

Locally Enhanced Service for Homelessness

Reference: LES26

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1. Financial Details

This agreement is to cover the period between 1st April 2009 and 31st March 2010.

- The proposal is to set a price of £40.72 per eligible patient per annum.

2. Service Aims

Homelessness is commonly used to describe a wide range of circumstances where people have no secure home. Homelessness is defined in legislation for the purpose of determining entitlement from local authorities. Certain groups are defined by law as being in priority need of housing. These include pregnant women, families with children, all 16 and 17 year olds, those who physical or mental health problems, people who have experienced domestic or racial violence and people who are vulnerable following a stay in institutions.

For the purpose of this locally enhanced service, therefore, homeless people are defined as:

- Rough sleepers
- Hostel and night shelter residents
- Bed and breakfast residents
- Squatters
- People staying temporarily with friends or relatives and who sign a declaration of being of No Fixed Abode (renewable after three months) to differentiate them from Temporary Residents

This service is designed to ensure that:

- Homeless people have equal access to appropriate levels of service from practices designed to ensure that their health needs are effectively tackled
- GPs are provided with the knowledge, training and resources to enable them to deal effectively with homeless peoples' health needs
- GP services are empowered to tackle the health needs of homeless people holistically by working with relevant services (e.g., housing, social services) to integrate homeless people into local communities.

3. Service Criteria

Provision of this "level one" specification to include the following:

- Up to date register of homeless people as defined (see below)
- Liaison with statutory services and homeless agencies
- Awareness of, and attendance at, homeless forum meetings

- Flexible registration procedures to allow patients to register as permanent if they so wish (i.e. those of established homeless status)
- Explicit policy to see such patients at short notice and to provide flexible times in surgery
- Onward referral to intermediate mental health services or CPN services as appropriate

4. Monitoring & Evaluation

Participating practices will be expected to submit quarterly data on the number of patients newly placed on the homeless patient register by the practice in the preceding quarter. The PCT would also expect practices to carry out some form of audit on this information (e.g. an audit of physical and mental health problems experienced by the patients), or to review the operation of the service (e.g. patient feedback). This work could provide the evidence that enables the practices and PCT to re-design and re-specify the service in the medium-term.

5. Signature Sheet

This document constitutes the agreement between the practice and the PCT in regards to this nationally directed enhanced service.

Practice Stamp

Signature on behalf of the Practice:

Signature	Name	Date

Signature on behalf of the PCT:

Signature	Name	Date