



healthwatch Bristol

HOMELESS SERVICES IN BRISTOL

Homelessness is a major issue in the United Kingdom and remains one of the most complex social issues to find a solution for. Healthwatch Bristol collaborated with five homelessness support services to hear the views, concerns and experiences of their service users and how they access health and social care services.

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1. INTRODUCTION

In July 2015 Healthwatch Bristol collaborated with five homelessness support service providers on a three month long project. The aim of the project was to compile a report which focused on the accessibility of health and social care services in Bristol for homeless people and their experiences.

Healthwatch Bristol has analysed the issues and concerns raised by those individuals and homelessness support service providers during the engagement and data collection process and identified the key themes and trends. These are detailed by service provider where there is a significant number, or themed by service type in section four.

The five services that Healthwatch Bristol collaborated with were:

- The Salvation Army (Lawrence Hill)
- Riverside Hostel
- The Methodist Centre
- The Crisis Centre Ministries – Wild Goose
- The Compass Centre (St Mungos)

Three engagement sessions were carried out at each service to provide time for individuals to have a voice and to develop the confidence to share their experiences and give feedback on health and social care services that they have accessed for support.

2. CONTEXT

2.1 Defining homelessness:

Defining homelessness is complex. Shelter define homelessness as anyone who lives in unsuitable housing, does not have rights to stay where they are, or they are sleeping rough (www.england.shelter.org.uk). Homeless Link suggest how homelessness can happen to anyone at any time and in their Annual Review 2015 (www.homeless.org.uk) highlights that one in ten people in England say they have personally experienced homelessness. With these figures the complexity surrounding cause and subsequent needs of those affected, highlights the need for support to be provided in many forms.

2.2 The picture

National

Homelessness in the United Kingdom is increasing at its highest rate. This statement is reiterated in the Department for Communities and Local Government (DCLG) statistical data. According to the data, it identifies that the rate of homelessness in England is reflecting a significant increase in comparison to the rest of the United Kingdom.

The DCLG statistical data indicates that currently there are over 81,800 people in the United Kingdom who are considered as homeless; in 2009/2010 62,402 people were classified as homeless- a significant increase of 33% within a five year period.

Locally (Bristol)

Bristol is considered as one of the most multicultural and environmentally friendly cities in the South West. The population of Bristol is around 442,500 people.

The statutory homelessness figures have also shown a dramatic increase in the number of households considered as homeless. The local authority's current figures on the number of homeless households in Bristol is at 359.

While these figures are based on statistical data evidence gathered by the local authorities there are still issues of hidden homelessness that remain untold.

Throughout the engagement work Healthwatch has identified that most homelessness support services in Bristol are provided by charitable organisations. As with many charitable organisations, their success depends on sustainability. In most cases service providers, such as the Methodist Centre and the Crisis Centre Ministries, who provides a hot meal and drop in service, which includes access to shower facilities and clean clothing, do not receive any form of funding from the local authority. These organisations rely heavily on the donations received from other charitable organisation and religious bodies, to fund the services that they provide to one of the most social excluded group in our society. Also the major cuts to the welfare budgets has impacted significantly on their sustainability and survival.

2.3 Policies and strategies

Bristol's Preventing Homelessness Strategy (PHS) 2013-2018 was developed in partnership with Bristol City Council, the Preventing Homelessness Board and consultation with a wide range of stakeholders. The strategy looks to reduce homelessness in the city and has a secondary outcome of promoting good physical health, mental health, psychological wellbeing, healthy relationships and healthy lifestyles. To achieve this the strategy identifies six key priorities:

1. Minimise homelessness through early intervention by understanding and tackling the (often complex) reasons behind it, with special emphasis on young people.
2. Early Bird - consistency of approach, timely advice and earlier referrals from all agencies, even ones not always involved with homelessness.
3. Improve: access to, the amount of, stability and quality of the Private Rented Sector (PRS) using homelessness prevention fund, myth busting and encouraging new build, leasing, licensing and accreditation.
4. Continue to assertively tackle rough sleeping; target those clients with complex, multiple needs.
5. Make more direct links between homelessness and the housing, health and wider policy agenda.
6. Ensure the right support is in place and that those ready to do so move-on promptly and reduce repeat homelessness.

To access the full report visit: <http://bit.ly/1QGc3Ms>

The Bristol Housing Strategy vision for 2015 to 2020 also highlights homelessness as an issue and states that access to housing is a “springboard to achieve a high quality of life and create the opportunity for people to thrive in mixed communities of their choice”. However, housing supply and mix is only one aspect of homelessness and the way forward needs more consideration. The Strategy can be accessed here: <http://bit.ly/1SGAVFR>

Healthwatch agree the key to tackling homelessness is to implement policies that will not only address issues such as access but also the affordability and the appropriateness of housing provisions. Although consideration to provide financial, mental, cognitive and behavioural support for individuals to be able to self-manage personal issues or physical challenges is also required. A package

of measures to help tackle homelessness has been announced by the government which should help address this: <http://bit.ly/1P6v7mN>

2.4 Health and social care implications

Being homeless can have a critical impact on a person's health. Healthwatch understands that conditions among people who are homeless are frequently co-occurring, with a complex mix of severe physical, psychiatric, substance use and social problems. High stress, unhealthy and dangerous environments, and an inability to control food intake means they are at greater risk of a wide range of health conditions and often result in more frequent visits to accident and emergency and longer stays in hospital than the average person.

The Healthwatch England Special Inquiry report entitled: Safely Home, on hospital discharge has a focus on homelessness and describes it as “a persistent and complex social problem”. They identify five key issues faced by homeless people:

- Poor coordination of services
- Poor information about services
- Stigma faced by those homeless
- Feeling excluded from decision making
- Frequency of readmissions

These points will be considered in the analysis of the data collected from the engagement sessions. The full report can be sourced here: <http://bit.ly/1HLKdKN>

3. What we did

Healthwatch Bristol engaged with five homeless services in Bristol and a total of 126 comments were received.

The five services that Healthwatch Bristol consulted with were:

- The Salvation Army (Lawrence Hill)
- Riverside Hostel
- The Methodist Centre
- The Crisis Centre Ministries – Wild Goose

- The Compass Centre (St Mungos)

After discussion with the services it was decided that Healthwatch Bristol would attend the drop in sessions provided by the homeless services to informally talk with those in attendance to gather feedback. Healthwatch visited each service three times with the exception of the Methodist centre, which was visited only once, and received feedback on 40 health and social care services.

The general theme for the engagement sessions were about the health and social care services that homeless people access. It is acknowledged that by engaging with those people who attend the services Healthwatch Bristol will not have collected views from potentially those most vulnerable homeless people who do not engage with any support services.

3.1 Equalities Data

This section will look at all those engaged with in relation to the equality strands of sex, age, disability and ethnic group.

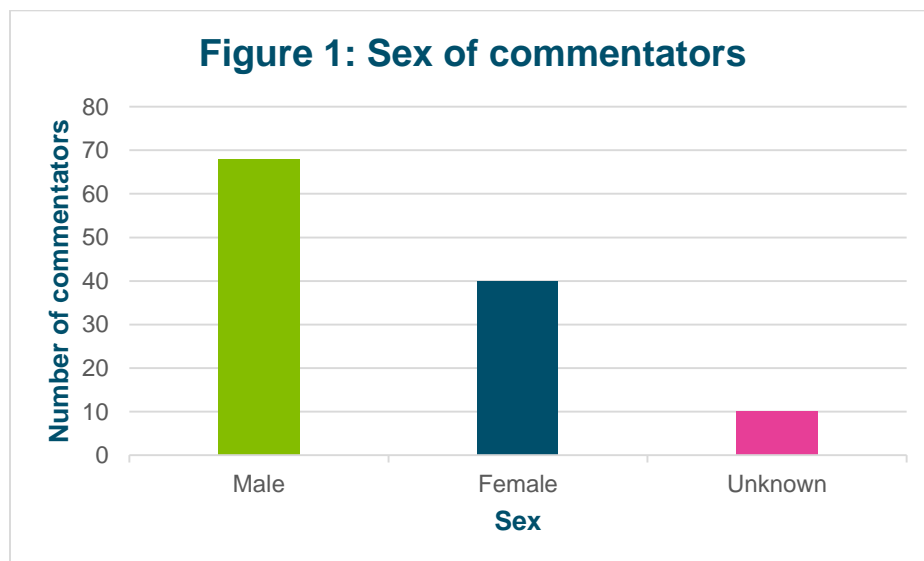


Figure 2: Age range of commentators

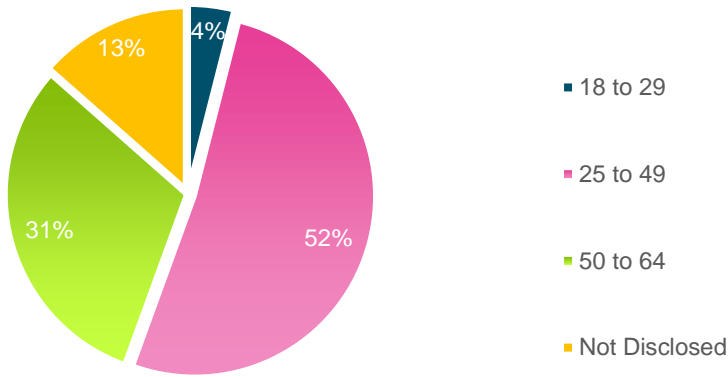


Figure 3: Disability data

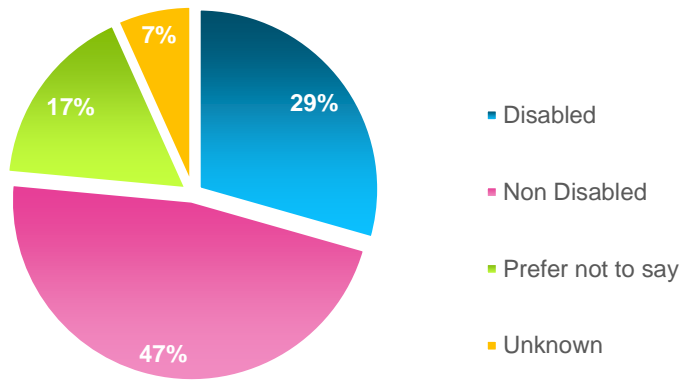
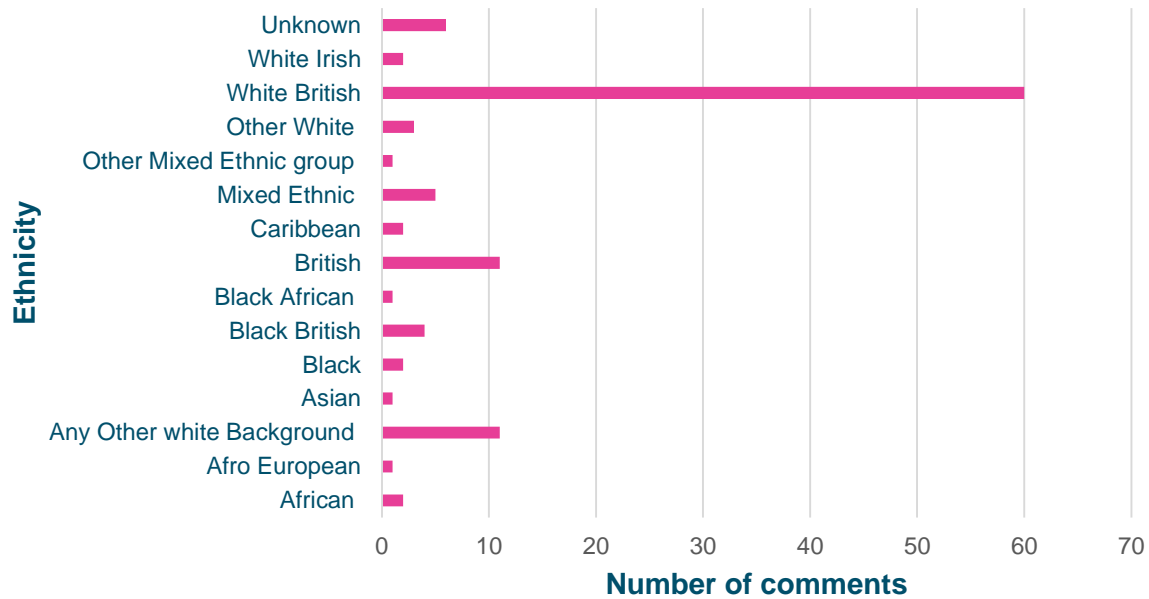


Figure 4: Commentators ethnic group



4. You said – Data analysis

In total 126 comments were collected from the engagement sessions. Generally the feedback was positive and the main themes from those comments were:

- **Access to information:** Difficulties accessing services and information about treatment.
- **Diagnosis or screening:** Difficulties in getting a diagnosis or poor follow ups from initial consultations with GP.
- **Language / communication needs:** Limited access to translation services by individuals whose first language is not English.
- **Support:** Mixed experiences of getting referrals to other services when individuals are identified as having complex needs. For example, dual diagnosis, mental health issues with associated substance misuse or drug addiction problems.
- **Mobility:** Individuals with mobility issues find it difficult to access homeless services which are not centrally located and have to travel or walk long distances to access homeless services.
- **GP Registration:** The issue of not having any fix abode, has created various barriers for individuals that are deemed homeless, as they are not able to get registered at their local GP practices.

Due to the number of comments involved, feedback has been presented in themes with example comments, a document with the all the comments received in full is available on request. The first four graphs provide an overview of all the comments. The five services that received the most comments are detailed next, and were:

- Compass Health
- Lawrence Hill Health Centre
- Bristol Methodist Centre
- Charlotte Keel Health Centre
- The Crisis Centre Ministries – Wild Goose

The remaining feedback is then analysed by service type, such as hospital services and primary care with key themes and example comments.

4.1 Overview of feedback received

Figure 5: Comments received from engagement sessions

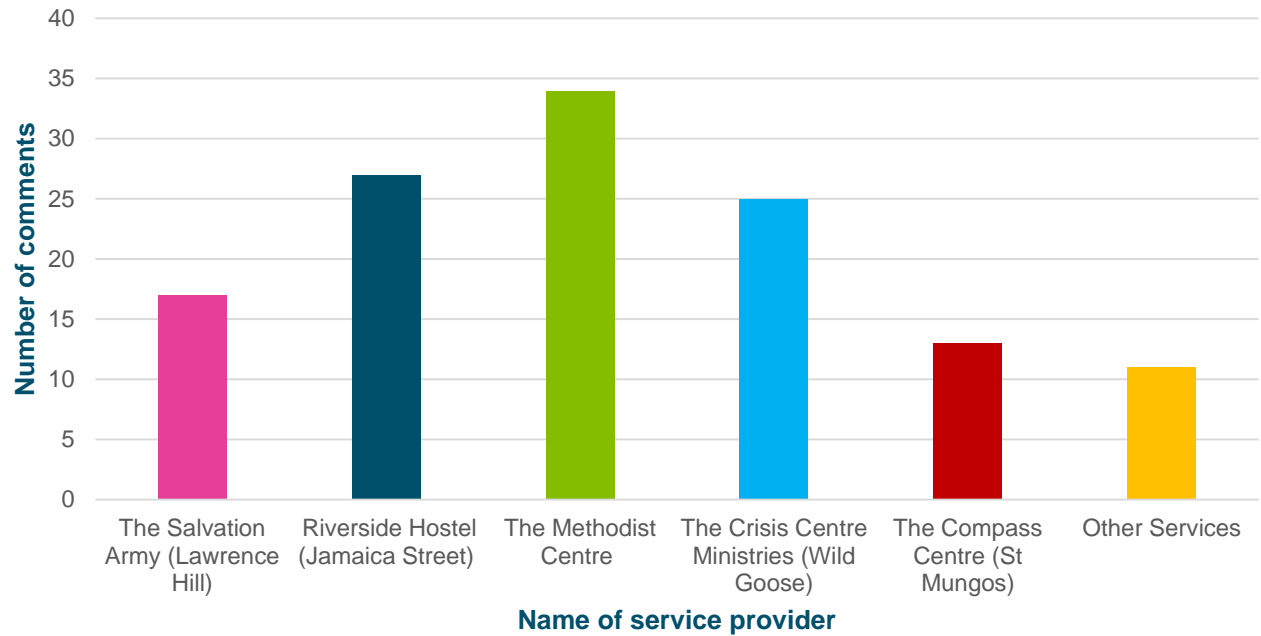


Figure 6: Overall sentiment of comments

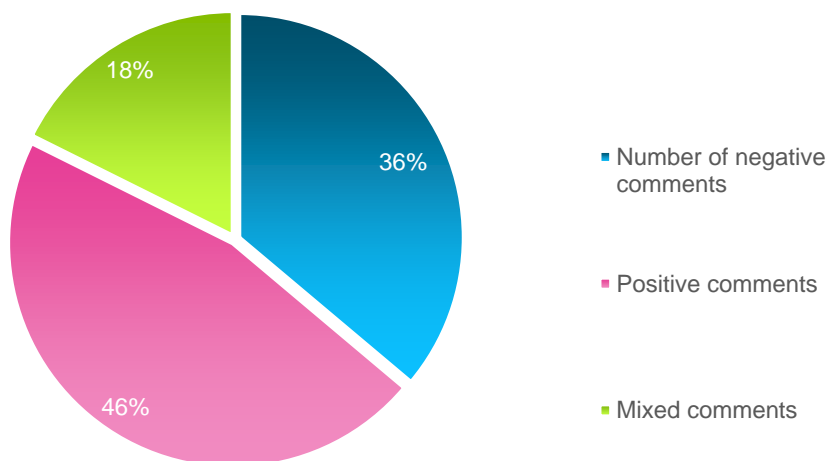


Figure 7: Services commented on

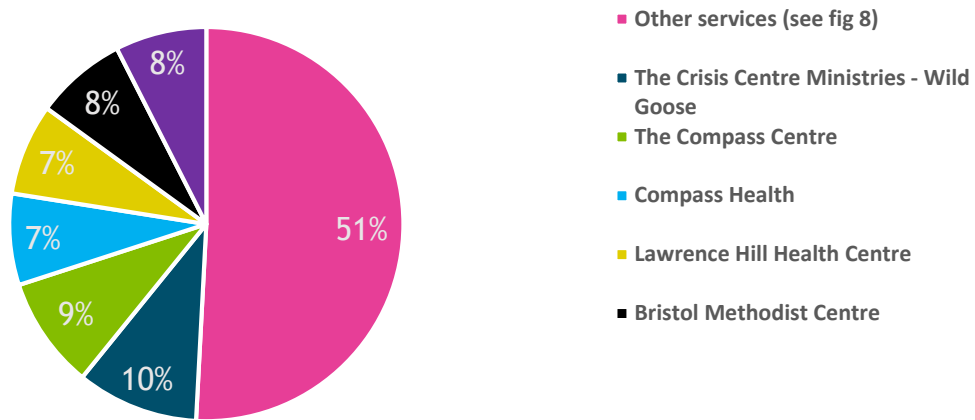
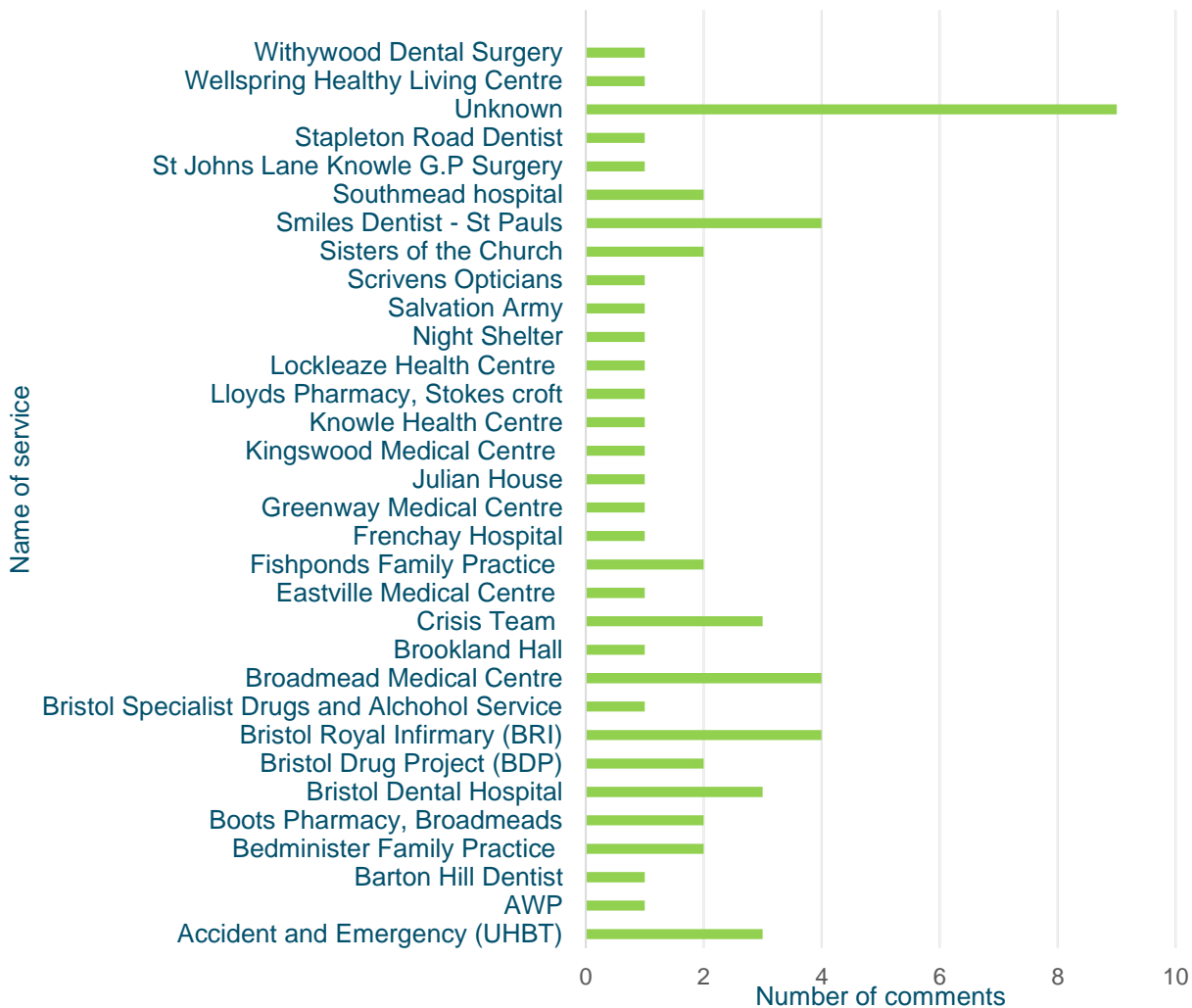


Figure 8: Other services named



4.2 Feedback in relation to the main services commented on

The Compass Centre

11 comments received.



The Compass Centre homeless services are currently provided by St Mungos. The themes analysed from the feedback, were:

- i. Staffing in relation to staff attitudes, with the majority of feedback speaking about helpful, friendly and a valued staff team.
- ii. Quality in relation to those feeling like they are treated with dignity and respect.
- iii. Meeting the needs of individuals and the facilities offered were commented on positively.

Example of feedback received: Commentator stated they are very pleased with the services they received at the Compass Centre. The commentator identified services such as free access to hot shower facilities and the availability of hot food were very good services for homeless people in Bristol.

The commentator reports that the Compass Centre is good, with helpful staff, adequate food service, a shower and laundry service. Bristol Drug Project had a good availability of appointments but the commentator was unable to get a detox from alcohol abuse due to being homeless.

Commentator informed Healthwatch that they are happy with the service received at the Compass Centre. It was their first visit to the centre and they were very impressed with the service they received. The commentator further stated that the staff were very helpful at the centre.

Compass Health

9 comments received.

1 Negative



3 Mixed



5 positive

Compass Health currently offer Bristol's homeless health services and generally it was felt that it offers a good quality service. The themes analysed from the feedback focusing on the Compass Health, were:

- i. Patient Pathways: dissatisfaction gaining support in accessing other services, information and advice.
- ii. Quality: commentators reported mixed feelings on whether they were treated with dignity and respect.

Example of feedback received: Commentator informed Healthwatch Bristol of the good services received from the Compass Health Centre GP. The commentator further informed Healthwatch Bristol that they were unable to get registered with a GP without having any fixed abode. The commentator also stated that they were unable to get a referral to LIFT therapy.

Commentator informed Healthwatch Bristol of the poor attitudes of staff at the Compass Health Centre. The commentator further highlighted that the way the centre staff speak with individuals who access the services are rude and belittling.

Crisis Centre Ministries- Wild Goose

12 comments received.

4 Negative



3 Mixed



5 Positive

The themes analysed from the feedback focusing on the Wild Goose were:

- i. Quality in relation to the services and food provided. Some commentators felt there was a good quality support network with access to hot foods and drinks while others felt dissatisfied.
- ii. Staffing in relation to staff attitudes, which were again mixed.

iii. Surroundings and safety in terms mixed reports of the facilities and accessing illegal drugs.

Example of feedback received: Commentator stated that the environment is not safe at the Wild Goose in terms of the type people who access the service as they feel it is easier to get into trouble or access to drugs.

Commentator highlighted their displeasure of the services received from staff members at the Wild Goose drop in. The commentator further reported on the quality of the food and stated that the food was old.

Commentator highlighted their concern in relation to the lack of homeless services in the South of the city, they had to walk from Withywood to Easton to access a soup kitchen for homeless people. The commentator further stated that the services provided by the Wild Goose drop in centre are very good, the food is nice and the environment is clean.

Lawrence Hill Health Centre

9 comments received.



The themes analysed with positive and negative feedback focusing on Lawrence Hill Health Centre were:

- i. Access to services in relation to appointment booking, waiting times and same day appointments.
- ii. Patient pathways in relation diagnostics and referrals.
- iii. Surroundings of the service and whether the service met the needs of the individual.

Example of feedback received: Commentator reported the good services provided by their GP. The commentator highlighted that the surgery has a good appointment system, staff are very helpful and the doctors listen to their health issues.

Commentator reported that they were not feeling well and needed to see their GP, after several appointments and blood tests, their GP still was unable to identify or diagnosed what was wrong. It has been several weeks since their

initial appointment and the commentator is still unwell without, they feel, any hope of a diagnosis, which has caused them to lose faith in the system.

Commentator informed Healthwatch of their experience at their GP surgery and felt that the way they were treated was very belittling. The commentator highlighted that they had a mental health issue, which was not taken into consideration in terms of their treatment plan, as they were seen by different professionals on each visit and felt that there was no continuity or development of a professional relation between the doctor and patient. The commentator also highlighted that prior to a diagnosis they had to wait a long time for an appointment because they had to wait for their files to be transferred from one surgery to another, while their mental health crisis worsened.

Bristol Methodist Centre

9 comments received.



The themes analysed from the feedback focusing on Bristol Methodist Centre were:

- i. Quality in relation to the services and food provided. Generally the comments were positive.
- ii. Staffing in relation to staff attitudes, which feedback as friendly, helpful and supportive.
- iii. Surroundings in terms of the centre being clean and safe.

Example of feedback received: Commentators were very positive about the service, commending the food, facilities and staff.

Commentator informed Healthwatch Bristol of the good services provided at the Methodist Centre. The commentator stated that they are able to have a shower at the Methodist Centre without having to have an appointment which they need at the Compass Centre. The commentator further stated that the staff are very polite and helpful, and the food provided at the centre is very healthy.

Commentator stated that they are happy to access the Methodist Centre as the environment is safe and the staff are very friendly. The commentator highlighted that they are provided with food and clothing, and if they needed to have a shower they can use the shower facilities provided. The commentator also stated that they do not put their religious views on the service users even though they are a religious organisation. However, the commentator would like to see more homelessness services providing breakfast services.

Riverside Homeless Hostel

9 comments received.



The themes analysed with positive and negative feedback focusing on Riverside Homeless Hostel were:

- i. Staffing in relation to staff levels and attitudes, which were supportive.
- ii. Quality in relation to the services and food provided.
- iii. Surroundings in terms of the hostel being clean and safe.
- iv. Access to information and services.

Example of feedback received: Commentator complained about poor access to good quality services and information. The commentator also felt they were not listened to by staff.

Commentator described the quality of services at the Riverside Hostel as poor, they further highlighted that lack of support from support workers and access to information and services.

Commentator felt that some supporting staff at the Riverside Hostel were good while other were bad. The hostel was generally clean and they felt safe.

Charlotte Keel Health Centre

6 comments received.



The themes analysed with positive and negative feedback focusing on Charlotte Keel Health Centre were:

- i. Access to services in relation to appointment booking, waiting times and same day appointments, comments were generally positive unless the commentator had a language barrier.
- ii. Equality and Diversity in relation to interpretation services and health inequality.
- iii. Quality in relation to treatment received and dignity and respect.

Example of feedback received: Commentator stated that they were able to receive a very good diagnosis of mental illness (depression). The commentator further stated that they had a good consultation with their GP in relation to medication so were prescribed a drug which was not addictive.

Commentator informed Healthwatch of their dissatisfaction in trying to obtain an appointment at Charlotte Keel Health Centre. The commentator stated it took two weeks before they could secure an appointment.

Commentator commented on their experience of the appointment system at Charlotte Keel Health Centre, which resulted in missed appointments due to appointment slips being printed in a format that was not accessible to them due having a language barrier.

4.3 Comments themed by service type.

Secondary Care: Hospitals services

7 comments received.



Healthwatch Bristol received comments from patients in relation to their experiences of receiving treatment at University Hospital's Bristol NHS Foundation Trust and North Bristol NHS Trust. The key themes highlighted with positive and negative feedback were:

- i. Access to services in relation to appointment booking and waiting times.
- ii. Surroundings, the environment and facilities available.
- iii. Quality of treatment and in relation to dignity and respect
- iv. Staffing in relation to staff attitudes

Example of feedback received: Commentator explained the circumstances which caused him to be admitted to Southmead hospital after becoming intoxicated and jumping into the Avon River by the Docks in Bristol. The commentator sustained some injuries and was sectioned by the police, and admitted to a mental health ward at Southmead Hospital. The commentator stated that while their stay was pleasant at Southmead, they felt that the environment could have been more sensory friendly as there were no plants in the flower beds.

A service user who is known to the Compass Centre Rough Sleepers team had been discharged from the Bristol Royal Infirmary (BRI) Hospital without any fixed abode. The commentator highlighted that it was only by coincidence that the team found out about the discharge the day before it happened so colleagues were able to arrange a pick up for the individual and bring them back to the Compass Centre. The commentator further indicated that while they have a duty of care to support the individual to find housing, this incident was bad practice as they do not have a statutory duty to provide housing.

Commentator highlighted several occurrences of poor practice and services they had experienced at Southmead Hospital with appointments being cancelled, poor

parking, confirmed surgery dates cancelled on four occasions and shortage of staff.

Dental Hospital

3 comments received.



The themes analysed from the feedback focusing on Bristol Dental Hospital were:

- i. Quality of treatment and care were mentioned positively.
- ii. Surroundings, the environment and facilities available were positive.
- iii. Access to services in relation to appointment booking and waiting times were positive.

Example of feedback received: The commentator reported the good service they have received from the Bristol Dental Hospital in terms of getting an appointment and treatment.

Accident and Emergency

3 comments received.



The themes analysed from the feedback focusing on Accident and Emergency services:

- i. Quality of treatment and care in relation to dignity and respect had mixed feedback
- ii. Access to services in relation waiting times were views poorly.

Example of feedback received: The commentator stated that they were able to be seen, very quickly and was treated by a fantastic nurse by the name of Adel in Accident and Emergency, after being bitten by a dog. The commentator further stated that they were then referred to dermatology department where again the experience was positive and they found the staff there to be very helpful and supportive.

Primary Care:

- GP

22 comments received.



The themes analysed with positive and negative feedback focusing on GP practices were:

- Access to services in relation to appointment booking, waiting times and same day appointments.
- Patient Pathways in relation to appointments access to services and referrals.
- Equality and Diversity in relation to interpretation services and health inequality.
- Quality in relation to dignity and respect
- Staffing in relation to staff attitudes

Example of feedback received: Commentator stated that the services provided at their GP Practice in Bedminster are really good. The commentator stated that if they are five minutes late their GP will make contact with them to find out if they is ok and is still coming to the appointment. The system is good and the ability to be seen by own GP instead of a locum is good.

Commentator informed Healthwatch of the poor services received at their GP Surgery in Knowle. The commentator reported that their GP does not listen to their problems and the consultation feels rushed without being examined properly stating "It feels like they just want me to leave as soon as possible".

Commentator informed Healthwatch that they were very satisfied with the service they received from the Wellsprings Healthy Living Centre, they identified services such as the appointment booking system and the GP were exceptionally good. Commentator further identified the health centre was clean and hygienic.

• Opticians

1 comment received.



Only one comment was received concerning opticians, so Healthwatch is unable to draw any recommendations. However, the themes expressed in the feedback were:

- i. Patient Pathways in relation to diagnostics
- ii. Finance in relation to transparency of fees

Example of feedback received: Commentator informed Healthwatch of their experience they had at their local opticians. They were inform by the optician that they required a new set of lenses fitted and was charged over £300, they waited over six weeks before deciding to cancel the prescription, as it was taking such a long time. They then made an appointment with a Boots opticians who identified that they did not need new lens but in fact, have cataracts which will require surgery.

• Pharmacies

2 comments received.



The themes analysed with positive and negative feedback focusing on pharmacies, were:

- i. Safety in relation to quality and access of services.
- ii. Fit for purpose / Meeting needs in relation to suitability of provider.

Example of feedback received: The commentator stated that they were not able to access the needle exchange program from their local pharmacy and felt that this was putting people at risk of infections because it would cause people to reuse needles.

• Dental Surgeries

4 comments received.



The themes analysed with positive and negative feedback focusing on dentists, were:

- i. Access to services in relation to appointment booking and waiting times.
- ii. Finance in relation to transparency of fees.
- iii. Equality and Diversity in relation to perceptions of health inequality.
- iv. Quality in relation to treatment and care, and dignity and respect.

Example of feedback received: The commentator stated that it is their belief, that because they are a NHS patient their treatment was substandard. The commentator highlighted that recently they had fillings which dropped out after two days, so they had to go back to the dentist for further treatment due to the pain that they were experiencing. The commentator also felt that the dentist's communication skills were poor as there was no dialogue about the course of treatment.

Commentator indicated the difficulty of finding a dentist due to no fix abode. Commentator further highlighted the issue of being struck off the dentist register due to missing an appointment.

Drugs and Alcohol Services

3 comments received.



The feedback concerning drug and alcohol services focused on experiences with the Bristol Drugs Project and Bristol Specialist Drugs and Alcohol Service, the themes with positive and negative comments were:

- i. Staffing in relation to staff attitudes and helpfulness
- ii. Patient Pathways in relation to referrals, access to services and access to information.

iii. Quality in relation quality of treatment

Example of feedback received: Bristol Drug Project had a good availability of appointments but the commentator was unable to get a detox from alcohol abuse due to being homeless

Other homeless support services

6 comments received.



The themes analysed from the feedback focusing on other homeless support services, were:

- i. Meeting the needs of individuals services provided were viewed positively
- iv. Quality in relation to care and facilities offered had mixed feedback.

Example of feedback received: Commentator informed Healthwatch of the Sisters of the Church homeless service provisions. The commentator stated that the nuns provided a very good service and listen to their problems. They also give food parcels on Sundays and clothing which is very helpful for homeless people.

Commentator highlighted their plight in gaining access to a crisis house when they needed support the most. The commentator stated that their mental health was deteriorating due to the medication they were taking, which resulted in them being thrown out of a dry house and becoming homeless. As they had no fixed abode they were unable to be discharged to a crisis house and received no support.

Commentator felt that the night shelter is a good service but should be provided seven days a week instead of five days a week as people are homeless seven days a week.

Mental Health Services

4 comments received



The feedback concerning mental health services focused on experiences with the Crisis Team and Brookland Hall, the themes with positive and negative comments were:

- i. Access to information and services, in particular referrals
- ii. Quality in relation treatment and care was viewed poorly
- iii. Meeting the needs of individuals and there being a gap in services for young people

Example of feedback received: Commentators found it difficult to access Bristol Mental Health services. Commentator felt this was due to professionals not knowing how to refer patients.

5. CONCLUSION

Healthwatch Bristol collected 126 comments from 15 engagement sessions at homeless support services. From the data analysed and presented in this report the key themes were access to services, which was often highlighted as poor, and quality which had mixed feedback. Commentators felt services should respect individual's needs, ensure patients understand information, are listened and spoken to and given choice. Where this did happen commentators reported an excellent service.

Currently in Bristol homeless health services are delivered by Compass Health and from the Healthwatch Bristol engagement sessions this service received generally positive comments stating the service offered was good. GP services were the second biggest grouping of comments although the sentiments were slightly more mixed. While GPs will offer a service to homeless people, the challenge is obtaining registered status without any fixed abode.

The Healthwatch England homeless focus in their report 'Safely Home' identified five key issues facing homeless people. From the engagement work Healthwatch Bristol has completed we can echo four of those points:

- **Poor coordination of services:** several commentators indicated a need for better coordination of homelessness services in relation to drop in centres to ensure homeless people are able to get a hot meal every day of the week, oppose to having four services providing a hot meal and drop in service three days a week, all on the same day and time. Discharge from hospital was also mentioned.
- **Poor information about services:** access and information about services were frequently themes analysed in the feedback, where commentators felt unable to access a service or unable to get information and support for their need.
- **Stigma faced by those homeless:** attitudes by staff and respect were frequently mentioned in both positive and negative experiences and while the term 'stigma' was not used, combined with the feedback which focused on feelings of inequality, Healthwatch would suggest this is a key issue.
- **Feeling excluded from decision making:** this issue was particularly highlighted in treatment by dentists.

While the feedback from the engagement sessions is generally positive, access was an issue and from the experience of completing the engagement sessions Healthwatch Bristol understand that there is an issue with the chaotic lives homeless people can lead and how this impacts their use of health and social care services, and the priority it is given in their lives.

A gap acknowledged within the report by Healthwatch is that by engaging with only those people who attend the services in place to support homeless people, Healthwatch Bristol will not have collected views from potentially those most vulnerable homeless people who do not engage with any support services, often referred to as hidden homeless. Healthwatch Bristol will consider taking forward a phase two of the project using outreach services to enable participation.

6. Recommendations

1. Healthwatch will take the findings in this report to the Preventing Homelessness Board Health sub-group for their consideration and promote the findings through the Homeless Awareness Week February 2016.
2. A key issue in the feedback is that of not being able to register with a GP or dentist without a fixed abode. Healthwatch suggest the recommendations made in the Queens Nursing Institution (QNI 2015) report *Assessing the needs of people who are homeless*, be promoted either via briefings or training sessions for GPs and dentists. The report suggests patients are given the option to use the address of the GP setting, where an agreement can be made between the surgery and the patient on an appropriate method of communication. The full QNI report can be accessed at <http://bit.ly/1TDxeSg> . Healthwatch Bristol will take this report to Bristol Clinical Commissioning Group with the recommendation they incorporate this within their GP bulletin and the Practice Managers' meetings.
3. Healthwatch Bristol understand that discharge from hospital services is a time of risk for homeless people if they have no where to go home to and this can cause longer stays in hospital and re-admittance. This requires effective partnership working and maintaining a robust referral system, where communication is key. Healthwatch would be interested in identifying where good practice already exists and assisting its promotion through training briefings to relevant services.
4. As highlighted homeless people are one of the major social groups that have an increasing prevalence of health inequalities and have greater health needs in comparison to the general public. Healthwatch Bristol suggest this is an issue which could be discussed in general equalities training for staff and will work with the Public and Patient co-ordinators in the local area to see how this can be incorporated as recommended in *Inclusion Health: Education and training for health professionals* produced by the National Inclusion Health Board (NIHB) <https://www.gov.uk/government/publications/educating-health-professionals-to-support-vulnerable-groups>
5. There was significant feedback around the coordination of the food services for homeless people, and how in one week all services will offer food on certain days, with nothing on others. Healthwatch will liaise with the

services to identify the reasons behind this and whether there is a way of coordinating the resources to offer something more consistently.

7. Next steps

Healthwatch Bristol will.....

All the feedback provided through this engagement project has been inputted to Healthwatch Bristol's Feedback Feed Forward database and will be included in the Healthwatch Bristol quarterly report. Healthwatch Bristol will be sharing this report with Healthwatch Bristol partners including Bristol Clinical Commissioning Group, the Health and Wellbeing Board, Bristol City Council, The Care Quality Commission, NHS England and Healthwatch England. The report will also be presented to the Healthwatch Bristol Advisory Group to propose further uptake of the issues identified in this report. The report will be available on the Healthwatch Bristol website (www.healthwatchbristol.co.uk) and circulated to our mailing lists via the monthly e-bulletin.

Looking forward....

Plans for future work between Healthwatch Bristol and members of the homeless community

Healthwatch Bristol welcomes and encourages members of the homeless community or those who support them to continue to contribute their feedback to us using the communication methods included at the end of this report. Healthwatch Bristol will consider including a phase two of the project utilising the outreach service on the work plan for 2016/2017.

Healthwatch Bristol also supports people to become Volunteer Champions so that they can represent the experiences and needs of their community. If you would like to find out more about volunteering with Healthwatch Bristol, please contact us using the details below.

Tell Us Your Story...

Healthwatch Bristol want to hear from you about your experiences so that we can tell services your needs to create the best local services.



Text us - text bris followed by your message to 07860 021 603



Email us at info@healthwatchbristol.co.uk



Call us: 0117 2690400



Write to us at: Healthwatch Bristol,
The Care Forum, The Vassall Centre,
Gill Ave, Fishponds, Bristol, BS16 2QQ

Or visit our website to see more at: www.healthwatchbristol.co.uk