

1 exacerbated the needs of people who are homeless. A range of approaches
2 have been developed to address the needs of people who are homeless and
3 improve their outcomes. However, there is no national guidance on providing
4 joined-up health and social care that considers social, emotional, mental and
5 physical wellbeing as well as other care and support needs for people who are
6 homeless.

7 Rough sleeping is the most visible and severe form of homelessness, with
8 often catastrophic outcomes. However, focusing only on people who sleep
9 rough ignores people at very high risk of sleeping rough. There are some
10 groups of homeless people, for example women and young people, that rarely
11 sleep rough but who are in an equally difficult situation with multiple and
12 complex health and social care needs will also be covered. These include
13 people who are temporarily staying in hostel accommodation and people
14 using day centres. Users of day centres might have a roof over their heads at
15 night but often have no place to be during the day and no other access to
16 basic necessities such as food, facilities for personal hygiene and clothing.
17 Furthermore, it is important to include people with a history of homelessness
18 and ongoing complex health and social care needs who are at high risk of
19 returning to homelessness.

20 **2 Who the guideline is for**

21 This guideline is for:

- 22 • local authorities
- 23 • commissioners
- 24 • providers of services
- 25 • healthcare professionals in primary, secondary and tertiary care
- 26 • social care practitioners
- 27 • people who experience homelessness, their families, advocates, and the
28 public.

29 It will also be relevant for:

- 30 • voluntary and charity sector

- 1 • housing services
- 2 • criminal justice system
- 3 • community groups
- 4 • religious bodies.

5 NICE guidelines cover health and care in England. Decisions on how they
6 apply in other UK countries are made by ministers in the [Welsh Government](#),
7 [Scottish Government](#), and [Northern Ireland Executive](#).

8 ***Equality considerations***

9 NICE has carried out [an equality impact assessment](#) during scoping. The
10 assessment:

- 11 • lists equality issues identified, and how they have been addressed
- 12 • explains why any groups are excluded from the scope.

13 The guideline will look at inequalities relating to protected characteristics and
14 other factors that will be identified during the development of this guideline.

15 **3 What the guideline will cover**

16 **3.1 Who is the focus?**

17 **Groups that will be covered**

18 People who are homeless, defined as follows for this guideline:

- 19 • People who are rough sleeping (meaning people without homes who sleep
20 outside or somewhere not designed for habitation)
- 21 • People who are temporary residents of hostel accommodation (such as
22 emergency night shelters, short-stay hostels, longer stay hostels, domestic
23 violence safehouses, safehouses for victims of modern slavery and
24 probation hostels)
- 25 • People who use day centres that provide support (such as food, showers,
26 clothing and advice) for homeless people

- 1 • People with history of rough sleeping, temporary use of hostel
2 accommodation or using day centres, who remain at high risk of homeless
3 because of ongoing complex health and social care needs.

4 Within these populations, specific consideration will be given to the sub-
5 populations identified in the equalities impact assessment form.

6 **Groups that will not be covered**

- 7 • Children and young people up to 16 years of age
8 • Travellers
9 • People staying in institutions in the long-term
10 • People staying temporarily with family and friends ('sofa surfing')
11 • People staying on campsites or other sites used for recreational purposes
12 or organised protest
13 • Squatters.

14 Note that people from some of these groups might be covered by the
15 guideline if they fit the criteria specified above. For example, a person who
16 identifies as a traveller who sleeps rough.

17 **3.2 Settings**

18 **Settings that will be covered**

- 19 • Settings where healthcare is provided, including outreach, primary,
20 secondary and tertiary healthcare, custody suites
21 • Settings where social care is provided
22 • Emergency or temporary housing.

23 **3.3 Activities, services or aspects of care**

24 **Key areas that will be covered**

25 We will look at evidence in the areas below when developing the guideline.

26 1 Access and engagement

27 Approaches for removing barriers and improving access to and/or

28 engagement with services, which could improve social, emotional, mental and

1 physical health and social care outcomes for the person, for example
2 outreach, in-reach, peer support or specialist services. We will broadly
3 categorise health and social care needs into 3 categories: prevention of ill
4 health and early intervention (for example, active case findings, screening
5 programmes, immunisation and health promotion); crisis management and
6 emergency care; and long-term health and social care.

7 2 Joining up health and social care

8 Approaches for joining up services within and across health, social care and
9 housing.

10 3 Views and experiences

11 People's views and experiences of what improves access to and/or
12 engagement with services, and delivery of care will be explored.

13 **Areas that will not be covered**

- 14 • Primary prevention of homelessness
- 15 • Clinical interventions for specific health conditions.

16 **Related NICE guidance**

17 Cross references to relevant NICE guidelines will be made as appropriate.

18 **NICE guidance about the experience of people using NHS services**

19 NICE has produced the following guidance on the experience of people using
20 the NHS. This guideline will not include additional recommendations on these
21 topics unless there are specific issues related to integrated health and care for
22 people who are homeless through being roofless:

- 23 • [Medicines optimisation](#) (2015) NICE guideline NG5
- 24 • [Patient experience in adult NHS services](#) (2012) NICE guideline CG138
- 25 • [Service user experience in adult mental health](#) (2011) NICE guideline
26 CG136
- 27 • [Medicines adherence](#) (2009) NICE guideline CG76

1 **3.4 Economic aspects**

2 We will take economic aspects into account when making recommendations.
3 We will develop an economic plan that states for each review question (or key
4 area in the scope) whether economic considerations are relevant, and if so
5 whether this is an area that should be prioritised for economic modelling. We
6 will review the economic evidence for all areas and consider if conducting de-
7 novo economic analysis is required or feasible.

8 **3.5 Key issues and draft questions**

9 While writing this scope, we have identified the following key issues and draft
10 questions related to them:

11 1 Access and engagement

12 1.1 What approaches are effective in improving access to and/or
13 engagement with health and social care for people who experience
14 homelessness in relation to:

- 15 • prevention of ill health and early intervention
- 16 • crisis management and emergency care
- 17 • long-term care?

18 2 Joining up health and social care

19 2.1 What approaches are effective in delivering joined-up health,
20 social care and housing services for people who experience
21 homelessness?

22 3 Views and experiences

23 3.1 What are the views and experiences of people involved on how
24 to improve access to and/or engagement with health and social
25 care and delivery of care and support for people who experience
26 homelessness?

27 The key issues and draft questions will be used to develop more detailed
28 review questions, which guide the systematic review of the literature.

1 **3.6 Main outcomes**

2 The main outcomes that may be considered when searching for and
3 assessing the evidence are:

- 4 1 Themes from qualitative data, for example, people's experiences of care
5 or services
- 6 2 Quality of life (both health- and social-related quality)
- 7 3 Health outcomes including social, emotional and mental health and
8 wellbeing, substance use, physical health and wellbeing, morbidity and
9 mortality
- 10 4 Recovery (such as social wellbeing, housing status, employment,
11 education)
- 12 5 Imprisonment and engagement with criminal justice system
- 13 6 Access to and engagement with care
- 14 7 Unplanned use of services

15 The exact list of outcomes to be considered for each topic are context
16 dependent and will be discussed when detailed review questions are
17 formulated.

18 **4 NICE quality standards and NICE Pathways**

19 **4.1 NICE quality standards**

20 **NICE quality standards that will use this guideline as an evidence source**
21 **when they are being developed**

- 22 • Integrated health and care for people who are homeless through being
23 roofless. NICE quality standard. Publication date to be confirmed.

24 **4.2 NICE Pathways**

25 **This section is completed by the digital team pathways editors.**

26 **This section will include a draft outline of the pathway based on the scope. It**
27 **will also include details of other NICE guidance that will be in the pathway –**
28 **for example, any interventional procedures or technology appraisals that are**

1 directly relevant to the topic and that will appear as source guidance or any
2 guidelines that overlap with the topic in development.

3 [Type here; use 'NICE normal' style]

4 **5 Further information**

This is the draft scope for consultation with registered stakeholders. The consultation dates are 5 October to 2 November 2020.

The guideline is expected to be published in March 2022.

You can follow progress of the [guideline](#).

Our website has information about how [NICE guidelines](#) are developed.

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