

ALL IN FOR CHANGE



AUGUST 2022

CHANGE TEAM BRIEFING



PRIORITIES FOR CHANGE

PEOPLE FIRST: FLEXIBLE AND PERSON CENTRED SUPPORT

This month the Change Team were joined by Claire and Anne-Marie from Transform Forth Valley, a service working to support individuals and families who are impacted by substance use and/or societal, financial or health inequalities. Their person-led, joined up approaches reflect the Change Team's mission to influence the sector to create a support system which puts people first:

- 1 Consider the whole person and not just the reasons why they are seeking support. Meet people where they are. There should be no time limit on support.
- 2 Provide advocacy helping to bridge the gap between substance users and services, and stop people from repeating their story.
- 3 Promote wrap around, joined up services where third sector and statutory sector are working together.
- 4 Be approachable and welcoming.
- 5 Help to prevent people reaching crisis point. Working with housing officers, service people, ambulance service and GPs to help them spot the signs that someone is at risk of becoming homeless.
- 6 Help people to maintain their tenancy for as long as needed and helping them to build connections within the local community.

The Change Team want people to experience services which are easy to navigate and which respond rapidly and appropriately to their needs. This will only happen if staff are able to build strong, consistent, non-judgemental relationships with the people they support.

It's about listening to people and building up trust over time. Building relationships over the phone is difficult, services should go out of their way to meet people in person, where they feel comfortable.

The Change Team want to see services which are accessible and flexible. There shouldn't be a time-limit on support. An open door policy would allow people to return to services after some time away, and pick up where they left off.

Working in this way is dependent on time, capacity and resources. Frontline workers need to have the space and permission to be able to offer person led and relational support.

POSITION STATEMENT

Competitive tendering prevents people from getting the support they need. More focus needs to be made on supporting people with the most complex needs, allowing for continuity and trusted relationships to be formed. Support should be open-ended and people able to keep in touch for longer after their support ends.

Up-skilling communities and introducing community hubs and place-based coordinators would allow people to tap into local support - having everything they need at their disposal. People need to feel empowered and part of a community, with those from less represented groups also involved.

MENTAL HEALTH STRATEGY CONSULTATION

Health and Wellbeing is one of the Change Team's priorities for this year and is featured in one of their 4 New Directions to end homelessness: People First. The Change Team therefore supports the focus Scottish Government are putting on mental health and wellbeing and wants to ensure that the needs of those who are experiencing, or are at risk of homelessness, are met.

The Change Team believe that a successful mental health strategy will:

- impact people's abilities to access the right services for them when they need them.
- be more holistic, allowing better joined up working between homelessness, addictions and poverty.
- continue to listen to the opinions of people with personal experience of mental health and homelessness to better inform the decisions being made.

The Team have created a response to the Mental Health Strategy consultation which includes eight key messages:

- 1 Better support around positive mental health is needed for those experiencing homelessness, and more awareness is needed around links between poor mental health, complex needs, homelessness and drug deaths.
- 2 More training is needed for housing and homelessness frontline staff to help them grow confidence to provide mental health support.
- 3 Currently there are poor transitions from child to adult homelessness services, meaning that there are gaps in the provision for young people. This is more than a housing issue, there is a need for social work, health, education and the justice system to support young people and join the dots better.
- 4 Inflexible referral processes are not sympathetic to the needs of people navigating complex lives. People miss appointments for a range of reasons, often finding the thought of going somewhere unknown intimidating. Mental Health services should be conscious of this and cater to people's needs, providing flexibility and meeting them where they feel most comfortable.
- 5 The Change Team suggest reviewing negative terminology such as the phrase "non-attendance" when someone is unable to make a meeting or appointment. Language plays a huge role in ensuring people feel comfortable engaging with services.
- 6 Since the pandemic it has become increasingly apparent that more needs to be done to tackle social isolation, especially for people in temporary accommodation and Housing First tenancies. People need to have better links with their local communities so that relationships and support networks can be built.
- 7 It is currently taking too long for people to receive mental health support. Homelessness bears the brunt for those unable to access mental services, with failures in services leading to people becoming homeless. Earlier mental health intervention can prevent people reaching crisis point and prevent homelessness.
- 8 When talking about and designing Mental Health services, thought needs to be taken on the special needs of people with experiences such as homelessness and drug use, as tailored advice and support may be needed.

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THE CHANGE TEAM | KEEP IN TOUCH

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