

Briefing note

To: Health and Wellbeing Board Date: 24th March 2025

Title: Homelessness and health, substance misuse and domestic abuse

1 Purpose of the Note

1.1 This briefing note is to provide an update on progress on three areas of work – homelessness and health, substance misuse and domestic abuse – since they were last considered by the Health & Wellbeing Board, and to ask for the Board's support with the next priority areas of work.

2 Recommendations

2.1 Health & Wellbeing Board is asked to support the following recommendations:

Homelessness and health:

- To continue to support the work and future projects in relation to health inequalities and homelessness,
- In particular for organisations to support work on healthcare pathways and services that meet the needs of this group.

Substance misuse:

- Support the refreshed strategic priorities and their delivery through the Drugs and Alcohol Partnership Steering Group
- Specifically provide organisational support to strengthening alcohol misuse identification and routes into treatment to reduce the harmful impact of alcohol on the residents of Coventry.

Domestic abuse:

- Support the ongoing needs assessment and the requirement for data as this
 will assist us in understanding the diverse needs within the city.
- For organisations to review the offer of support available to their workforces, such as having a domestic abuse policy in place and clear guidance on how victim survivors will be supported in the workplace.

3 Information/Background

3.1 Introduction

Homelessness, domestic abuse and drug misuse are deeply interconnected issues, being both cause and consequence of each other and affecting some of the most

vulnerable people in society. Domestic abuse is often a pathway to homelessness when survivors flee abusive relationships. Some people experiencing domestic abuse use drugs or alcohol as a coping mechanism, abusers might use substances as a form of control, and perpetrators of domestic abuse are often associated with substance misuse. Homelessness also can result in substance misuse as a coping mechanism, or be a consequence of substance misuse. A key part of recovery from substance misuse involves stable housing which can be difficult for those struggling with addiction. All of this creates a cycle that is self-amplifying and difficult to break, resulting in poorer outcomes for individuals and a negative impact on wider society.

3.2 All three of these issues are the focus of significant partnership working in Coventry. This paper aims to provide an update on current work and highlight areas for further development and support from partners.

3.3 Homelessness and health

3.4 In March 2024 the Health and Wellbeing board received a report in relation to Homelessness and Health which highlighted the health inequalities faced by people experiencing homelessness in all its forms.

3.5 The Board was asked to

- Support the ambition to achieve greater alignment in the provision of health care, support and interventions when considering health inequalities and homelessness in the future with a key opportunity for doing so being through the Homelessness and Rough Sleeper strategy which is being refreshed in 2024.
- Use the strategy renewal as an opportunity to consider as a system how we
 might better improve health outcomes for people who are homeless. In
 progressing this it was proposed to use the
 https://www.nice.org.uk/guidance/NG214 guidance that explores how LAs are
 providing integrated health and social care services for people experiencing
 homelessness, and ensure care, support and interventions are coordinated
 across different services. Undertaking a self-assessment to establish a clear
 baseline of our provision and services was the recommended starting point for
 this work.
- 3.6 Since the initial report to board the Health and Homelessness agenda has gained traction and support, and a number of projects / interventions have started to take place with the support of the Coventry Care Collaborative. This includes but is not limited to:
 - Completion of initial NICE baseline self-assessment
 - Secondment of a researcher form Warwick university as part of the HDRC to support a research piece into health and homelessness in the city
 - Inclusion of homelessness as a specific priority area in Marmot 2.0 and initial planning partnership meeting focussing on health inequalities

- The production and publication of the Homeless and Rough Sleeping strategy and delivery plan which includes a commitment to consider health and wellbeing in all interventions.
- Development of an operational steering group to look at practical interventions in terms of health and homelessness and steer delivery of agreed operational actions.
- 3.7 H&WB Board is asked to continue to support the work and future projects in relation to health inequalities and homelessness, in particular work on healthcare pathways and services that meet the needs of this group.

3.8 Substance misuse

- 3.9 Much of the focus over the past two years has been the implementation of the drugs and alcohol strategy and ensuring positive engagement from key partners within the local system. Key achievements to date have been: strengthened partnership relationships; inter-organisational pathway development; and our local response to understanding and managing drug related harms and deaths (which has been recognised as good practice by OHID and the Office of the Police and Crime Commissioner). We have recently reviewed our priorities for the next 3 years (shown in Appendix 1) and an area which will receive more focus moving forward is around prevention and reducing harm from the impacts of alcohol use on individuals, families and the wider community.
- 3.10 In November 2024 Coventry and Warwickshire held the first Prevention Summit. Alcohol was identified as a local priority for the wider work on prevention. In Coventry, there is a disproportionate amount of harm caused by alcohol use. Alcohol-related mortality and hospital admission rates are higher than the national average and amongst our nearest neighbours. There is significant work to be done on identifying those with an alcohol need earlier to try and reduce hospital admissions and deaths.
- 3.11 The other significant piece of work that has been completed is the reprocurement of our drugs and alcohol treatment services. The current provider Change Grow Live (CGL) were successful in maintaining the contract. The new service model has a much stronger focus on building a more vibrant long term recovery offer for Coventry, bolstering capacity within the alcohol team and providing more outreach support. Other significant changes include: more specialist roles to encourage more effective engagement with our most vulnerable groups in the community; a clinical outreach wellbeing vehicle to allow greater reach of services across the city; and the extension of service hours supporting people 7 days a week. These changes are in response to feedback from those accessing services based on barriers to accessing support with the previous model. The new service will commence from 1st April 2025.

3.12 H&WB Board is recommended to:

- Support the refreshed strategic priorities and their delivery through the Drugs and Alcohol Partnership Steering Group
- Specifically provide organisational support to strengthening alcohol misuse identification and routes into treatment to reduce the harmful impact of alcohol on the residents of Coventry.

3.13 **Domestic abuse**

Domestic Abuse has profound and extensive effects on both individuals and society including wide ranging impacts for victim-survivors' physical and mental health and wellbeing, and social and economic impact such as homelessness, need for children's social care, and capacity in the criminal justice system. Preventing harm from domestic abuse is one of our key priorities and following the commencement of the Domestic Abuse Act 2021, Coventry has continued to prioritise tackling and preventing domestic abuse. The current strategy is overseen by the Domestic Abuse Local Partnership Board.

3.14 Current priorities include:

- DAHA (Domestic Abuse Housing Alliance) and Safe and Supported accommodation subgroup that co-ordinates the whole housing approach for victims of domestic abuse including their children, ensuring that underrepresented groups are considered and is supporting Housing and Homelessness to obtain DAHA accreditation
- Workforce Development co-ordinates delivery, review and impact of training and workforce development relating to domestic abuse and harmful practises ensuring that trauma informed responses, intersectional and cultural competence is embedded in all learning
- Data task and Finish Group that is developing a data set involving all partner agencies relating to domestic abuse that will provide a comprehensive understanding of domestic abuse in Coventry
- Ongoing needs assessments for the safe accommodation duties and wider strategy refresh for 2026

Service provision and details on how the domestic abuse grant is used are set out in Appendix 2.

- 3.15 Coventry is not alone in seeing increasing demand for domestic abuse services, particularly since March 2020, and we are very aware of the impact of the cost of living for victims of domestic abuse on their victim's ability to leave an abusive relationship. Our commissioned domestic abuse services have seen a 36% increase in case load numbers since July 2021.
- 3.16 Housing and Homelessness team have seen a significant increase in approaches due to people fleeing domestic abuse since changes were brought in via the Domestic Abuse Act 2021 relating to priority need.
- 3.17 Over the last three years there has also been a change in the complexity of need for victim-survivors of domestic abuse that includes, substance misuse, mental health, disabilities as well as language need and no recourse to public funds. A snapshot of data from Change Grow Live on 30/09/2024 identified that there were 280 victims of domestic abuse accessing structured treatment programs out of a total number of 1024. Of these 280 service users, 95 had housing issues

3.18 Duty to Collaborate

The Victims and Prisoners Act 2024 includes the Duty to Collaborate which introduces new responsibilities for PCC's, local authorities and Integrated Care Boards to collaborate in the commissioning of community support services for

victims of domestic abuse, sexual about and serious violence. This includes a requirement to develop a joint needs assessment and local strategy which demonstrates how they will collaborate to deliver and improve victim support services.

- 3.19 Individual measures have not yet come into force, but the anticipated timeline is:
 - Engagement From mid Oct 2024 working groups including APCC, NHS England and Local Government to gather feedback on the draft guidance
 - Consultation early 2025 with stake holders
 - Finalise statutory guidance and commencement mid to end 2025
 - Implementation Expected that Duty will go live early 2026 with needs assessments and strategies early 2027 at the soonest

3.20 Health and Wellbeing Board is recommended to:

- support the ongoing needs assessment and the requirement for data as this
 will assist us in understanding the diverse needs within the city.
- For organisations to review the offer of support available to their workforces, such as having a domestic abuse policy in place and clear guidance on how victim survivors will be supported in the workplace.

4 How does this work contribute to the delivery of the Health and Wellbeing Strategy?

- 4.1 This work contributes to the H&WB strategy in the following ways:
 - Homelessness as a prevention opportunity focusing on health of people who are homeless
 - Improving mental health for all through support to access services and support as part of treatment pathways
 - Prioritising prevention both primary and secondary prevention
 - Strengthening communities co-production with communities on support
 - Co-ordinating services in particular healthcare, treatment and support for victims / survivors

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