

**FRAMEWORK FOR MENTAL HEALTH SERVICES IN SCOTLAND**

**SECTION 3: SERVICE PROFILES**

**SERVICES FOR HOMELESS PEOPLE WITH MENTAL HEALTH PROBLEMS**

Prevalence: Between 25 and 40% of homeless people are estimated to have mental health problems.

<b>Service Element</b>	<b>Description of Needs</b>	<b>Ways in Which Services May Respond</b>
<b>Proactive Outreach Services</b>	Generally, homeless people are not registered with a primary care service. Service commissioners therefore need to assess the numbers and needs of those who are homeless within any locality. Care should be taken to meet the particular needs of roofless people; of the hidden homeless (ie those who sleep on a succession of “friends” floors); and those in homeless hostels and other temporary accommodation.	<ul style="list-style-type: none"> <li>• Assertive outreach on a 24-hour basis.</li> <li>• Drop-in centre which offers a range of mental health services, benefits advice etc (perhaps jointly with primary care services).</li> <li>• Flexibility of response.</li> <li>• Linkage with long-term care services.</li> </ul>
<b>Liaison</b>	The service commissioned should ensure the identification of a lead individual with responsibility for the co-ordination of a multi-agency inter-disciplinary response which meets the health and social needs of homeless people with mental health problems. This will require close, and named, liaison between staff in accident and emergency units and in housing and social work agencies.	<ul style="list-style-type: none"> <li>• Clear procedures at local level for dealing with homeless people.</li> <li>• Identified liaison personnel in housing, health and social work.</li> <li>• Support from link staff in settings with regular contact with homeless people.</li> <li>• Links with any local Rough Sleepers Initiative Partnership.</li> </ul>