

Questions for health and social care stakeholder group meeting

Opening questions

- What is your experience of working with people at risk of homelessness or with unstable / insecure housing? How would you identify when people have unstable housing or are at risk of homelessness?
- What is your experience of working with homelessness and housing services/or experience of how different parts of the health service interact with homelessness and housing services?
- Do you recognise the picture presented by the statistics in the briefing on the number of people with homelessness experience using your services, and the cost implications of this?

Engagement of people at risk of homelessness with H&SC services

- Which health and social care services are most likely to have contact with people who have unstable housing? What are the flags that health and social care services will see when someone is at risk of homelessness?
- In your experience, what do health and social care services already do to prevent homelessness? Examples of good practice or learning?
- What (other) practical steps could different parts of the health service take to help prevent homelessness for people they're working with and whether they're aware of any examples of good practice?

Identifying people at risk of homelessness

- In your experience do you/ people working in health and social care services know where to signpost people or who to contact for advice if they identify that a patient is homeless or in an unstable/ insecure housing situation?
- What questions (if any) are patients asked when they come into hospital or register with a GP about their housing situation? Is this consistent across different parts of the health service? Would a standardised way of recording housing status help to track outcomes for people who are experiencing or at risk of homelessness?
- What assessment is done of people's housing situation as part of a social care assessment?
- What are the triggers for accessing social care services? Are there particular barriers that people at risk of homelessness might face? How could these be addressed so that people access support before they lose their housing?
- Who are the key parts of health and social care services with a role in identifying and assisting people at risk of homelessness?

Working with housing and homelessness services

- Is there anything more that homelessness or housing services could do to help you in delivering your services?

Housing First

- What is the experience of working between Housing First and health and social care services? What can we learn and what could be strengthened?

Leaving health and social care services into homelessness

- What do you think is needed to make sure people go into suitable housing when being discharged from hospital or institutional care?

Health and social care strategic frameworks

- What is the best way to make strategic connections between health, social care and housing / homelessness services? Are there shared outcomes for health, social care and homelessness services? Are there barriers of language or culture that we need to address?
- Are the key services all within the H&SC partnerships or are some beyond that? What about GPs?
- What frameworks do health and social care services currently work to? Is there anything that already relates to housing / homelessness in those?
- What are the inspections and audit frameworks or processes, complaints processes for health and social care services? Could these have relevance for what we are trying to achieve?
- What role could services commissioned by health and social care partnerships play in preventing homelessness? E.g. Community connectors in GP surgeries. How are third sector services commissioned by health and social care?

Legal duties

- We've been asked to consider legal duties on a range of public bodies. What do you think would be most useful? What would be needed so that services could implement any new requirements effectively?
- How could a generic "duty to prevent homelessness" be made meaningful?
- How could we connect any requirements to existing responsibilities or frameworks?
- Would a duty on health and social care bodies to refer to the local authority where there is reason to believe there is a risk of homelessness have value in a Scottish context?
- One proposal is for a requirement to assess healthcare needs and provide support where it is identified that someone is at risk of homelessness. This would mirror a duty on local authorities to assess and provide housing support. How might this work? Should it also cover social care needs? What would be needed to make such a duty workable in practice?
- Is there anything else we need to consider?