

Leicester City Council

Scrutiny Inquiry

*Examining services surrounding
homelessness and complex needs in Leicester*

**A Report for the Joint Task Group of the
Housing Scrutiny Commission and
Public Health & Health Integration
Scrutiny Commission**

October 2024

Contents

	Page
Foreword	2
Summary	3
Recommendations	4
Report <ul style="list-style-type: none">○ Scrutiny Rationale○ Scrutiny Approach○ Overview○ Evidence Gathering○ Joint Specific Needs Assessment○ Benchmarking○ Summary of Task Group Conclusions	5
Financial, Legal and Equalities Implications	12
Appendices list	16
Officers to contact	15
Appendices <ul style="list-style-type: none">○ Appendix A - Housing Context○ Appendix B - Dear Albert Overview○ Appendix C - Inclusion Healthcare Overview○ Appendix D - The Bridge Overview○ Appendix E - Turning Point Overview○ Appendix F - Leicestershire Partnership Trust - Homelessness Mental Health Team○ Appendix G - Homelessness Joint Specific Needs Assessment Presentation○ Appendix H - Homelessness Joint Specific Needs Assessment	

A Joint Task Group of the Housing Scrutiny Commission and Public Health & Health Integration Scrutiny Commission

Participating Commission Members

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Keith Neville - The Bridge
Rebecca Pawley - Homeless Charter

FOREWORD

We are delighted to present this report on the findings of the Joint Task Group of the Housing Scrutiny Commission and Public Health & Health Integration Scrutiny Commission's work in examining services surrounding homelessness and complex needs in Leicester.

In light of many challenges that are posed to our residents, including the lack of affordable housing that resulted in a housing crisis being declared locally, the ongoing cost-of-living crisis and the disparities of health equity amongst our communities, we felt that it was important to undertake a joint scrutiny investigation to examine the services that provide support to residents, often at a time they are most vulnerable.

The Task Group explored a different method of scrutiny investigation, with a number of sessions and a site visit incorporated into a single inquiry day. Our work generally sought assurance and a deeper understanding in respect of current homelessness service provision and access to health services for those with complex needs, as well as reviewing the joint specific needs assessment for homelessness.

We are very thankful to those who facilitated and participated in providing their knowledge and expertise to the Task Group, bettering our understanding of services for individuals who are homeless and have complex needs. We would like to express our particular thanks to those who presented to the Task Group, including officers within the city council's housing and public health department, the local health sector - Leicestershire Partnership Trust, the Integrated Care Board and University Hospitals of Leicester - as well as Dear Albert, Inclusion Health, Leicester's Homeless Charter, The Bridge and Turning Point. We are also grateful to our elected colleagues who formed the Task Group and contributed to the discussions and findings.

We hope that our joint work and recommendations will enable further discussion and collaborative working across our local government services, the health sector and VCS organisations to strengthen the services and support for homeless individuals and improving health equity.



Councillor Molly O'Neill
Chair of Housing Scrutiny Commission



Councillor Karen Pickering
**Chair of Public Health & Health
Integration Scrutiny Commission**

1. SUMMARY

1.1 Background to the Scrutiny Investigation

- 1.1.1 Local authorities have a statutory duty to take reasonable steps to prevent or relieve homelessness and to this end, Leicester City Council work with partner agencies, including health and the VCS to deliver a range of services for individuals who are homeless, and those with particular complex needs.
- 1.1.2 Given the increasing pressures on homeless services, particularly with the housing crisis and cost-of-living crisis, and the impact of homelessness on an individual's health, the Chair of the Housing Scrutiny Commission along with the Chair of the Public Health and Health Integration Scrutiny Commission sought to better understand the services surrounding homelessness and complex needs in Leicester.
- 1.1.3 To enable the level of examination deemed necessary, a Joint Task Group was established to gather evidence and identify recommendations. The work of the Task Group took place in the form of a single inquiry day with a conclusion session a week later to reflect on findings and form conclusions.
- 1.1.4 A number of sessions took place throughout the single inquiry day. This enabled the Task Group to gain a more in-depth understanding of the current service provision and gather evidence. This included witnesses from council departments, including housing and public health, local health services and the voluntary and community sector. The Task Group also had an opportunity to visit Inclusion Healthcare as part of the inquiry day.
- 1.1.5 The inquiry day provided the Task Group the opportunity to probe, question and ultimately form conclusions to make several recommendations which generally support council policies whilst seeking some further work and improvement.
- 1.1.6 This scrutiny investigation served as an alternative method for consideration by scrutiny commissions. It was a short, focused piece of work enabling joint discussion in one day. The report sets out more detail of the evidence gathered and summarises conclusions reached.

1.2 CONCLUSIONS & RECOMMENDATIONS

1.2.1 Following the inquiry day, the following findings and set of proposed recommendations:

- a) Further work to be undertaken to better understand the impact of temporary accommodation on families, particularly children, including health provision.
- b) Further work to be undertaken to better understand the impact of homelessness and health services for individuals being released from prison.
- c) Services should continue to work collaboratively and in partnership to provide residents in the city with 'help beyond housing'.
- d) That the proposed 'multi-disciplinary hub' provides additional services to promote a safe space and environment fit for inviting residents to attend and seek support.
- e) To enhance communication and review processes to ensure individuals and families in need of mental health support are being identified and referred to the homeless mental health team.
- f) Processes to be reviewed to enable partner agencies to refer individuals for homelessness service support to prevent rough sleeping and promote safety.
- g) Funding for the rough sleeping initiative and rough sleeper drug and alcohol treatment fund to be continued as much as possible noting the financial pressures and spending review.
- h) To lobby central government to allow local authorities to retain 100% of right to buy receipts whilst the scheme exists in order to replenish housing stock but with a view to also lobby to abolish the scheme.
- i) Proactively continue to identify opportunities for building and acquiring new council housing stock.
- j) Support the acquisition of additional temporary accommodation to ensure residents have their own front door and move away from the use of hotel and bed and breakfast accommodation.
- k) To enhance communication with partner agencies on withdrawal of services.
- l) Support the recommendations contained within the Joint Specific Needs Assessment for Homelessness to be implemented.

2. REPORT

2.1 **Scrutiny Rationale**

- 2.2 The Council has a statutory duty to take reasonable steps to prevent or relieve homelessness and to this end works with partner agencies to deliver a range of services. Leicester is one of only a few cities which implements specialised healthcare services for homeless individuals through Inclusion Healthcare. The Council is also a member of the Homelessness Charter, which aims to improve the way organisations and individuals work together to tackle homelessness in the city.
- 2.3 The Public Health team work to improve the city's public health and reduce premature mortality. Leicester is a deprived city with a lower life expectancy and healthy life expectancy than the national average. Other social determinants can also impact life expectancy and collaborative working is ongoing to address inequities.
- 2.4 The Housing Scrutiny Commission had received reports regarding the growing demand and pressures on homelessness services and the Public Health and Health Integration Scrutiny Commission had discussed the disproportionate health equities and access to health services.
- 2.5 Concerns had also been raised regarding the impact of homelessness on health, particularly for those with complex needs. Given the economic climate and wider determinants that pose further risks to homelessness and health conditions, the joint Task Group was established with the intention of better understanding homelessness services and access to health provision, as well as reviewing the joint specific needs assessment for homelessness.
- 2.6 The Chair of Housing Scrutiny, Councillor O'Neill, and Chair of Public Health & Health Integration Scrutiny, Councillor Pickering, therefore initiated a Joint Task Group to examine the role and effectiveness of services surrounding homelessness, health and complex needs.

2.7 **Scrutiny Approach**

- 2.7.1 It is relatively commonplace for scrutiny commissions to request further detail on particular topics and can result in additional information being provided to subsequent commission meetings or through informal scrutiny meetings.
- 2.7.2 In this case, the Chair of Housing and the Chair of Health sought to undertake a scrutiny investigation in the form of a single inquiry day. The concept of this model is one that operates at other local authorities and allows a deeper examination of a topic and for the Task Group to gather evidence on a particular day.

- 2.7.3 The inquiry day sought assurance and a deeper understanding in respect of current homelessness service provision and access to health services for those with complex needs, particularly substance misuse. It also sought to examine the process for identifying needs and solutions through the joint specific needs assessment.
- 2.7.4 The scrutiny investigation was extremely short in comparison to other reviews performed previously and used an alternative approach that could be considered by other scrutiny commissions.
- 2.7.5 The inquiry day took place on Thursday 3 October, with a number of sessions and a site visit to obtain evidence from council divisions, the local health sector and VCS organisations. The Police were also invited but unfortunately were unable to attend. The Task Group was able to form conclusions and recommendations from the findings that were finalised at a session that took place following a week to reflect. A summary of the sessions are outlined below and further details are contained within subsequent sections of the report:
- A detailed overview session took place throughout the morning to gather evidence from the councils housing division as well as hearing from identified witnesses, including the local health services such as Leicestershire Partnership Trust, the Integrated Care Board and University Hospitals of Leicester, as well as VCS organisations, including Dear Albert, Leicester's Homeless Charter, The Bridge and Turning Point. The Police were unable to attend the session.
 - A further session took place with the public health team to better understand the process and findings of the joint specific needs assessment for homelessness.
 - A site visit took place to Inclusion Healthcare where the Task Group were able to gather further evidence through witnessing the facilities and speaking with clinicians and management.
 - A benchmarking session provided members with an opportunity to compare the evidence they had received against other cities.
 - An initial findings session took place at the end of the day for the Task Group to reflect and share their thoughts on the evidence that had been gathered throughout the day.
 - A final session took place remotely following the inquiry day to draw conclusions from the evidence heard and witnessed to form recommendations.

2.8 Overview

- 2.8.1 In compiling evidence, the Task Group gathered information through a variety of discussions and sessions throughout the day, including a site visit. The Task Group also considered desktop research to examine and compare the role and effectiveness of services for homeless individuals, particularly with complex needs in Leicester.
- 2.8.2 An overview session was arranged to enable the Task Group to receive in depth information to form a better understanding of homelessness services, including health provision, as well as the demands and pressures. This included an overview from Heads of Services within the Housing Division, local health partners and the voluntary and community sector. The session provided the Task Group an opportunity to question and probe witnesses to identify where areas work well and where challenges and gaps exist.
- 2.8.3 The Task Group were informed of the various definitions of homelessness and that the cost-of-living crisis had driven a rise in all areas with increasing levels of households presenting to the authority for help, including a rise in individuals with complex needs seeking support. The statutory annual count of rough sleeping had reduced in Leicester, but it was recognised that this was a snapshot on that particular night. It was also recognised that there is a population of homeless individuals who are hidden as all households do not present for support.
- 2.8.4 The increasing pressures on homelessness services and lack of affordable housing had resulted in a significant increase of individuals and families in temporary accommodation. Most local authorities are in breach of the national target of six weeks in bed and breakfast. In Leicester there is a priority to ensure people have their own front door with 50% of families in suitable temporary accommodation and a recent council approval for £45m investment to purchase additional temporary accommodation units.
- 2.8.5 The local authority commissioned a range of services to provide temporary accommodation and support services including for individuals with complex needs. The Task Group were made aware that various commissioned services are funded through the rough sleeping initiative fund which is in its last year of funding and the future of the offer was uncertain.
- 2.8.6 Additional support services for individuals in temporary accommodation is predominantly for singles with complex needs, particularly supporting mental health, drug and alcohol issues. Many individuals remain in temporary accommodation for more than four months, illustrating the support needed for recovery and stabilisation before moving on to next step accommodation. The pathway of support is flexible and individuals,

particularly with complex needs can move between the level of support and intervention needed.

- 2.8.7 The majority of individuals requiring support services whilst homeless receive support from a range of organisations through a strong partnership approach in the city. This is evidenced in the Homelessness and Rough Sleeping Strategy and commitment of the Leicester Homelessness Charter.

Evidence Gathering

- 2.8.8 The Chairs identified and invited witnesses to participate in the inquiry day recognising the partnership approach to tackling homelessness. The Task Group heard from the ICB, UHL, LPT's homelessness mental health team, Dear Albert, The Bridge and Turning Point. These organisations were able to share their knowledge and expertise of supporting homeless individuals, often with complex needs. The Police were also invited but unable to attend.
- 2.8.9 Members heard of the range of services organisations provide, including day centres, forums, outreach work, treatment and vaccinations amongst much more. It was evident that most individuals being supported are rough sleeping or residing in temporary accommodation in which there had been a noticeable increase.
- 2.8.10 Providing individuals with a safe place and open-door approach to seek support was highlighted as important to engage with homeless individuals, particularly with complex needs. Strong collaborative working to provide services with different organisations and at alternative locations had proven successful and this was made clear to the Task Group throughout discussions.
- 2.8.11 Organisations also expressed the importance of providing a platform for individuals to share their lived experience that should be considered to identify needs and shape suitable services.
- 2.8.12 Outreach work was highlighted as a success in Leicester with a collaborative approach across local government, health and the VCS. Concerns were raised however around the risk and ability for organisations to continue to support individuals, particularly outreach support for rough sleepers with substance issues, if current grant funding was not to continue. Risks were also identified in current processes where individuals known to be rough sleeping could be better referred to appropriate services to enable access and promote safety.
- 2.8.13 The risk of withdrawal of services was discussed, in which the Task Group heard about the high tolerance of services to support individuals with complex needs. It was acknowledged that in some incidents access to services are withdrawn for a period of time for individuals and

improved communications amongst organisations for better awareness and understanding was identified.

- 2.8.14 The increasing demand on homelessness services also raised questions around the ability to identify and refer individuals and families for appropriate health services such as mental health support, with no referrals in the last four years. Access to specialised health services and referrals were deemed important to provide earlier support and prevent additional pressures on the hospital emergency department.
- 2.8.15 Health colleagues recognised the complexities of some homeless patients and highlighted the ongoing work for educating the workforce, particularly international workers. Risks were identified for patients presenting at the emergency department when released from prison without suitable substance misuse plans and asylum seekers. The disparity between medication in prison and community prescriptions was also discussed and recognised during the site visit.
- 2.8.16 As part of the inquiry day, the Task Group visited Inclusion Healthcare, a commissioned healthcare provider with specialised services for homeless individuals. Members were able to witness primary care facilities and additional support services provided to better understand the offer and patient journey.
- 2.8.17 The Task Group were also able to speak directly with members of staff, including clinicians, administrators, management and other organisations based at the premises to gain further evidence. The visit illustrated the importance of specialist services enabling access to support and forming positive relationships with individuals often with complex needs. The collaborative approach which had become evident during the overview session was brought to life with services working together to ensure individuals can access and improve attendance for healthcare appointments.
- 2.8.18 The discussions allowed the Task Group to hear about the often complex and multiple needs of homeless individuals that usually require specialist support beyond housing. This was noted to be in limited supply given the rising demand and increasing pressures on services and budgets. There was also particular concern and discussion around the vulnerability of homeless individuals with complex needs when they are ready to move to suitable permanent accommodation around the risk of cuckooing.

Joint Specific Needs Assessment

- 2.8.19 A session was dedicated as part of the inquiry day on the Joint Specific Needs Assessment for Homelessness. It was highlighted that the last assessment had been completed in 2016. Following the pandemic and ongoing cost-of-living crisis, the housing division and Integrated Care Board had therefore sought a revised assessment.

- 2.8.20 A comprehensive overview was provided by public health officers to provide the Task Group with a better understanding of the process, including the organisations that had participated in the assessment and the findings that formed 32 recommendations.
- 2.8.21 The Task Group commended the work and importance of the joint specific needs assessment and sought assurances that the recommendations would be implemented by the relevant organisations. Further support for the recommendations were provided by the Task Group.

Benchmarking

- 2.8.22 The Task Group discussed other local authorities and policy to compare the approach taken in Leicester in which it was recognised that there had been an increase in homelessness across the country.
- 2.8.23 Legislation provides the statutory framework and duties on local authorities regarding homelessness, including the duty to develop a Homelessness & Rough Sleeping Strategy. The Homelessness Reduction Act 2017 also placed a duty on local authorities to intervene at an earlier stage to prevent homelessness and extend services to every household who is homeless or threatened with homelessness.
- 2.8.24 The statutory nature of homelessness services found similarities in the themes and priorities when looking at Birmingham, Bristol, Coventry, Manchester, Nottingham and Salford. Access to services and sourcing additional affordable accommodation were highlights which is consistent with the approach in Leicester.
- 2.8.25 A collaborative approach to tackling homelessness was also identified as important, with Homeless Charter's or at least a commitment to work in partnership with health services and the voluntary and community sector. The strong partnership working, commitment of Leicester's Homelessness Charter and the positive impact of dedicated health services to support the homeless was evident throughout the inquiry day.
- 2.8.26 The increasing use of temporary accommodation and longer waits to find a permanent solution for individuals and families was not unique to the city but a national trend. The impact of homelessness on health were discussed by the Task Group, with consideration to the impact on mental health, educational attainment and employment as well as access to sufficient cooking facilities.
- 2.8.27 The Housing First model was also considered – an evidenced based approach on ending homelessness by providing housing and other support to individuals with multiple and complex needs. This model has been successful in Finland and UK pilots in Greater Manchester, Liverpool City Region and West Midlands Combines Authorities have

been extended to further evaluate the impact to potentially inform future investment.

2.8.28 The Task Group reflected on the local model and importance of providing 'help beyond housing' to ensure there is additional support to individuals that are homeless, particularly with complex needs.

2.8.29 The different sessions throughout the inquiry day allowed the Task group to seek clarity and ask questions on various matters surrounding homelessness policy and services. This level of investigation allowed sufficient evidence to be gathered to enable a set of recommendations to be established as outlined in paragraph 1.2.

2.9 Summary of Task Group Conclusions

2.9.1 As a result of the evidence received and the ability for members to question and engage with officers and witnesses as part of this work, the Task Group reflected on the strengths, weaknesses, opportunities and threats to formulate findings and recommendations as set out in paragraph 1.2.

2.9.2 Drawing on the evidence, the Task Group identified that further consideration should be explored to seek a better understanding of the impact of families, particularly children, residing in temporary accommodation. This would include wider determinants impacting health and access to health provision.

2.9.3 Similarly, gaps and risks were identified for individuals being released from prison and the Task Group expressed a desire to further consider the impact of homelessness and health services, particularly where individuals are being released from prison early.

2.9.4 The inquiry day enabled the Task Group to witness the strong working partnerships that exists in Leicester and commended the approach to provide wraparound support beyond housing. Concerns were acknowledged regarding the impact on service and offer to individuals as the current funding is due to come to an end next year.

2.9.5 The importance of a multi-agency approach to reaching individuals with complex needs and successfully delivering services was evident and therefore recommended continued partnership working and that the proposed multi-disciplinary hub include additional service to promote a safe space and inviting environment.

2.9.6 Some areas were identified by the Task Group for potential improvement, primarily in regard to communication and transparency for enabling further positive working and supporting residents with appropriate referrals.

2.9.7 Overall, the Task Group resonated with the housing crisis and lack of affordable housing as a significant contributory factor along with the

ongoing cost of living crisis impacting the increasing pressures on homelessness services and in turn having a consequential impact on residents' health. There was therefore a consensus of support of the council's policies to increasing affordable housing, temporary accommodation, and the need to retain and replace housing stock through lobbying central Government to allow local authorities to keep 100% of right to buy receipts and to abolish the scheme.

2.9.8 The Task Group also commended the work of the joint specific needs assessment for homelessness and reiterated the importance of each responsible organisation implementing the identified recommendations by formalising support.

3 Financial, Legal and Other Implications

1.3 Financial Implications

The financial implications associated with the recommendations within this report are limited. To the extent that the report recommends reviewing existing processes and enhancing communication, these will have limited costs beyond staff time.

Funding through the Rough Sleeping Initiative has been significant in recent years for Leicester and the service has been effective in its bidding into this fund. This is grant funded and its continuance is within the gift of central government.

In relation to the Right to Buy scheme, the Chancellor, in her budget of 30th October, announced changes to the scheme including a reduction in the level of discount being offered and making permanent the retention of 100% of receipts by Councils. Whilst 100% retention has been in place temporarily since 22/23 the continuation of this is welcome and will mean £1.7m more being retained locally for affordable housing each year. The reduction in the scale of discounts will result in greater retention of housing stock by the Council and support a more financially sustainable Housing Revenue Account; it will, however, mean that overall receipts from sales (which form a key part of the affordable housing programme) will be lower.

The acquisition of property forms a significant part of the current capital programme. Any further additions to the programme will require full financial appraisal of the revenue impact.

Signed: Stuart McAvoy

Date: 30 October 2024

1.4 Legal Implications

There are no direct legal implications arising from this Scrutiny Review. The Legal Division provide regular advice and representation to the Housing Division on individual homelessness cases, and on policy.

Signed: Kamal Adatia

Date:28/10/2024

1.1 Equality Implications

When carrying out its functions (including decision making, policy and service development, projects and service delivery) the Council must comply with the Public Sector Equality Duty (PSED) (Equality Act 2010) by paying due regard to the need to eliminate unlawful discrimination, advance equality of opportunity and foster good relations between people who share a 'protected characteristic' and those who do not. In doing so, the council/ decision makers must consider the possible impact on those who are likely to be affected by the recommendation and their protected characteristics. Protected groups under the Equality Act are age, disability (including mental health as well as physical disabilities), gender re-assignment, pregnancy/maternity, race, religion or belief, sex and sexual orientation. The report shares the findings and recommendations of the Joint Task Group of the Housing Scrutiny Commission and Public Health & Health Integration Scrutiny Commission's work in examining services surrounding homelessness and complex needs in Leicester.

This is against the backdrop of the challenges, nationally and locally of rising levels of homelessness. The lack of affordable, quality housing drives homelessness, as well as pressures arising from the cost-of-living crisis and many other national factors. This has impacted on households being able to sustain their tenancies and, in many cases, leading to homelessness. Housing is a human right and the impacts of homelessness can be devastating for individuals and families. It can affect both physical and mental health, educational and employment opportunities (for both adults and children) and has long term consequences for those affected. The local authority has a statutory duty to secure accommodation for unintentionally homeless households who fall into a 'priority need' category. The Council also provides advice and other assistance to help prevent homelessness and has an enhanced offer to help more households than its statutory duty. Certain categories of household, such as pregnant women, families with children, young care leavers and households that are homeless due to an emergency such as a fire or flood, have priority need if homeless. Other groups may be assessed as having priority need because they are vulnerable if homeless due to, for example, old age, or physical or mental ill health, or because they are vulnerable as a result of being in prison, or care or as a result of becoming homeless due to domestic abuse. Those affected by

homelessness are likely to include individuals from across various protected characteristics. Support provided to homeless people and those facing homelessness helps to develop skills to live independently in their own homes. This includes integration into the community, taking part in leisure activities and support to find education, training or employment. Continued partnership work that strengthens ways of working together across agencies, disciplines and sectors, should lead to positive impacts for people from across all protected characteristics.

Signed: Surinder Singh

Date: 24/10/2024

1.2 Climate Change and Carbon Reduction Implications

Housing is one of the largest sources of carbon emissions in Leicester and, following the council's declaration of a Climate Emergency, addressing these emissions is vital to meeting our ambition to reach net zero carbon emissions, particularly where the council has a higher level of influence and control. As such, work to address homelessness in the city should include consideration of opportunities to reduce the carbon emissions of housing, as appropriate and relevant to projects.

Opportunities to ensure that any development or acquisition of properties will provide energy efficient and low carbon housing should be investigated and taken forward as new projects are proposed and developed. Potential measures could include improved insulation, the use of low energy lighting and appliances and the installation of low carbon heating and renewables. Preventative work could also include opportunities for the signposting of projects which address fuel poverty to service users, where appropriate. As well as reducing carbon emissions, improving the energy efficiency of housing could provide further benefits, such as reducing energy bills and making housing healthier and more comfortable for occupants.

Additionally, the provision of services contributes to carbon emissions, for example from the use of buildings, equipment and transport. To minimise these impacts staff and partners should be encouraged to reduce energy use, use sustainable transport and procure low carbon equipment and materials as appropriate and relevant to projects.

Signed: Aidan Davis

Date: 28/10/2024

2 Summary of Appendices

Appendix A - Housing Context

Appendix B - Dear Albert Overview

Appendix C - Inclusion Healthcare Overview

Appendix D - The Bridge Overview

Appendix E - Turning Point Overview

Appendix F – Leicestershire Partnership Trust – Homelessness Mental Health Team

Appendix G - Homelessness Joint Specific Needs Assessment Presentation

Appendix H - Homelessness Joint Specific Needs Assessment

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