

## Waltham Forest: Supporting and protecting vulnerable groups - Impact checklist

Groups to consider	Local lead	Local considerations	Other services & partners identified to help groups understand, engage and comply with the programme	Key actions to mobilise and coordinate support
Residents receiving direct care and support from Council and VCS services (ASC, CSC, VCS etc.)	Children and Families	Review current support available for those who have an allocated Social Worker/Team and explore how any additional gaps through self-isolation could be addressed	<p>Third sector care providers commissioned to provide hands on care and assistance to individuals with multiple care needs.</p> <p>Primary care and NELFT Community Health Services also identified as key partners.</p>	Review current support available for individuals who have an allocated Social Worker/Team who have been asked to self-isolate.
Residents experiencing domestic abuse	Community Safety	<p>Residents who are identified as having domestic abuse support needs can be referred through to the MASH. MASH will undertake initial assessment and triage using existing pathways.</p> <p>Medium and high-risk cases in need of advocacy or therapeutic support will be referred to Solace. High-risk cases will also be referred to DRM/ MARAC.</p> <p>Low risk cases will be assessed by the VAWG team for access to the wellbeing service (phone support for isolating women who are not in need of crisis support)</p>	<p>The VAWG team has liaised with MASH already to ensure the pathway is robust.</p> <p>VAWG will engage with Solace to ensure the existing services meet the needs of survivors identified via test and protect</p>	Please mark TEST AND PROTECT in the subject heading of the MASH referrals to ease the referral pathway

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<p>Residents experiencing homelessness, living in Houses of Multiple Occupation (HMO), temporary accommodation or precarious housing situations</p>	<p>Housing Services</p>	<p><b>Street homelessness:</b> For rough sleepers who are required to self-isolate, referrals can be made as per the Self-Isolation Protocol for suitable accommodation.</p> <p>Continue with current multi-agency approach between commissioned services and voluntary organisations to reach out to as many rough sleepers as possible.</p> <p><b>Homelessness (in Hostels):</b></p> <ol style="list-style-type: none"> <li>1. Isolate residents who have tested positive and those with symptoms in accommodation suitable for successful self-isolation as defined in govt. guidance. Maudley Lodge likely to be the biggest concern with regard to this as it is the only large hostel with shared facilities.</li> <li>2. Isolate any staff member who tests positive or develops symptoms in their home.</li> </ol>	<p><b>Street homelessness:</b> Continue to work with commissioned outreach services, St Mungo's &amp; Thamesreach Rapid Response.</p> <p>Rough Sleeper's Mental Health Team; Change, Grow, Live and St Mungo's Single Homeless Service.</p> <p>Internal teams, including Neighbourhood &amp; ASB.</p> <p>Statutory services such as Adult Social Care and Police.</p> <p><b>Homelessness (in Hostels):</b></p> <ol style="list-style-type: none"> <li>1. LA SPoC inform service commissioners</li> <li>2. Liaise with the local CCG / GP and other health providers</li> <li>3. Liaise with GLA in their management of hostels, clarify roles to avoid duplication or gaps.</li> <li>4. Infection control follow up</li> </ol>	<p><b>Street homelessness:</b></p> <ol style="list-style-type: none"> <li>1. Updated self-isolation protocol to be shared with partner agencies &amp; internal teams</li> <li>2. Targeted outreach shifts to take place to locate rough sleepers at risk.</li> <li>3. Individual cases to be discussed in monthly T&amp;T meetings.</li> <li>4. SPoC within rough sleeper team to lead on all self-isolation referrals</li> </ol> <p><b>Homelessness (in Hostels):</b></p> <ol style="list-style-type: none"> <li>1. Follow PHE guidelines on isolating cases, PPE use and cleaning</li> <li>2. Inform LA SPoC</li> <li>3. Inform staff and clients with a pre-prepared letter/SMS</li> <li>4. Follow locally developed SOP and risk assessment</li> </ol>
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		<ol style="list-style-type: none"> <li>3. Encourage or arrange testing at earliest possible point after symptoms for staff and/or residents.</li> <li>4. Implement PHE guidance for PPE use and cleaning after a case of covid-19 has been present here.</li> <li>5. Where possible, close communal areas and non-essential facilities to reduce social contact.</li> <li>6. Instigate BCPs as required when staff are unable to work due to illness or isolation.</li> <li>7. Review current measures to prevent spread of covid-19 to ensure they are fit-for-purpose, particularly in the case of two instances of cases and/or close contact identified within the hostel.</li> <li>8. Inform LA SPoC via email when any new member of staff or resident tests positive for Covid-19 using <a href="mailto:public.health@walthamforest.gov.uk">public.health@walthamforest.gov.uk</a></li> <li>9. Inform LA commissioners / senior management if relevant.</li> </ol> <p><b>HMO:</b></p> <ol style="list-style-type: none"> <li>1. If there is a case within an HMO, this should be treated as a household setting and all residents isolated for 14 days.</li> <li>2. In student accommodation, cases should isolate as far as reasonably</li> </ol>	<ol style="list-style-type: none"> <li>5. Provide support and ongoing management of hostel settings</li> <li>6. Convene Local IMT if required</li> <li>7. LA to decide who may visit hostels during outbreak / symptomatic residents, and gather contact information and arrange testing (EHOs)</li> </ol> <p><b>HMO:</b></p> <ol style="list-style-type: none"> <li>1. Services engaged will be based on             <ol style="list-style-type: none"> <li>i) knowledge of the household's current needs</li> <li>ii) any needs identified as a result of illness/need to isolate.</li> </ol> </li> </ol>	<p><b>HMO:</b></p> <ol style="list-style-type: none"> <li>1. Inform LA SPoC via email when made aware of multiple cases of tenants who have tested positive for Covid-19 using <a href="mailto:public.health@walthamforest.gov.uk">public.health@walthamforest.gov.uk</a></li> </ol>
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		<p>practicable in private rooms. Where shared facilities are present, the setting should be treated as a single household.</p> <ol style="list-style-type: none"> <li>3. Implement PHE guidance for PPE use and cleaning after a case of COVID-19 has been present. Here.</li> <li>4. Where possible, consider closing communal areas to reduce social contact. Likely only possible for student accommodation.</li> <li>5. Review measures to prevent spread of COVID-19 to ensure they are fit-for-purpose, particularly in the case of two instances of cases and/or close contact identified within the setting.</li> </ol> <p><b>Temporary Accommodation:</b></p> <ol style="list-style-type: none"> <li>1. Immediate assessment of risk to other residents and staff.</li> <li>2. Ensure household/individual able to isolate</li> <li>3. Immediate transfer if necessary</li> <li>4. Notification to staff, visitors, other agencies</li> <li>5. Confirm with affected household regular channels of communication to monitor infection – we are currently carrying out regular welfare checks by telephone of our Hostel residents.</li> </ol>	<p><b>Temporary Accommodation:</b></p> <ol style="list-style-type: none"> <li>1. Notification to LA SPoC</li> <li>2. Services engaged will be based on             <ol style="list-style-type: none"> <li>i) knowledge of the household's current needs</li> <li>ii) any needs identified as a result of illness/need to isolate.</li> </ol> </li> <li>3. Use of the TA TARSO team to coordinate response and engagement where more than one agency is involved.</li> </ol>	<p><b>Temporary Accommodation:</b></p> <ol style="list-style-type: none"> <li>1. Follow PHE guidelines for PPE use &amp; cleaning</li> <li>2. Where there is no agency involved and a need is identified, nominate a lead officer to make and follow-up the necessary referral</li> <li>3. Circulating PHE information to TA residents again, to remind them of the immediate need to report any outbreaks, guidance on being safe.</li> <li>4. Information on testing, where &amp; when.</li> <li>5. Update BCP</li> </ol>
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Residents experiencing drug and alcohol issues	Public Health	<p>If an individual had a substance misuse need and was a client of Change, Grow, Live (substance misuse provider), there would be existing arrangements in place to support them to receive their behavioural/group support and medicines whilst at home.</p> <p>If an individual was not currently in contact with the substance misuse service, subject to data sharing arrangements being in place, they could be contacted by the substance misuse provider and assessed for any support that may be required whilst isolating.</p>	<p>Not all residents will want to engage with substance misuse provider/treatment. Therefore other partners (social care, community resilience team etc) may need to support these individuals whilst isolating if they don't engage or have non substance misuse needs.</p>	<p>Consider arrangements for sharing test and protect notifications with substance misuse provider.</p>
Residents experiencing mental ill-health	NELFT	<p>Consider needs of individuals with severe and enduring mental illness with an allocated worker and in receipt of care from secondary mental health existing additional support services brokered through LBWF social care.</p> <p>Consider needs of individuals not in receipt of secondary mental health care.</p>	<p>Third sector care providers commissioned to provide hands on care and assistance to individuals with multiple care needs.</p> <p>Primary care and NELFT Community Health Services.</p>	<ol style="list-style-type: none"> <li>1. Local mental health teams already provide telephone and face to face support to this vulnerable patient group</li> <li>2. All treatment that is required is administered using PPE and masks and hand gel are offered to patients who attend clinics</li> <li>3. Care packages are commissioned where a need is identified, this may include shopping and delivery of foods and support with personal care / Activities of daily living</li> </ol>

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				<ol style="list-style-type: none"> <li>4. Sign posting to local foodbanks/voluntary organisations and advocacy</li>   <li>5. All patients who are classed as vulnerable are highlighted and reviewed twice weekly in multidisciplinary meetings</li> </ol>
Residents experiencing learning disabilities or difficulties	Children and Families	<p>There may be people that are not currently known to ASC who may be need support.</p> <p>Standard Community Help Network offer applies.</p>	<p>Third sector care providers commissioned to provide hands on care and assistance to individuals with multiple care needs .</p> <p>Primary care and NELFT Community Health Services (specialist LD health team)</p> <p>Social Prescribing can support those that do not have an allocated Social Worker/ community nurse and signpost to generic Community Help Network offer.</p>	CAB/Carers First can promote information to adults who may use their advocacy groups
Sex workers and victims of trafficking	Community Safety	Residents who are identified as having domestic abuse support needs can be referred through to the MASH.	The VAWG team has liaised with MASH already to ensure the pathway is robust.	Please mark TEST AND PROTECT in the subject heading of the MASH referrals to ease the referral pathway.

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		<p>MASH will undertake initial assessment and triage using existing pathways.</p> <p>VAWG team will support in navigating referrals to existing specialist support provision.</p>		
Undocumented migrants, those with other immigration issues and those with No Recourse to Public Funds	N/A	N/A	N/A	N/A
Residents who do not speak English	Resident Services	Standard Community Help Network offer applies.	N/A	N/A
Residents who have low levels of literacy	Resident Services	Standard Community Help Network offer applies.	N/A	N/A
Residents with limited/no access to technology	Resident Services	Standard Community Help Network offer applies.	N/A	N/A
Residents with insecure or limited income	Resident Services	To be identified on referral.	Community Help Network can signpost to available local support from Food Banks and CAB.	Community Help Network can signpost to available local support from Food Banks and CAB.
Elderly residents	Resident Services	Standard Community Help Network offer applies.	N/A	N/A
Other local groups (list): •Shielded population not otherwise mentioned	Resident Services	Are in receipt of existing offer from the Community Help Network.	N/A	N/A