





Private & Confidential Miss Hamilton-Deeley

By Email only

Brighton and Hove Clinical Commissioning Group Hove Town Hall Norton Road Hove

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Dear Miss Hamilton-Deeley

Re: The late Mr Joseph Mochan

Thank you for your report, received on 30 March 2020, regarding the Record of Inquest for Mr Mochan.

Firstly, we would like to express our sincere condolences to the family of Mr Mochan.

Your report requested us to consider the following provisions to prevent further deaths:

- A safe night shelter, open to all every night of the year, which would be able to accommodate 50 to 200 people each night. This should not be available on a first come first served basis, and should provide proper associated hygiene facilities, food, warmth and communal areas.
- 2. A Homeless Healthcare Hub, which contains all the necessary services under one roof. This would be not unlike the (though it would be more sophisticated than) the University of Sussex Healthcare Hub.

The report acknowledged it would not be possible for these to be provided overnight and requested that a discussion with all stakeholders begins.

Your report has prompted the CCG and the Local Authority to come together to consider the findings. Brighton & Hove City Council (BHCC) is responsible for providing the night shelter and homelessness services, and has therefore considered a response to point 1 above. Brighton & Hove Clinical Commissioning Group (B&H CCG) is responsible for providing healthcare provision to the street homeless population and commission the Arch Healthcare Hub, and has therefore considered a response to point 2 above.







1. Night Shelter

BHCC aims to ensure that no one has to sleep rough in the city and that its rough sleepers are kept safe during in the winter months. BHCC currently commissions a range of accommodation provision for rough sleepers and single homeless people offering both short term (hub) and longer-term accommodation options. The vast majority of this provision operates year round, and includes:

- Supported accommodation for adults and young people.
- Somewhere Safe to Stay offering short term accommodation to those at high risk of rough sleeping while a solution to their homelessness is found. (Funded by MHCLG)
- No Second Night Out Hub offering short term accommodation to those new to the street or new to rough sleeping while a solution to their homelessness is found. (Part funded by MHCLG).
- 365 Nightshelter offering 15 beds in shelter type accommodation to rough sleepers. (Funded for 2 years from November 2019)

In addition to the above where a rough sleeper or single homeless person meets the thresholds for a statutory duty, they may be offered accommodation in emergency provision (bed and breakfast) whilst the duty to them is explored.

BHCC funds or facilitates the funding of 732 bed spaces in the city for single homeless people and rough sleepers as follows:

- 504 units of supported accommodation for adults
- 143 units of young peoples supported accommodation
- 60 units of mental health supported accommodation
- 54 short term shelter type accommodation spaces
- 22 Housing First units with an additional 20 units due to be brought online in 2020 - 2021

A further 29 supported accommodation units opened between January & March 2020

In addition, during the winter period there is a direct access Severe Weather Emergency protocol shelter, which is open when the temperature is predicted to be 'feels like' zero or below or there is an amber weather warning.

The current provision ensures that, during the poorest weather, there are sufficient bed spaces to mean no one should have to sleep rough in the city.

In January 2020 a report was prepared which considered the provision of a year round night shelter for all rough sleepers. This identified a number of risks and barriers, including resources (financial and workforce needed), the lack of an available suitable building, and the impact on the wider community. An important







consideration was the evidence base that this model will have a positive impact on the outcomes of rough sleepers. Evidence of the impact of Night shelters on rough sleepers is currently very limited. The data provided by Homeless Impact concludes that Nightshelter provision does not have a positive outcome on health or substance misuse outcomes for rough sleepers.

Anecdotal feedback about Nightshelter provision in Brighton shows that many of the most vulnerable rough sleepers choose not to access the provision available. Many rough sleepers do not feel comfortable in large shared sleeping environments and many of those who are most vulnerable such as women and those with mental health needs will not access even the safest and highly staffed service.

Brighton & Hove City Council is, however, exploring models of shelter provision being provided in other areas of the UK and is looking at evidence based practice to design services which gives rough sleepers the best opportunity to recover from homelessness. This includes the expansion of Housing First a model of support with a strong evidence base of positive outcomes for rough sleepers. At present, there is no identified budget or building for the provision of a Nightshelter for all rough sleepers.

2. Homeless Healthcare Hub

B&H CCG is committed to ensure that the patient population (in particular those that are the most vulnerable) receive the right care, at the right time, in the right place.

The city continues to see high numbers of rough sleepers despite existing provision and strong links between health and social care to provide an integrated support offer. BHCCG and BHCC jointly commission a range of services aimed at reducing health inequalities and achieving positive outcomes that empower individuals to recover from homelessness and end the need to sleep rough.

The CCG commissions a successful and integrated service model through Arch Health, who provide integrated healthcare to homeless people in Brighton & Hove. In February 2017, Arch took over the Integrated Homeless Healthcare Hub contract, which includes a GP surgery, hospital in-reach services, community health engagement, outreach to day centres and citywide leadership.

The GP surgery has around 1,400 registered patients, with the organisation employing 2.3 FTE GPs. The organisation adopts a very broad view of health and wellbeing in order to promote 'inclusion health' amongst the city's most deprived and vulnerable population. Therefore, works very closely with BHCC and the Voluntary and Community Sector to ensure that a streamlined service is available to meet the holistic needs of all homeless people.

In 2019, Arch Care received an 'outstanding' rating from the Quality Commission (CQC) and continues to aim high with an ambition to become renowned for its







expertise on the design and delivery of integrated care, research, training and innovation in homeless healthcare.

Homeless Healthcare services in the city are recognised as an exemplar model by NHS England/Improvement with the potential to be replicated across the country. The CCG acknowledges the need to develop a homeless healthcare hub with all necessary services under one roof. We believe the current commissioned service could be enhanced to develop a more integrated service with the Local Authority. A Feasibility Report has been commissioned to develop a strategic definition and preparation of this brief on behalf of Arch Health CIC for the development of a new healthcare facility for homeless and disadvantaged people in Brighton.

The Feasibility Report will consider options to further the integration of services, and acquire the necessary estate/space to expend the clinical offer and house various services under one roof. The proposals include access for homeless people of the following services:

- Homeless mental health services (SPFT)
- Integrated primary care team (SCFT)
- Substance Misuse Services
- Health engagement team (Justlife)
- In addition, hosting visiting services such as Dentists, Dermatology, Hepatitis
 C specialist support, Benefits Support and Midwives, amongst others.

The Feasibility Report was concluded in February 2020. Subsequently, the CCG has had to focus on the response to the Covid-19 crisis. As we enter the recovery period following the initial phase of Covid response, we will be reviewing the feasibility report to include learning from the Covid response in relation to supporting the needs of the homeless population in Brighton and Hove.

I hope this information provides the assurance that the CCG and Local Authority have acted on the directions within the report and we would be happy to provide further information on request.

Yours sincerely

Clinical Chair Brighton & Hove CCG

Executive Director, Health & Adult & Social Care Brighton & Hove City Council

Response to Regulation 28 - Report to Prevent Further Deaths issued by Senior Coroner Veronica Hamilton-Deeley following investigation into a drug related death.

1. BACKGROUND AND CONTEXT

- 1.1 This response is a joint response by Brighton & Hove CCG (BHCC) and Brighton & Hove City Council (BHCC) to the paragraph 7, s5 direction under the Coroners and Justice Act 2009 and regulations 28 and 29 of the Corners (Investigations) Regulations 2013.
- 1.2 On the 25th March 2020, the CCG and BHCC were given 56 days to respond to the Coroners Regulation 28 Report to Prevent Further Deaths. The report and Records of Inquest related to a deceased individual accessing Homeless services and The Arch Healthcare GP Practice. The cause of death was determined to be drug related, however the Coroner reported that evidence provided during the inquest revealed matters that gave rise to concerns. In the Coroners opinion, there was a risk that future deaths will occur unless action is taken.
- 1.3 This response examines the direction provided by the Coroner's report to consider the following provisions to prevent further deaths;
 - a) A safe night shelter, open to all every night of the year, which would be able to accommodate 50 to 200 people each night. The direction stated that it should NOT be available on a first come first served basis and should provide proper associated hygiene facilities, food, warmth and communal areas.
 - b) A Homeless Healthcare Hub, which contains all the necessary services under one roof. This would be not unlike the (though it would be more sophisticated than) the University of Sussex Healthcare Hub.
- 1.4 Brighton & Hove City Council (BHCC) is responsible for providing the night shelter and homelessness services, therefore is responsible for delivering a response to and actions towards direction A.
- 1.5 Brighton & Hove CCG is responsible for providing healthcare provision to the street homeless population and commission the Arch Healthcare Hub, therefore is responsible for delivering a response to and actions towards the direction B.

2. BRIGHTON & HOVE CITY COUNCIL RESPONSE – DIRECTION (a) A SAFE NIGHT SHELTER

2.1 BHCC aims to ensure that no one has to sleep rough in the city and that in rough sleepers are kept safe during in the winter months. BHCC currently commissions a range of accommodation provision for rough sleepers and single homeless people offering both short term (hub) and longer-term accommodation options. The vast majority of this provision operates year round, and includes:

- Supported accommodation for adults and young people.
- Housing First accommodation and support to provide a specialist response to people with multiple and compound need
- Somewhere Safe to Stay offering short term accommodation to those at high risk of rough sleeping while a solution to their homelessness is found. (Funded by MHCLG)
- No Second Night Out Hub offering short term accommodation to those new to the street or new to rough sleeping while a solution to their homelessness is found. (Part funded by MHCLG).
- 365 Nightshelter offering 15 beds in shelter type accommodation to rough sleepers. (Funded for 2 years from November 2019)
- In addition to the above where a rough sleeper or single homeless person meets the thresholds for a statutory duty they may be offered accommodation in emergency provision (bed and breakfast) whilst the duty to them is explored.
- 2.2 BHCC funds or facilitates the funding of via grant from the Ministry of Housing, Communities and Local Government a total of 732 bed spaces in the city for single homeless people and rough sleepers
 - 504 units of supported accommodation for adults
 - 143 units of young peoples supported accommodation
 - 60 units of mental health supported accommodation
 - 54 short term shelter type accommodation spaces
 - 22 Housing First units with an additional 20 units due to be brought online in 2020 - 2021
- 2.3 In addition, during the winter period there is a direct access Severe Weather Emergency protocol shelter, which is open when the temperature is predicted to be 'feels like' zero or below or there is an amber weather warning.
- 2.4 The current provision ensures that, during the poorest weather, there are sufficient bed spaces to mean no one should have to sleep rough in the city.
- 2.5 The night shelter and hub accommodation is accessed by referral through Housing Options or our commissioned Street Outreach Services and provide intensive resettlement work to find people sustainable solutions to their homelessness or reconnection to safely reconnect people to their area of connection, this includes ensuring there is a sustainable accommodation offer.
- 2.6 The direction of the coroner seeks to expand this provision.
- 2.7 The current budget for the H&ASC Commissioning team with oversight for all accommodation outlined above is £7,467,127.00 per annum this includes £2.3 million of grant funding from the Ministry of Housing Communities and Local Government for 2020/2021. This budget includes the accommodation outlined above and services including rough sleeper street outreach, day centre staff, housing advice for young people, floating support to people in their own homes, clinical psychologist support, peer support and work, learning and employment support services. We do not yet know if there will be a further round of grant funding.

- This winter an average of 40 people a night used the Severe Weather Emergency Protocol shelter but we know that between 80-86 people sleep rough in Brighton & Hove on any one night. Community partners and we are pro-active in ensuring people are informed of the shelter but a significant number of people choose not to come in.
- 2.9 Over the recent Covid-19 pandemic from 24th March to 23rd April the council accommodated 189 rough sleepers in self-contained accommodation.
- 2.10 Brighton & Hove City Council have made representations to central government on the need for a co-ordinated national approach to end rough sleeping recognising that this is a nation crisis which requires a national as well as local response.

2.11 Extending Night Shelter Provision

During the winter of 2019/2020, the winter night shelter services were expanded to provide an open access weekend winter shelter in recognition that day centres were not open during the weekend and people were therefore less able to access food and other services. This was at an additional cost of £25,000 for an additional 18 nights. Consideration was given during this period to expanding a night shelter service for year round provision but this was inhibited by a lack of funding and the lack of a suitable building.

- 2.11 In January 2020 a report was prepared which considered the provision of a year round night shelter for all rough sleepers. The report considered two potential models and the associated costs. Neither model includes the costs of a building nor the expenses associated with running and maintaining a building.
- 2.12 The first costing is of £23,510 per calendar month (total £283k per year) for a shelter service only with no meaningful support to engage the users in resolving their homelessness or support to access services. This would provide an emergency Night shelter model from 7pm to 7am 7 days a week with capacity for 90 people.
- 2.13 The second costing is of £30,635 per calendar month (total £365k per year) for an enhanced model with trained staff able to offer direct support around ending people's homelessness and ensuring they were effectively linked in with services. This would provide a Supported Shelter model from 7pm to 7am 7 days a week capacity 90 people
- 2.14 Additional running costs between 105k 222k per year are applicable to both models. The estimated costs of running a year round night shelter for a maximum of 90 individuals would be between £500,000 and £600,000 per annum not including the costs of leasing or purchasing a building large enough to accommodate 90 people, maintenance, repairs and refurbishment to bring it to a useable standard
- 2.15 Beyond costings there are a number of potential risks and barriers to the setting up of a winter shelter for all rough sleepers which are detailed below:

Risk / Barrier:	Mitigation:
Accommodation:	
Officers in the city council have been searching for SWEP / Nightshelter venue for the last three years and have been unsuccessful in sourcing an appropriate building on anything more than a temporary basis.	Identify dedicated resource within the council to search for a building, negotiate lease terms and consult with the community. An estimate of £10,000.00 has been made for this resource and the community impact work detailed below.
New services being set up in the city for homeless people with complex needs have faced significant community opposition.	An impact assessment would need to be undertaken on any property identified to assess its suitability as a shelte and the possible impact on the community. Community consultation would need to take place prior to an agreement being signed on the premises.
Staffing:	
A dedicated staffing and management team would need to be recruited and an on call management system put in place. If there was an increase in use we may need to revise our predicted staffing above and recruit additional staff.	There are two options for the provision – the first is that a council employs an experienced service manager to recruit and train staff and volunteers and run the service or a competitive tender is undertaken for a provider with relevant experience to run the service and recruit and tra staff. This would need to have flexibility to increase staffing if that became necessary.
Service Capacity:	
The number of rough sleepers likely to access the service per night is unknown. However in the last month (from 24 March to 23 April 2020) BHCC accommodated 189 rough sleepers, this was during lockdown when travel restrictions were in place and is unlikely to reflect the full demand outside of lockdown.	We would need to ensure the identified venue had sufficient space to accommodate all rough sleepers safel (health & safety issues) and that staffing levels were sufficient to deal with the numbers accessing and an anticipated rise in numbers once the service is widely known about.
There is the potential for people to come in from neighbouring local authorities which do not provide a similar or any access to a Nightshelter. This is likely to have an impact on the number of rough sleepers in the provision.	We would need to ensure the identified venue had sufficient space to accommodate all rough sleepers safel and that staffing levels were sufficient to deal with the numbers accessing and an anticipated rise in numbers once the service is widely known about.
Possibility that over time the service reaches venue capacity and has to turn away rough sleepers.	SWEP service will continue to operate in severe weather for anyone unable to access the shelter.
If we attract people in from out of area but do not have capacity for the increased demand we could increase our overall number of rough sleepers in	We may need to look at increasing the size of the Street Outreach Service to meet increased demand; but this is not within current budget.
city and our Street Outreach Service and Reconnections services would be unable to work effectively with the increased demand for their service.	Additional Reconnection workers and/or Street Outreach Workers have an annual cost £44,880. The cost of relocating an individual varies but on average £150 per person to meet travel and resettlement costs is required.
Impact on the Community:	
There is the potential for people to come in from neighbouring local authorities to access a Nightshelter. This may impact on the number of rough sleepers on the streets of the city in the daytime and the	The rough sleeper team will continue to work with rough sleepers to find solutions to their rough sleeping.

Risk / Barrier:	Mitigation:
number of rough sleepers who remain in the city.	
There is a potential impact on the local community from large numbers of rough sleepers queueing outside the provision prior to opening and leaving in the morning. There is the potential for antisocial behaviour in the local area.	Community engagement prior to the service commencing and while it is in operation will be key. Prior to any proposed new service provision, the council would engage with the Police, Health and other statutory and non-statutory stakeholders. The service will need to maintain regular communication with Sussex Police and The Safer Communities Team.
Impact on Rough Sleeping:	
There is the potential for people to come in from neighbouring local authorities to access a winter Night Shelter. This may impact on the number of rough sleepers on the streets of the city in the daytime and the number of rough sleepers who remain on the streets once the winter provision has closed. This may place an unsustainable burden on our Street Outreach Service.	This will be difficult to mitigate against people from neighbouring authorities already come to Brighton & Hove. The street outreach team and staff within the enhanced shelter model will work to reconnect people back to their area of origin.
Those who access the shelter who do not have a local connection will gain a local connection if they remain in the city for 6 months putting additional pressure on local services.	The shelter could include dedicated reconnection and move on staff who will work with individuals to find sustainable solutions for their homelessness (see costings for the enhanced service). However, with guaranteed accommodation rough sleepers may choose not to engage with support to reconnect.
There is the potential for people to come in from neighbouring local authorities to access a winter Night shelter. This may affect the numbers of people with complex health needs needing access to health and mental health services, A&E and hospital.	We will consult with partners and ensure we are monitoring any impact on health services and other agencies.
Safety Considerations:	
Shelter provision offers a shared eating and sleeping space for multiple people.	An experienced and consistent staffing team will need to be employed to ensure a safe service for both users and staff.
Experience of Nightshelter provision has shown that the longer people share a small space the more issues arise with behaviour and interpersonal relationships. A shelter service which operates on an ongoing basis even with	Additional space in the venue will be needed to allow for separate sleeping spaces for vulnerable people or those who struggle in busy environments along with some quiet spaces.
experienced staff in place will see some issues with behaviour and relationships and an increased number of exclusions.	SWEP provision (provided in addition to the 7 day a week Nightshelter service) will continue to ensure that those who are excluded and those who do not wish to access a large shelter have somewhere to go in severe weather.

3. IMPACT OF NIGHTSHELTER PROVISION ON OUTCOMES FOR ROUGH SLEEPERS.

3.1 The final consideration for the provision of a Nightshelter for all rough sleepers is the need for evidence that this model will have a positive impact on the outcomes of rough sleepers. Evidence of the impact of Nightshelters on rough sleepers is very limited. The data provided by Homeless Impact in the link below concludes that Nightshelter provision does not have a positive outcome on health or substance misuse outcomes for rough sleepers.

https://www.homelessnessimpact.org/intervention/shelters#highlight

- 3.2 Our own anecdotal feedback about SWEP and Nightshelter provision in Brighton which shows that many of the most vulnerable rough sleepers choose not to access the provision available. Many rough sleepers do not feel comfortable in large shared sleeping environments and many of those who are most vulnerable such as women and those with mental health needs will not access even the safest and highly staffed service.
- 3.3 In Brighton & Hove we use shelters and hub provision as a time-limited intervention to quickly move someone off the streets and onwards into sustainable accommodation, preventing them becoming entrenched. Anecdotal feedback about shelters which offer accommodation to all without parameters for engagement and positive move on suggests that rough sleepers do not make progress towards recovery and improved health.

4. DIRECTION (a) – RESPONSE CONCLUSION

- 4.1 BHCC aims to ensure that no one has to sleep rough in the city and that rough sleepers are kept safe during in the winter months. We are working towards ending the need to rough sleep in the city.
- 4.2 Brighton & Hove City Council's Homelessness and Rough Sleeping Strategy places significant emphasis on the need to prevent people from becoming homeless and there is ongoing work to improve prevention and sustainment outcomes to reduce the numbers of people becoming street homeless.
- 4.3 Brighton & Hove City Council is exploring models of shelter provision being provided in other areas of the UK and is looking at evidence based practice to design services which gives rough sleepers the best opportunity to recover from homelessness. This includes the expansion of Housing First a model of support with a strong evidence base of positive outcomes for rough sleepers. At present, there is no identified budget or building for the provision of a Nightshelter for all rough sleepers.

5. BRIGHTON & HOVE CCG – RESPONSE TO DIRECTION (b) A HOMELESS HEALTHCARE HUB WITH ALL NECESSARY SERVICES UNDER ONE ROOF

5.1 B&H CCG is committed to ensure that the patient population (in particular those that are the most vulnerable) receive the right care, at the right time, in the right place.

- 5.2 The city continues to see high numbers of rough sleepers despite existing provision and strong links between health and social care to provide an integrated support offer. BHCCG and BHCC jointly commission a range of services aimed at reducing health inequalities and achieving positive outcomes that empower individuals to recover from homelessness and end the need to sleep rough.
- In responding to the Coroner's Direction, the CCG commissions as successful and integrated service model through Arch Health who provide integrated healthcare to homeless people in Brighton & Hove. In February 2017, Arch took over the Integrated Homeless Healthcare Hub contract, which includes a GP surgery, hospital in reach services, community health engagement, outreach to day centres and citywide leadership.
- 5.3 The GP surgery has around 1,400 registered patients, with the organisation employing 2.3 FTE GPs. The organisation adopts a very broad view of health and wellbeing in order to promote 'inclusion health' amongst the city's most deprived and vulnerable population. Therefore, works very closely with BHCC and the Voluntary and Community Sector to ensure that a streamlined service is available to meet the holistic needs of all homeless people.
- In 2019, Arch Care received an 'outstanding' rating from the Quality Commission (CQC) and continues to aim high with an ambition to become renowned for its expertise on the design and delivery of integrated care, research, training and innovation in homeless healthcare.
- 5.5 Homeless Healthcare services in the city are recognised as an exemplar model by NHSE/I with the potential to be replicated across the country. The CCG acknowledges the Coroner's direction to develop a homeless healthcare hub with all necessary services under one roof. We believe the current commissioned service could be enhanced to develop a more integrated service with the Local Authority. A Feasibility Report has been commissioned to develop a strategic definition and preparation of the brief on behalf of Arch Health CIC for the development of a new healthcare facility for homeless and disadvantaged people in Brighton.
- The Feasibility Report will consider options to further the integration of services, and acquire the necessary estate/space to expend the clinical offer and house various services under one roof. The proposals include access for homeless people of the following services;
 - Homeless mental health services (SPFT)
 - Integrated primary care team (SCFT)
 - Substance Misuse Services
 - Health engagement team (Justlife)
 - In addition, hosting visiting services such as Dentists, Dermatology, HepC support, Benefits Support and Midwives, amongst others.
- 5.7 The Feasibility Report was concluded in February 2020. Subsequently, the CCG has had to focus on the response to the Covid-19 crisis. As we enter the recovery period following the initial phase of Covid response, we will be reviewing the feasibility report to include learning from the Covid response in

relation to supporting the needs of the homeless population in Brighton and Hove.