to go on the agenda for meeting on 5th March 2024. |
| East Kent Health and Housing Impact Forum  | Sarah Porter, Health and Housing Partnerships Manager, PorchlightThis item is an introduction to the Forum and about raising awareness. The Forum is funded through the East Kent Health Care Partnership as part of their health inequalities work and they were clear that they want to strengthen relationships between health and housing and reduce the stark health inequalities in East Kent. The forum wants to understand both the mental and physical health and needs, as well as the housing needs across the East Kent and to improve working between health systems and local housing authorities, housing associations and private sector housing representatives.The first meeting was on the 30th of November and they are trying to form a longer term vision and plan for East Kent, with ideas around where they might have some impact in the next couple of months, within six months and the longer term. This action plan will be published in the new year and Sarah will be happy to share this. They are also doing research about what's happened nationally and trying to bring some of that approach locally to Kent.*Questions and Comments*Ellen Schwartz: checked whether Sarah Porter had contacted Kent Public Health consultants Jess Mookherjee and Sarah Crouch. Sarah Porter said, someone from Kent Public Health had been invited but was unable to attend. Sarah Porter asked group members to suggest contacts of housing associations in east Kent to be involved in the East Kent Health and Housing Impact Forum. Ellen Schwartz: all of the Kent Public Health consultants are linked with one of the areas in Kent. Ellen will provide a list of the Kent public health consultants so that Sarah will know who to talk to. The aim is to support district and borough councils to articulate their aspirations around the wider determinants of health and to share good practice. | All | Send suggestions of East Kent Housing Association contacts to get involved in the East Kent Health and Housing Impact Forum, to: sarahporter@porchlight.org.uk |
| Update on Housing and Health Project Officer role  | Dr Ellen Schwartz, Deputy Director of Public Health, Kent County Council – The Housing and Health Project Officer post will support Kent Housing Group, particularly around the importance of housing for health. The first recruitment round was unsuccessful; the next round of interviews takes place 13th December.  | ES | Keep the group updated on the progress. |
| HHSC vice chair  | Alison Simmons asked members to volunteer for the role of Vice Chair for the group, possibly from a Housing Association or Kent County Council. | All | To volunteer as vice chair, contact Alison or Sharon. |
| Hot topics and topics for future meetingsinclude the list of items for the next meeting | *Ideas for the next meeting agenda*:Duncan Wilson: DI Sarah Allen mentioned Louise Clack speaking on the Crisis Café, see and treat rapid response team in relation to the changes around the implementation of Right Care, Right Person. It would be useful to see something around this in light of the increase in safeguarding issues coming up.Ellen Schwartz: the integrated care strategy - what the aspirations are; delivery plans will be written in the new year. Ellen Schwartz: UK Health Security Agency published a refresh document today on the health effects of climate change. [Communigrow](http://www.communigrow.org.uk), a sustainable food education charity would like to work in partnership with HHSC group members, expand provision and reach out to communities, across Kent and especially East Kent. Some of their projects include adult therapeutic gardening sessions, a Field School for children and young people with special educational needs.  | SISIESSI | Invite Louise Clack to present at next meeting.Contact a speaker from ICB or Ellen to present an update on the ICS at the next meeting. Ellen or an officer from UKHSA to present on the health effects of climate change.Sharon to arrange for Communigrow to speak at next meeting. |
|  | **Date of next meeting:** **Tuesday 5 March 2024, 2:00pm – 4:00pm** |