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## Inclusive Edinburgh: Complex Care Homelessness Service Review Update

### Integration Joint Board

11 March 2016

#### Executive Summary

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1. This report updates the Edinburgh Integration Joint Board on the recommendations flowing from the work of Inclusive Edinburgh's Complex Care Homelessness Service review.

#### Recommendations

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- 2.1 The Integration Joint Board is recommended to note the progress made to develop an innovative, evidence-based 'Getting it Right for Everyone' approach to delivering services for homeless people with complex needs.
- 2.2 The Board is recommended to approve in principle the proposal to:
  - 2.2.1 appoint a single manager to integrate and coordinate service delivery; and
  - 2.2.2 establish a single location for the delivery of an inclusive homelessness service
- 2.3 The Board is recommended to note that a full business case for the funding, location, management and integration of a Complex Care Homelessness service will be brought back for approval once proposals for a city centre location are agreed by NHS Lothian's Finance and Revenue Group in May, and then the Council's Property Board.

#### Background

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3. The 'Inclusive Edinburgh' review was set up to tackle some of the problems faced by people with complex needs, who may struggle with homelessness, unemployment, drug and alcohol problems, mental or physical ill-health, who sometimes get involved in crime, and who are often the victims of violence. 'Inclusive Edinburgh' examined the combined services delivered by the Council, statutory partners and voluntary organisations to this group of vulnerable people and has developed recommendations, which promote integrated working, service user involvement, psychologically informed practice and a model of 'Getting it Right for Everyone'.

4. The 'Inclusive Edinburgh' review will improve the life-chances, health and well being of the most vulnerable, disenfranchised and disengaged citizens whose needs place significant demands on services, and for whom, despite significant resource allocation, outcomes are mostly poor. To achieve this ambition, the review has developed a 'Getting it Right for Everyone' approach. This mirrors the major policy initiative in Scotland for children. The principles for children are equally applicable to adults. The approach promotes a person-centred, outcome-focused, integrated approach to supporting adults achieve their full potential.
5. The 'Inclusive Edinburgh' review identified the need for service integration and where possible a single point of access. The current statutory services – health, social work and housing – are delivered across two sites, with three separate management structures and no overall strategic coherence in service planning and delivery.
6. A successful stakeholder event took place on the 6 May 2015, which reached consensus on the need to generate more effective outcomes by having closer integration of the existing statutory services under one management structure. It was also agreed that voluntary sector organisations should be equal partners in service design and provision.
7. Monthly meetings of a multi-agency, multi-sectoral review group began in August 2015. The review group reports to the Inclusive Edinburgh programme board, which agreed the following work streams to inform this review:
  - Stakeholder Involvement
  - Scoping
  - Accommodation
  - Options Appraisal

### **Stakeholder Involvement**

8. Service users should be key in informing the development of services. On behalf of the review group, Streetwork and Turning Point Scotland carried out a survey of the views of homeless people (Appendix 1).
9. This exercise was complemented by a jointly-run NHS Lothian, housing and social work service user involvement exercise.
10. In order for the service to be inclusive and accessible to people with complex needs, we need to create more effective links between people who need support and the organisations tasked with providing it.

11. To achieve the required change in culture, all staff working with people with complex needs a better understanding of the drivers of behaviours. This requires training for all staff on appreciating the impact of significant psycho-social needs, such as complex trauma on individuals. This will be addressed through the 'Inclusive Edinburgh' Multi-Agency Practice Development training programme (Appendix 2).
12. This approach is consistent with delivering the service as a 'psychologically informed environment', which recognises that some people with significant difficulties struggle to form effective working relationships with services. Therefore, services need to structure themselves in a way that supports staff to foster relationship building as a bridge to more effective engagement. Co-location, single management, full integration, shared priorities and culture shift are all prerequisites for successful transformation.

### **Scoping**

13. This work stream analysed current casework and service provision, which identified 300-350 people where there is evidence of:
  - multiple exclusion
  - difficulty engaging with services
  - poor outcomes
  - need for multi-service response with 'skilled stick-ability'
  - need for coordinated case management, a lead key worker from health/social work/housing/voluntary services
14. These findings are consistent with the need to build on the current dedication of staff in order to develop a fully psychologically-informed approach, which will promote a shared sense of purpose within the service.

### **Accommodation**

15. There are two key locations from which the majority of public sector provision is delivered: the Edinburgh Access Practice and the Access Point. Both are in poor condition. They are unsatisfactory and potentially unsafe settings.
16. Splitting service provision between two sites is inefficient and can result in service users failing to access the provision they require when it is most needed.
17. Later in 2016, the Access Practice surgery will leave the premises in the Cowgate and the services delivered from that location will be severely impaired unless a suitable alternative is identified.
18. The Accommodation work stream reported the need for:
  - space to work with other partner agencies
  - co-located city centre premises

- a psychologically informed environment by design that is safe, welcoming and promotes health and well-being.
19. This work stream has identified a Council-owned property on Market Street, which would meet all of these requirements.

### **Options Appraisal**

20. A number of options for service delivery were analysed by the Options Appraisal work stream. The analysis was informed by the findings of each of all of the work streams' membership. The models were in turn scrutinised by the Complex Care Homelessness Review Group.
21. An Options Appraisal event was held on 20 January 2016, attended by approximately 80 stakeholders who carried out a SWOT analysis on two options. The conclusions of this work are that the following are required to improve outcomes for service users and create efficiencies:
- a co-located city centre Inclusive Homeless service, with an integrated management structure across health, housing and social work services
  - a shared understanding of purpose to work across services at operational and strategic levels in order to 'Get it Right for Everyone'; this is consistent with developing a psychologically informed approach in order to develop effective working relationships with people who struggle to engage across the pathway
  - a strong link between the operational management of the service and planning and commissioning responsibilities in the Council and the Integration Joint Board, in order to lead service redesign to tackle failure demand throughout the Inclusive Homeless pathway
  - mixed teams of housing and social work staff with a reduced complement of first line management
  - integrated business support services across the co-located partner agencies
  - integration and co-location with the voluntary sector to operate an innovative single point of access to 'triage' those who present at the Inclusive Homeless service
  - the offer of 'skilled stick-ability' in the form of care co-ordination, advocacy and assertive outreach to those people who struggle to present at the premises
  - further consideration of the scope for developing efficiencies through integration with the Harm Reduction Team, who are to be co-located with the existing services.
22. A job description for the proposed Inclusive Homeless Manager post has been agreed by the Complex Care Homelessness review group, and is being evaluated by the Council.

## Key risks

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23. On-going development of the 'Getting it Right for Everyone' approach will help mitigate the risk of harm to communities and individuals caused by a potential failure to provide effective care and protection to vulnerable children and adults.
24. The project is governed by a multi-agency, multi sector board and its aims are consistent with the Council and the Integration Joint Board's strategic aims.

## Financial implications

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25. The redesigned service is intended to reduce failure demand through a more inclusive approach. This will have a longer term financial benefit, by reducing 'the revolving door' of demand. Detailed quantification of resource reduction is not possible at this stage.
26. Service integration, service de-cluttering and the development of evidence based practice is an inherently more efficient way of working.
27. Co-location of services in one city centre setting will generate workplace efficiencies. The full financial implications will be included in the business case referred to above.

## Involving people

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28. The review has engaged service users proactively. The involvement and engagement of people in recovery are key to the success of this review. Consultation has taken place throughout the Council, NHS Lothian, Police Scotland and the Scottish Fire Service; voluntary sector partners; and key stakeholders.

## Background reading/references

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- Inclusive Edinburgh report to Health, Social Care and Housing Committee, January 2014
- Inclusive Edinburgh Update Report to Health, Social Care and Housing Committee November 2014
- Complex Care Homelessness Stakeholder Event May 2015
- Inclusive Edinburgh Update Report to Health, Social Care and Housing Committee September 2015

## Report author

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