**Nasiba Chowdhury and Anne Caple**

**Supporting people experiencing homelessness – A multi-sector digital approach**

**Introductions**

My name is Nasiba Chowdhury, I'm the Occupational Therapy team lead within the Homelessness Health Occupational Therapy team within the Swansea MPT 360 project. My name is Anne Caple, I'm the service manager for Swansea MPT 360. I work for the Wallich and we are the lead organisation within the project.

**Why was the service needed**

The service was developed, off the back of Janet Keauffling, who's a senior homelessness nurse with the Abertawe Medical Partnership. She did a lot of research into homelessness health and came up with the idea why we couldn’t have occupational therapy. Unfortunately, the practice that she was with couldn't fund that so, 22 organisations came together to start talking about how we could look at building a project that could incorporate occupational therapy services.

We approached the National Lottery Community Fund and they initially gave £50,000 for us to look at developing the service. So, we had a lot of consultation process that started the ball rolling and then it was decided that The Wallich would take the lead and be the lead organisation. And after all the consultation, I think that we came up with the delivery partners, which is obviously The Wallich, NHS, Barod, Welsh Refugee Council, Crisis and Include Hub. There was a recognition that homelessness or people experiencing homelessness was quite a complex issue. I think there was more recognition that homelessness wasn't just a housing issue, there was a lot more underlying causes to homelessness and rather it was a symptom of something more going on underneath. There was a need for a profession to come in, look at those underlying causes, provide some specialist assessments to try and address those root causes, to help people not to just gain housing but the appropriate housing and to support people to sustain the housing and to take a little bit of a step further where they're not just sustaining their accommodation but living a meaningful life and thriving in that accommodation. The unique side of this project is the multi-agency aspect of it.

Whilst there was recognition for occupational therapy required within homelessness, there was a recognition there needed to be more work and more collaborative work between health, third sector and statutory services. The beauty of this project is there are so many different organisations involved in delivering the project.

**Description of the service**

There are different delivery partners and they cover third sector health and statutory services. In terms of actually developing the project, there was the bid writing, the project plan and the proposal and then once it was approved, we all came together and met up and in the initial stages it was looking at getting to know each other and each other's organisations within the project and then we went through a period of scoping and networking with other existing services within homelessness

Obviously, we have project aims, and there were four identified. When we went through them, we recognised that not all of the aims that our project would actually meet. One of them was to better equip landlords but we're not working with landlords because the people that we're supporting are actually homeless or at risk of homelessness. We re-tweaked that, , so we could have a better outcome. I think when we were trying to establish a pathway and referral criteria, we were having conversations around making sure we were an accessible service. Whilst we do have a referral form, we very much look at the information about what might be an appropriate referral as guidance to support people referring into our service. And the referral form is very much an information gathering tool, as opposed to a tick box exercise and meeting criteria. Our remit is anyone who is homeless or at risk of homelessness with multiple needs and we try and keep it as open as possible to make sure we're quite an accessible service.

**Outcomes and use of technology**

I think we've had some really positive outcomes. In general, services within homelessness, health and statutory services have received the project quite well. And I think that's reflective of being inundated with referrals. There's been a lot of good reception in terms of wanting to come down and visit the project, wanting to get to know the project a bit more. But I think the other thing I was going to say, which is quite positive, is that we we're working on our own case recording management system, which is called My Journey. So that's in conjunction with Swansea University and it’s a tool for both the individual that we support and ourselves. But it means that they can have a one-page profile as well so they can put all their information on there and then they never have to revisit that, so they're not being traumatised twice.

The My Journey app is quite a new unique and innovative approach this project has taken on board. The purpose is twofold, to allow the professionals to have a platform to record our case notes and involvement that we have with the service users. And it will allow different agencies to have access to these notes, which is great because we've discovered that there's lots of barriers with existing recording systems. And the second purpose I was explaining was that there's actual service users, the individuals that we're supporting will be able to access this platform where they will be able to see certain elements of the notes if they wanted to. They would be able to complete their own well-being assessments. It gives them a lot more ownership on autonomy over their care. The app is designed in a more dignified way, which is quite unique with this project. And I think the other thing that's unique about it is that the individual can decide who sees what they put on as well, so they've got control over who sees what which gives empowerment to the individual as well - it's their ownership, their story.

**Benefits to the person and the wider system**

In terms of what sort of impact is having on the person, I think the multi-agency aspect or the multi-agency working allows for the individual to totally say their story once and not be re-traumatised by the process. Through the input that we've provided, occupational therapy and substance use input, we've seen some really positive outcomes in terms of individuals' well-being being improved. We've supported individuals' transition through homelessness, through temporary accommodation and into permanent accommodation. So, we were able to set up this group called Recovering Through Activity, which just allowed individuals to be exposed to a range of different occupations and that they may not have had the opportunities to access. I think what we've got to think about is that people who might be experiencing homelessness, their priorities might be different from us. They might be concentrating more on their safety, on where they're going to sleep from day to day, from night to night and in survival mode.

Quite often we see individuals who are in survival mode. And this Recovery Through Activity group allowed individuals who might have been experiencing those feelings to have opportunity to access occupations over a range of different areas, whether that's self-care, leisure, productive occupations in a group setting and build social skills in the sense of belonging, access occupations that might have required finances to access, might have required transport to access. All of these barriers to this type of meaningful engagement were addressed through this group and it was quite nice to see the impact that that was having on individuals with an hour service.

I guess the other part of the question was impact on systems. And Anne was alluding to that previously. Through our input within this project, we've seen, I can think of a couple of the cases where housing options might have discharged their duty towards individuals because they presented with behaviours that challenged. Or another way to describe that would be antisocial behaviour, or they weren't coping and displaying behaviours that put themselves at risk, or put residents within those accommodation at risk, or put the actual physical environment at risk. And rather than simply discharging the duty, our team was to go in and assess why is this person presenting in this way? Is there something more underlying going on that we need to address? Is there something that we need to look at in terms of the coping strategies that are translating into these challenging behaviours? Is there an unmet need there? And I think on two occasions, we had two individuals where housing options had already discharged duty on one, and the other where they were going to discharge duty, and just simply through our assessments and having our conversation and housing options were very willing to have that conversation with us and we were able to build an understanding about why the individual presented the way they did, and the duty was discharged at the end. And with one of the individuals, we were able to support them into temporary accommodation, and that's going quite well, to be fair. The other individual we were able to, she's not in temporary accommodation yet, but the duty is still there. So at least the housing duty is there to support them through their journey, which has had a really positive impact.

Other impacts with regards to wider systems means we might find ourselves supporting individuals to access the community a bit better or improve their independence and accessing the community. And that might result in applying for things like bus passes. The individuals we work with have different coping strategies, and some of that might translate into using substances. And I think on two occasions, there was a potential where there was a decline of their application for a bus pass, was because of the use of substances and how they may present again, when under the influence. Again, it's just through conversations about how having that bus pass would enable them to access the community, to improve their independence, but also access the community to go to appointments to address the substance use needs. Through conversations with the transport company, those decisions were overturned, and individuals were able to have a bus pass, and that was having a positive impact on their engagement with the community.

**Next steps**

I definitely I think we're always learning. I think we've been on a journey of growth but for me, I think that it's things like data sharing agreements, GDPR, everything that needs to be sorted out and made watertight from the start, because that's caused a lot of difficulty in regard to getting the My Journey platform up and running. There's been lots of conversations about that, and that's very frustrating. I think for us, looking at the data is limited of the data that we've collected, because we've got information in so many different places, so I think systems need to be put in place. That's the biggest thing that I would say. Definitely. I think multi agency working is awesome when it works, but in order for it to work, we need the systems in place. And I think that's what we've learned or are learning is how to develop those systems and then have them in place at the right time as well. What we're finding is we're doing a lot of backtracking now. A lot of good work has happened and is happening, and with projects like this funded by an external body, there's a need to collect that data in order for us to continue to help these people. I think that's been a big lesson.

How to evolve and how to adapt? We are continuously changing and we are trying to review our approach, so the whole thing about trying to have a bit more of an accessible approach going into what we call hot zones and trying to be present where people are. I think we've been through a journey of appreciating and acknowledging that individuals that we're supporting will have difficulties with engagement. And just because there's difficulties with engagement, it doesn't mean that they don't need our service or that doesn't mean that they don't want our service. Sometimes it's about exploring why those difficulties are there and what we can do to address them. I think we're getting there, appreciating that there's more that we can do to help people to engage with our service. There's a need for it to become more accessible. There's a need to acknowledge that there's a lot more we can do as systems and services to make our services accessible,

We're a very new project. We've been delivering the service for just over a year now, and we cover Swansea, Neath & Port Talbot but in terms of mainstreaming across other localities, we're not there yet. We're establishing it within our localities and just trying to establish it and deliver it and measure the impact within this area first. We would eventually be looking to roll this out across other regions if it's successful and look at funding. I know that Cardiff do something similar, but they have different health services involved. We're funded for five years by the National Lottery Community Fund so we're hoping that once the five years are up, we can look at additional funding to continue the service because we can see there's definitely a need for it even in the early stages now. Already it's been received very well and it's already had a really positive impact. It's just to look at continuing to do that, continuing to develop the impact as well and sharing the impact and sharing our findings.

If I had to pitch this service, I would say it's very unique and at its core it's about supporting and trying to understand individuals who are experiencing homelessness or at risk of homelessness with multiple overlapping and met needs. We're a service that values working together with different agencies. We're a service that promotes the benefits of working in a multi-agency manner for the people that we serve. And at its core, it's about trying to take a person-centered approach where we're trying to understand what's important to the individuals that we're helping. Where we're trying to understand what their life story is, and what they want to achieve. We're trying to acknowledge the difficulties that they might be experiencing that is resulting in homelessness, but also appreciate the skills that they have, the positive strengths that they have and how we can enable them to use those strengths to overcome those difficulties. I said this before, homelessness is not just housing issues. There's so many underlying causes that need to be appreciated and addressed and it's about taking the holistic approach. It's about acknowledging that barriers to not only appropriate housing, but to sustaining appropriate housing and living a meaningful life are not just the barriers around that individual or their conditions. It's the systems around that and we need to appreciate that and adapt our approaches and our systems to enable people to live a good life in good homes. And this is what this project offers, the ability to explore that, and develop and deliver a service to address that and hopefully to demonstrate the positive impacts of that and share it. I think it's also about challenging organisations as well in regard to their systems and their processes and to get them to understand where people are coming from. And our service is there to empower the individual as well.