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| **The Housing Board****Cambridgeshire | Peterborough | West Suffolk** Friday 4 March 2022, 10.00 to 12.00Held online via Microsoft TeamsMeetings will be recorded. These recordings will be kept, in the event any point of detail needs re-visiting whilst we are not producing full minutes. Please let us know at the beginning of the meeting of any objections to recording. |
| **Meeting notes** |
| **Present** | **Apologies** |
| * Dan Horn (DH), Fenland DC C*hair*
* Sue Beecroft (SB), Housing Board
* Jon Collen (JC), Huntingdonshire DC
* David Greening (DG), Cambridge City
* Sarah Hebblethwaite (SH), Peterborough
* Nigel Howlett (NH), CHS
* Joe Keegan (JK), Public Health
* Ali Manji (AM), Cross Keys Homes
 | * Karen Mayhew (KM), Homes for Cambridgeshire & Peterborough (H4C&P)
* Pamela Scott (PS), Huntingdonshire
* Heather Wood (HW), SCDC
 | * Azma Ahmad-Pearce, CPCA
* Sean Evans, Peterborough
* Elaine Field, South Cambs DC *notes*
* Julie Fletcher, South Cambs DC
* Iain Green, Public Health
* Michael Kelleher, Peterborough
* Anne Keogh, Peterborough
* Lee Price, West Suffolk
* Damian Roche, Accent Group
* Matthew Ryder, National Probation Service
* Cristina Strood, OPCC
 |
| **Previous Notes:** |
| Previous meeting notes are available at <https://cambridgeshireinsight.org.uk/housingboard/> **Please note:** On the date an item is first presented, there will be a note of the discussion (shaded grey). Relevant actions followed, are numbered and shaded white. In later sets of action notes, discussion notes are shortened or removed, to save paper. Action notes are updated and progressed at each meeting. Once all the actions on a topic are completed, they are all marked “done” and in the following set of action notes, are removed along with any remaining discussion note. So, each set of action notes circulated should cover all the Board’s actions, whether “still to do”, “doing” or “done”. Key to the table:* Grey shading = a brief note for context. Not full minutes. If more detail is needed, please contact elaine.field@scambs.gov.uk
* White numbered lines = actions. When action is complete and reported back to the following meeting, it and the notes are removed from the table.
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| **Next meeting:**  1 April 2022: 10.00 am to 12.00 noon |

| Action  | Agenda item | Lead  | To do | Doing | Done |
| --- | --- | --- | --- | --- | --- |
|  | **4 March 2022** |  |  |  |  |
|  | **Item 1: Update on local and national strategic work around substance misuse**The development of local action plan and linked outcomes framework. The new National Strategy. Funding which is becoming available. |  |  |  |  |
|  | * JK updated, came to Housing Board in September to update on the Dame Carol Black’s review on substance misuse treatment which had many recommendations, which government listened to, trying to implement via National Strategy in December and will keep Dame Carol Back on to advise. Try to expand services and strengthen/enhance them and need to work with all partners.
* JK discussed the document shared from Cambridgeshire and Peterborough Drug and Alcohol Delivery Board entitled New National Drugs Strategy 2021. The document entitled DRAFT Cambridgeshire and Peterborough‐Drugs and Alcohol Strategy (2022‐2027) and the document from the Office for Health Improvement & Disparities entitled Indicative planning materials for drug and alcohol treatment and recovery services 2022 to 2025.
* National Strategy, although focusses on drugs, the money that comes in future can be spent across drugs and alcohol issues. Government initially putting in funding for 3 years.
* Now working up proposals over the next 4 – 6 weeks engaging with Housing Board for a housing point of view.
* The group discussed input, have rough sleepers’ data, include some innovative ideas, could see if there are methods across the country which have produced better outcomes for rough sleepers, and to include work on alcohol. Crossover with Changing Futures work. Strong links with mental health services. Wisbech area was mentioned too, to include in pilot projects.
* Discussed rescuing settled tenancies which are in trouble due substance misuse or ASB, early intervention. Also impact of cuckooing, have a case of that currently in Wisbech.
* Always targeted at the extreme end but would we balance along spectrum of early prevention and treatments, what would the County Council’s approach be on that? Local Authorities could get data on what clients are sharing with us, for needs analysis. Will carry out a needs analysis in the next few months. Could look at problem solving groups and what information they have.
* Flexibility in modelling rehab, to include Housing staff there.
* An opportunity for a workforce development programme for non-specialist staff, online materials for housing teams to get trained up in what services are out there and briefing intervention training.
* SB mentioned Tom Tallen and work they are doing, particularly on interventions.
 |  |  |  |  |
|  | KM to share the New National Drugs Strategy 2021. document with RP’s, and gain feedback from those around use of funding. | KM | ✓ |  |  |
|  | Feed any available data in to Joe Keegan. | All | ✓ |  |  |
|  | JC will ask sub groups/community safety colleagues, if we can do some analysis on data and find out position on last couple of years about drug users coming through declaring drug or alcohol issues.  | JC | ✓ |  |  |
| 1.
 | JK could come back to Housing Board later to update, but to advise of any barriers or issues in the meantime. | JK | ✓ |  |  |
|  | **Item 2: Update on housing involvement in the new delirium pathway** |  |  |  |  |
|  | SB had attended meetings in the mental health service, regards work they are doing on a small cohort of people across Cambridgeshire and Peterborough regards delirium and are difficult for families to deal with, who might need help or interventions. A new pathway is being put together in a flow chart style, many partners involved, a test bed for the integrated care system coming in. SB mentioned at that meeting that if a person is going to hospital at an early stage, to get an assessment of their housing conditions, and needs when coming out. How is information shared safely. |  |  |  |  |
|  | SB will add the draft pathway to <https://cambridgeshireinsight.org.uk/housingboard/>  | SB | ✓ |  |  |
|  | **Item 3: Updates** |  |  |  |  |
|  | HRS re-commissioning and partner update |  |  |  |  |
|  | SB had shared an update from Lisa Sparks via email. Also, Lisa had shared a submission for the Rough Sleeper Initiative funding, round 5 (mentioned in update) so people can look at the County wide bid for housing first money, Peterborough and Fenland focussed. Any queries on that to lisa.sparks@cambridgeshire.gov.uk  |  |  |  |  |
|  | **Item 4: Planning for the Housing Board in 2022** |  |  |  |  |
|  | * **Four broad priorities;** new homes and communities, homes for wellbeing, existing homes, housing needs and homelessness.Also discussed:
* Net zero carbon, funding, new homes’ build standard.
* Affordability, not just rent but all other costs. Cost of living crisis for people that live in housing. Discussed at Sub-Regional HomeLink Management Board.
* Rent arrears figures analysis. Early intervention. Supplementing rents expectation, support where really needed, targeting resources, discussions on that, thinking creatively. Rethink some of the housing models we offer.
* Sharing best ways to get funding, different initiatives and various groups, Financial Capability Forum, etc.
* Health wellbeing. SB attends Mental Health Board and Mental Health Crisis Care meetings.
* Health and social care workers’ housing.
* Changing Futures. Think Communities.SB working on:
* Mental Health and Substance Misuse Toolkit, new Diamond Affordability Analysis, Supported Housing Schemes across Cambridgeshire and Peterborough.
 |  |  |  |  |
|  | Invite the Financial Capability Forum representatives to talk at Housing Board, where housing can help, as a starting point. | SB | ✓ |  |  |
| 1.
 | Would a dedicated web resource be useful? All RP’s and relevant Partners involved (like the making money count website). | NH | ✓ |  |  |
|  | SB to look at Net Zero Carbon and rising cost of living, etc, and see if these would fit into a fifth priority. | SB | ✓ |  |  |
|  | **Item 5: AOB** |  |  |  |  |
|  | None. |  |  |  |  |
|  | **4 February 2022** |  |  |  |  |
|  | **Item 1: Homes for Wellbeing:** Tuberculosis needs assessment, draft priorities and learning from recent experiences in PeterboroughEmmeline Watkins, Deputy Director of Public Health |  |  |  |  |
|  | Presented slides about TB. Needs assessment recommendations came to Housing Board January 2020, then Covid hit. In 2021 TB in Peterborough escalated, especially in the homeless community. Issues the same as in TB needs assessment so needed to move forward. Cambs and Peterborough TB network set up, which SB attends, urgent work from that happening around TB to ensure cluster in Peterborough and workplace capacity there can be addressed, and other TB screening for asylum seekers happened. Priorities: Clear pathway for TB patients with complex needs and no recourse to public funds, especially housing. High priority for CCG. Tiya is pulling together an evidence base on what works well elsewhere, can take to CCG including what mechanism to implement in Cambridgeshire and Peterborough, via an agreed process.Prioritising workforce capacity, TB leadership and care services across system. Health Protection Steering Group meets on a 6 weekly basis, TB proposal would need to go through that Board and would need Housing teams’ support there. Tiya discussed the current ad hoc process. Complexity is in cases of no recourse to public funds. Luton Council coordinates the process when NOT NRPF, where NRPF it would be CCG. SE advised Peterborough had taken on the Luton model, and will share it with Board members. In London they have a pooled resource, managed by a Board too. Another example from 2016, hospital in London carried out a project with the Local Authority who funded TB cases. Currently no funding for people with no recourse to public funds. Where does NRPF responsibility sit? JC advised that Homelessness Group and HDC are building links into Jenny Goodes’ team at Cambs County, part of safeguarding, her team considers what County responsibility is for people with no recourse. Districts not able to assist those under housing regulation, but can assist them in other ways. Peterborough and Fenland possibly have more issues.Tiya is approaching voluntary organisations too, and will revisit the social care side if they will support. DH mentioned the National Assistance Act in relation to someone who was street homeless in Fenland.SE added, been working with Public Health due to the outbreak in Peterborough. Pathway at Peterborough similar to Luton, taken approach of cannot provide access to people eligible for housing assistance, but have acted as a broker for them. In our interest regards public health, agree to fund accommodation and work on a reconnection. Provided accommodation for 8 or 9 TB people, and had Public Health fund the costs. Emmeline highlighted the need to sort out where funding comes from, there is a complexity of people, and need to support those successfully. Importance of stabilising the individuals to take a treatment is critical, and housing is a key part of that. Seeing multi drug resistant cases in Peterborough therefore outreach for work and stabilising work is important. DH added, could have flow charts for NRPF process and non NRPF process. Also, that some RPs may have experience. NH and KM will ascertain any good practice from RPs, KM will target larger RP’s. DR will ask Accent.Need really clear Housing voice, on what will or will not work, in terms of process in place and who is funding what. Take to Health Protection Steering Group first, then would go to many other Boards regards process. Need examples of cases of where this treatment has worked, or where it completely falls apart and shows issue trying to address. Call out to all partners to find cases. At early stages of *Changing Futures* project where process of learning could be applied. Tiya shared an example voluntary service who support homelessness and TB (patient should not have active TB): [Olallo House | SJOG Homeless and Modern Day Slavery Services | SJOG Hospitaller Services (sjog-olallo.uk)](http://sjog-olallo.uk/olallo-house.php) |  |  |  |  |
| 1.
 | Any examples of a TB process working well elsewhere, best practice, let Emmeline.Watkins@peterborough.gov.uk andTiya.Balaji@cambridgeshire.gov.uk know.  | All |  |  | ✓ |
|  | NH and KM will ascertain any good practice in handling TB from RPs, KM will target larger RP’s. DR will ask Accent. | NH/KM/DR | ✓ |  |  |
|  | SE to share Luton model on dealing with TB. **SH** **updated in March meeting** that Peterborough are accommodating clients with TB, tried various models. Decided to spot purchase self-contained B&B. | SE | ✓ |  |  |
|  | All to find case examples of where TB process has worked, and where it has not worked. | All | ✓ |  |  |
|  | Sue could look at Institute of Housing and GLF for any pointers. FOUND NONE | SB |  |  | ✓ |
|  | **Item 2: Suicide Prevention Strategy** link in suicide prevention work to services working with vulnerable people, such as housing, debt, employment: Joseph Davies, Suicide Prevention Manager for Cambridgeshire and Peterborough |  |  |  |  |
|  | Slides on Joint Peterborough and Cambridge Suicide Prevention Strategy up to 2025. Combine efforts working across mental health system to produce one strategy. Has worked with many partners.Priority areas over course of strategy. Want to ensure every person in the County has the right care and support, to ensure they do not die by suicide. Have to engage entire communities. Looking at mental health system, engaging with communities and individuals.Working with Suicide Strategy Implementation Group, collaboration within services and joined up working, looking at not only Mental Health Service but wider health services where people interact with the community. Where referrals are happening and transfers of care in place, and that these are consistent. Information sharing, develop a learning culture and using data available to us, continually evolving. Co-production with those who do have experience (people with history of those thoughts, their carers or those bereaved) ensuring their voices are heard in writing the strategy. Looked at various existing models.Joseph highlighted priority areas. Two way communication is lacking, we need to hear Housing Board and others’ information therefore looking at bringing in representatives from different services into the Suicide Prevention Group, does Housing Board have any people who could sit on that? Had some consultations and surveys on lived experience, will set up a lived experience panel. Have written draft of strategy and with Strategy Implementation Group and other groups. Working on collaborative joint action plan and establish co production procedures. Looking to publish around April. Joseph can share high level summary of strategy.DG updated that as part of Cambridge City Council’s operational plan, have objective to improve their working with mental health services, much feedback from teams for consideration e.g., under resourced MH services, lack of protection focus and patchy liaison with teams therefore keen to engage with Joseph. Interested in commissioning side of things. DG had shared his feedback with Lisa Sparks and Sarah Bye at County. Joseph added that they are also looking at supporting front line workers. DR added, be interesting to test within teams what they would do in certain circumstances, perhaps lack of knowledge in terms of what is out there regards support. Joseph advised that a large part of the strategy and suicide prevention programme running over next few years is training, for health care professionals, and stop suicide training is open to community services who work with vulnerable people, 3 hour course to give foundational awareness of mental health and suicide, different resources available. Looking to establish linking up those who have had training so can be on same page to enable consistency, particularly when it comes to referrals. SB has just published mental health substance misuse and housing toolkit; it does not talk about suicide but could add to that as Joseph’s work develops.LP mentioned West Suffolk would be interested in staff training and everyone working together, and adding to the toolkit, supporting staff at delivery of front line services. Perhaps add links to training videos.Next steps:Need to be aware if suicide situations are related to homelessness. Need to share learning of what they have been accessing, mental health, drug services? At early stage of establishing that, can have those conversations in future. Many teams would benefit from training, Joseph to send to everyone on Housing Board the training details, and any information marketing, we could send out messages to all network community volunteers, and network of services.  |  |  |  |  |
|  | Can Housing Board put forward someone to sit on that Suicide Prevention Group? | All | ✓ |  |  |
|  | Joseph can share high level summary of strategy. | Joseph D | ✓ |  |  |
|  | Joseph Davies to send Housing Board details of suicide prevention training:Please email joseph.davies@cambridgeshire.gov.uk if interested | Joseph D / All | ✓ |  |  |
|  | DH to contact Joseph D about a specific case in Fenland. | DH |  | ✓ |  |
|  | Add suicide prevention info to the Hosing, MH and SA toolkit once strategy developed further / agreed. | SB |  | ✓ |  |
|  | Link relevant suicide prevention info into Changing Futures plans. | JD/SB |  | ✓ |  |
|  | **Item 3: Launch of Toolkit** |  |  |  |  |
|  | Email sent out today updating on the mental health substance misuse and housing toolkit (Mental Capacity Act element part changed). SB thanked everyone, and particularly thank you to Dan Pearce.  |  |  |  |  |
|  | **Item 4: Our “annual review” meeting in March** thinking about how we’d like to approach the meeting |  |  |  |  |
|  | All to look at Housing Board meeting ToR, and the accompanying supplement (sent out with this meeting’s papers), to update. | All | ✓ |  |  |
|  | **Item 5: Updates** |  |  |  |  |
|  | Prison leavers / prison leavers with covid |  |  |  |  |
|  | MR would like advice on people leaving prison who are Covid positive and need housing, need to establish a pathway for people who are having to isolate on going back into the community. MR mentioned a release, a couple of days ago, on this. Potential risk and implications on public protection and rehabilitation. JC advised, hopefully those people would already have had a referral done to a Housing Authority, discussion already had around what is happening at point of release. Then the Housing Authority would have to look at temporary emergency accommodation, self-contained community accommodation or whether would be appropriate, would vary in terms of what Housing Authority has available. CAS only kicks in if the LA cannot help when the person is released from prison. SE gave example of Peterborough caught in crossfire, an outbreak at Peterborough prison, and made available units for those Covid positive. After 2 months no referrals made therefore returned properties back to use, following that another case became visible. Covid mentioned in Homelessness Code of Guidance as priority need. |  |  |  |  |
|  | Keep under review as part of the Protocol work i.e., are there housing issues not being met? As part of regular review meetings | MR/JC |  | ✓ |  |
|  | Covid update |  |  |  |  |
|  | NH advised that at CHS, care services are at their most difficult time of the Covid pandemic. Residents or staff affected, and staff shortages in maintaining services. DH mentioned Fenland the same, refuse collection stretched with a number of Covid cases.  |  |  |  |  |
|  | DA accommodation update |  |  |  |  |
|  | Have been providing Domestic Abuse and Sexual Violence Board statistics on domestic abuse, no feedback on how they are using the stats, might be useful for Sub Regional Homelessness Group looking at where we are, over the next couple of meetings, to see what they think is coming out of them. HW advised, can do that and bring back to Housing Board to ascertain if can help. Regards DA the DAHA have updated and are relaunching their accreditation standards which builds on the current standards, to be launched on 1 March.  |  |  |  |  |
|  | The group discussed DASV Board next Tuesday 10-12, DR down as sub and asked if he can attend, HW unable to. | HW/DR |  |  | ✓ |
|  | **Item 6: AOB** |  |  |  |  |
|  | SB advised that Chris Hill works for the new integrated care system – a new area looking at workforce issues. Discussed different issues in relation to housing costs particularly for people who are employed by agencies, graduates, people trying to enter the care system (low end wages). SE advised that Wendi Ogle-Welbourn has now retired from Peterborough City Council, the new CEO is Matthew Gladstone. Steve Cox taken on secondment at the CPCA, and the Director of Place is currently Adrian Chapman. |  |  |  |  |
|  | **14 January 2022** |  |  |  |  |
|  | **Item 1: Needs Assessment for learning disabilities, autism, mental health issues, and physical disabilities (under 65s)** |  |  |  |  |
| 1.
 | Developed steering group for project work, anyone wants to be involved inform Fiona.Smitton@cambridgeshire.gov.uk  | All |  |  | ✓ |
|  | Draft document back to Housing Board in June, add to the agenda. | EF |  | ✓ |  |
|  | FS arranged a workshop on supported living contracts, agreed one of NH’s team, CHS to attend, NH to pass details to FS and GF. | NH | ✓ |  |  |
|  | SB to contact FS and GF regards work carried out on housing provider and care housing. Got meeting set up. | SB |  |  | ✓ |
|  | **Item 2: Progress on Hoarding** |  |  |  |  |
|  | Could also identify Hoarding champions in organisations to share good practice, please continue to send contacts to SB. | All |  |  | **✓** |
|  | **Item 3: Changing Futures** |  |  |  |  |
|  | SB to send a short note giving more on the inquiry group. Leaders Network event in February. | SB | **✓** |  |  |
|  | **Item 4: GTANA** |  |  |  |  |
|  | Could bring something back to Housing Board in March, add to agenda. | JF/EF |  |  | **✓** |
|  | **Item 5: Updates** |  |  |  |  |
|  | DG to provide the model used by Cambridge Access Surgery for the delivery of 70 booster vaccinations to vulnerable people, to DH. Anything people want to know contact DG. | All/DG | **✓** |  |  |
|  | **Item 6: AOB** |  |  |  |  |
|  | Invite TB team to a future meeting, add to agenda. Sue to circulate the TB paper and suggested priorities | SB/EF |  |  | **✓** |
|  | PS to share with DH Hunts’ interim Policy Statement on First Homes/Shared Ownership. | PS |  |  | **✓** |
|  | **3 December 2021** |  |  |  |  |
|  | **Item 2: Update on Hardship Metrics work / future plan (Damian Roche)** |  |  |  |  |
|  | DR will get feedback from providers on the quarterly data. | DR |  |  | ✓ |
|  | HW and DR will discuss good practice in relation to affordable homes.  | DR/HW |  | ✓ |  |
|  | SB will add good practice to Cambs Insight webpage when available, and others add to that, to encourage good practice sharing. JC advised, more looking at data, and decide if there are organisations we would like to speak to on practice, not a league table. | SB |  | ✓ |  |
|  | Can South Cambs and Cambridge share their position on rent settlement? On affordability discussions.  | SB/JF/HRCity & SCDC | ✓ |  |  |
|  | **5 November 2021** |  |  |  |  |
|  | **Item 2: Homelessness and plans to end rough sleeping** |  |  |  |  |
|  | Peterborough numbers to be contributed and added in, JC to recirculate report once complete | SE/JC/HW | ✓ |  |  |
|  | H’less strategy group will collect data and review 6-monthly, at detailed level. Will continue to share differences, trends, good practice etc., and bring to Housing Board each November for annual homelessness update. To do this will need districts to share their homelessness data ahead of the MHCLG deadlines, so no 6-month data lag. | JC/HW | ✓ |  |  |
| 1.
 | EF to add Homelessness and Rough Sleepers to Nov 2022 agenda. | EF  |  |  | ✓ |
|  | Want to investigate social housing evictions further, including reasons. | JC/HW | ✓ |  |  |
|  | Sub-reg h’less group to: * look at different methods of early prevention. Can we increase prevention? Appeal to all partners to get involved.
* Investigate voluntary *duty to refer* mentioned (Exeter) – could we set this up?
* Review if there is an overall lack of housing or is a specific type of housing lacking?
* Consider action needed to take short notice bidding opportunities. Have “off the shelf” data / principles ready?
* Consider setting up a local toolkit or checklist on eviction prevention –LAs may have things to offer RPs to help.
* Talk with criminal justice agencies (MR) about where ‘their’ customers become homeless / risk of eviction etc – could we work better together with criminal justice partners?
* Sub-reg h’less group to add any / all / relevant from this discussion to their action plan
 | JC/HW (as h’less grp links) | ✓ |  |  |
|  | Each district to review whether RPs are getting involved in e.g., ASB problem solving groups, community safety teams / panels, tenants at risk panel – RPs should be included / attending. | All LAs | ✓ |  |  |
| 1.
 | Clarion is doing an eviction related pilot project, see if can bring info to housing board – **invite to a future meeting** | EF |  | ✓ |  |
|  | **Item 6: Updates: DASV accommodation** |  |  |  |  |
|  | DG will be presenting some DA and homelessness stats to DASV board, with help from homelessness leads. Asked all to feedback on his data – is it clear and consistent? Does it cover what we think DASV board needed? Please feedback to DG. | H’less leads | ✓ |  |  |
|  | DG will feedback the upshot to Housing Board once completed, possible review every 6 months? (T BC). | DG | ✓ |  |  |
|  | **AOB**  |  |  |  |  |
|  | HomeLink delays? |  |  |  |  |
|  | Districts encourage NH (and others) to get in touch if this is the case – HW @SCDC, DG @Cambridge, JC @HDC, DH @FDC. | All | ✓ |  |  |
|  | Broadband project |  |  |  |  |
|  | Will update Housing Board on progress as the project grows and widens its coverage, learning from Cambridge. | NH/DG/SB |  | ✓ |  |
|  | Housing delivery numbers |  |  |  |  |
| 1.
 | Keep working on County to get the final approved numbers, report back to housing board.  | SB | ✓ |  |  |
|  | **1 October 2021** |  |  |  |  |
|  | **Item 3: Overview of Prof Dame Carol Black independent drugs review** |  |  |  |  |
| 1.
 | JK to bring back to Housing Board draft Local Strategy Review, to see how we can support, add to agenda at a good moment. | JK/EF | ✓ |  |  |
|  | **2 July 2021** |  |  |  |  |
|  | **Item 2: How *Caring Together* supports Carers, Karen Leete** |  |  |  |  |
|  | Await feedback from Karen Leete regards questions from Housing Board which we will act upon.  | KL | ✓ |  |  |