

Working Together with Families who are Homeless

An inclusion health toolkit for professionals supporting homeless families



Using this Toolkit



Executive Summary

Family homelessness is one of the most significant public health challenges facing children today. Community professionals are uniquely placed to identify needs earlier, coordinate support, and making life changing outcomes.

Why this toolkit is important

135,580

Households living in temporary accommodation¹

Earlier support

Early identification can change a child's life trajectory

Working together

Better outcomes through partnership working

Who is this toolkit for?



Health Visitors



School nurses



Community nurses



Housing teams



Voluntary sector



Local authorities

This toolkit is intended to support community nurses and their partners to identify need earlier, reduce health inequalities and improve outcomes for families experiencing homelessness through compassionate, evidence-informed and multi-agency practice.

¹ www.gov.uk

Using this Toolkit

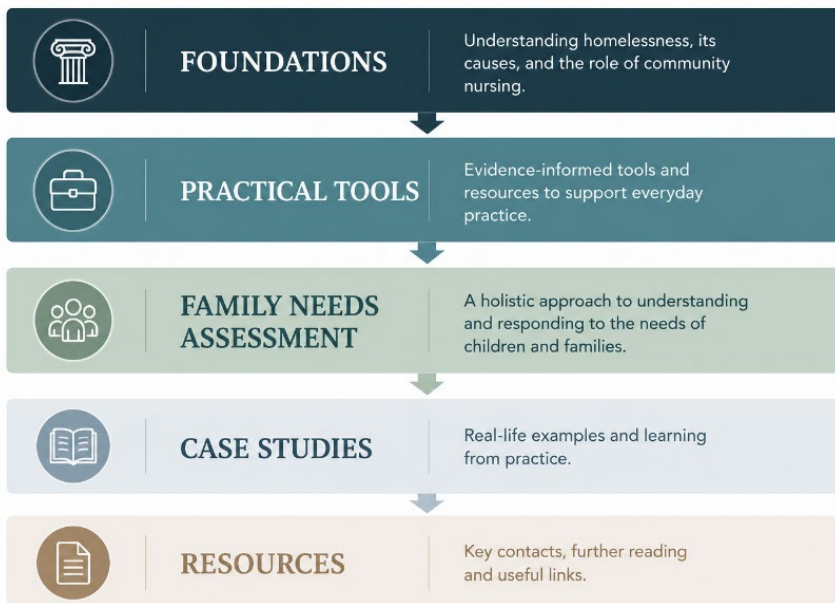


Executive Summary

How to use this toolkit

The toolkit is designed to take you from understanding the challenges faced by families experiencing homelessness through to practical assessment, decision-making and ongoing support.

What's inside?



What difference will this make?

- | | |
|--------------------------------|---------------------------------|
| ✓ Earlier identification | ✓ Better coordinated care |
| ✓ More confident practitioners | ✓ Reduced health inequalities |
| ✓ Better outcomes for children | ✓ Stronger multi-agency working |

Developed using....

Evidence | Lived Experience | Partnership Working
Professional Expertise & National Guidance

01

Introduction



Breaking the Cycle, Building Futures

This toolkit aims to promote health inclusion for people experiencing homelessness by bridging clinical, housing, and social services, focusing on early, family-centred interventions, and providing community nurses with practical resources and confidence.

Homelessness is not simply the absence of a home—it is a deeply disruptive experience that carries enduring consequences for health, wellbeing, and social inclusion. For families, especially those with children, the stakes are even higher. The instability, stigma, and trauma of homelessness can shape life outcomes across generations, increasing the risk that today's child without a home becomes tomorrow's adult still searching for one.

This toolkit recognises the vital role of community nursing professionals in responding to the full spectrum of homelessness—from families in temporary accommodation to those facing hidden homelessness such as sofa-surfing, insecure housing, or escaping domestic violence.

It embraces a health inclusion approach: one that meets people where they are, sees the whole person behind the postcode, and actively works to reduce health inequalities rooted in housing injustice.

Early intervention is not only compassionate—it is transformational. Community nurses are often among the first to notice when a family is beginning to fall through the cracks.

Timely, trusted support can interrupt a trajectory of disadvantage and prevent escalating health issues, safeguarding both immediate wellbeing and long-term resilience.

Foundational Guidance	Practical Tools	Family Needs Assessment	Building Skills & Confidence	Case Studies and Best Practice	Appendix
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The Expertise Behind the Toolkit

Three perspectives. One shared purpose.

Families experiencing homelessness need more than a service response. They need professionals who understand the complexity of their lives, systems that can respond effectively, and practical tools that turn evidence and experience into better care.

Families experiencing Homelessness: a Toolkit for Professionals has been developed by three professionals bringing complementary expertise across digital transformation, inclusion health, public health nursing, frontline practice, strategic leadership and policy implementation.

Together, the authors combine strategic insight, clinical expertise and more than 40 years of experience working alongside people experiencing exclusion.

This breadth of perspective has shaped a toolkit designed not simply to inform professionals, but to support consistent, confident and compassionate action.

Lisa Gavin

Specialist Health Visiting • Homeless Families • Health Inequalities

Lisa is a **Registered Nurse and Health Visitor** with more than **30 years' experience in the UK**. Originally trained in Australia, she founded and led Surrey's **award-winning Health Inclusion Team**, providing innovative outreach to marginalised and homeless families and tackling **health inequalities**.

As **Health Lead for the national Families First Partnership Programme**, Lisa leads health engagement in safeguarding reform across acute, community, mental health, primary care and maternity services. She works with partners to strengthen **early intervention, family support and multi-agency child protection**, improving outcomes for children and families.

A **Queen's Nurse, Professional Nurse Advocate and Surrey Core20PLUS5 Ambassador**, Lisa is recognised for her **compassionate leadership, frontline expertise and commitment to partnership working with vulnerable families**. Her team's work has received national recognition from the **Burdett Trust and the CPHVA for Equality, Diversity and Inclusion**.

Anne Dowling

Strategic Leadership • Digital Transformation • Inclusion Health

Anne brings extensive experience of **leading technology-enabled change across health and social care**, with a particular focus on improving access, outcomes and inclusion for vulnerable communities.

Her expertise spans **strategic planning, digital healthcare transformation, service improvement, governance and risk management**. For this toolkit, Anne brings a **systems and implementation perspective**, helping translate complex challenges and lived experience into practical, usable tools with the potential for meaningful system-wide impact.

The Expertise Behind the Toolkit

Three perspectives. One shared purpose.

Jane Cook

Inclusion Health • Public Health • Strategic Influence

Jane is a **Registered General Nurse, Public Health Specialist and Queen's Nurse** with more than **40 years' experience** delivering and developing healthcare for people experiencing exclusion.

Jane has worked across a wide range of excluded communities and settings, from hostels and day centres to prisons and street-based services. She currently works as **Health and Social Care Lead at Groundswell**, combining frontline and strategic expertise.

Jane brings a unique combination of **four decades of inclusion-health practice, public health expertise and strategic influence**, helping ensure the toolkit reflects both what professionals need to know and how services can better respond to families experiencing exclusion.

A complementary team

The strength of this toolkit lies in the **combination of three perspectives**:

Anne Dowling brings the **strategic, digital and implementation lens**.

Lisa Gavin brings **current frontline clinical and health visiting expertise**, alongside direct experience of delivering outreach to homeless families and other excluded communities.

Jane Cook brings **more than four decades of inclusion-health practice, public health expertise and strategic influence**.

Together, they connect **policy, practice and implementation** — ensuring that *Families experiencing Homelessness: a Toolkit for Professionals* is grounded in lived realities, informed by evidence and experience, and designed to support professionals to translate knowledge into action.

From expertise to action.

A practical resource developed by professionals who understand the environment — and the families within it.

02

Designed to support you

This toolkit provides a useful collection of guidance aimed at assisting public health nurses, such as health visitors, school nurses, general practice nurses, children's nurses, and midwives.

It focuses on fostering effective engagement with the needs children, young people, and families facing homelessness, exclusion, and marginalisation, with the goal of reducing health disparities and achieving improved outcomes.



Homelessness: Definitions and Key Facts

“ Children who have been in temporary accommodation for more than a year are three times more likely to demonstrate problems such as anxiety and depression. ”

Shelter Chance of a Lifetime; the impact of bad housing on children's lives report

The Growing Challenge

Key facts, trends and challenges

Recent trends in temporary accommodation for families in the UK highlight several concerning developments:

- **Over 165,000 children** are living in temporary accommodation in England - the highest number ever recorded.
- **Rising Numbers of Children in Temporary Housing:** The number of children living in temporary accommodation continues to climb, with estimates suggesting **206,000 children** could be affected by 2029—a **26% increase** from current figures.
- An **increasing number** of undocumented migrants having babies adding more and more pressure into the system
- **Increase in Temporary Accommodation:** As of December 2024, **127,890 households** were living in temporary accommodation, marking a **13.6% rise** from the previous year. Families with children in temporary housing also increased by **13.7%**.
- **Overcrowding and Poor Conditions:** Many families are placed in unsuitable housing, often in cramped spaces with poor living conditions, including damp, mould, and inadequate heating.
- **Long-Term Stays:** Temporary accommodation is meant to be short-term, but many families remain stuck for years due to the chronic shortage of social housing.
- **Financial Strain on Local Authorities:** Councils are spending **£2.3 billion annually** on temporary accommodation, with costs expected to rise significantly if more social housing isn't built.
- **Out-of-Area Placements:** Nearly **one in three homeless households** are placed outside their local area, disrupting children's education and family support networks.
- **Government Response:** The UK government has pledged nearly **£1 billion** in homelessness services in 2025 and is developing a long-term strategy to address the crisis.
- **Decline in Homelessness Assessments:** The number of households assessed as homeless or at risk of homelessness fell by **7.7%** compared to the same quarter in 2023.
- **More Families Securing Accommodation:** The proportion of households successfully securing accommodation has been improving for three consecutive quarters.

Statistics and the effects of Homelessness on Families

132,000

households were homeless and living in temporary accommodation in 2025- another record high figure.

317,430

households were accepted as either homeless or at imminent risk of it by their council, last year - the highest number since records began, and up 9% on the previous year.

25,910

Is a record for the number of households threatened with homelessness as a result of a Section 21 no fault eviction in 2023.

74

Children have died with temporary accommodation as a contributing factor to the vulnerability, ill health or death

Key Insights - what do families expect from us?

Collated from a number of professionals working with families these guidelines aim to provide proactive, compassionate care, fostering stability and well-being for families navigating temporary living situations.

01

Build Trust Through Consistent, Compassionate Engagement

Establish regular contact, showing genuine care and understanding of each family's unique situation. Trust fosters open communication, allowing families to share their needs and concerns more freely.

02

Prioritise Holistic Assessments

Consider not just physical health but also mental well-being, developmental milestones, and environmental factors. Tailored assessments help identify potential issues early, ensuring timely interventions.

03

Empower Families with Practical Resources

Provide clear information on local services, healthcare access, educational support, and community programmes. Equipping families with knowledge promotes independence and resilience.

04

Advocate for Safe and Healthy Living Conditions

Collaborate with housing services and local authorities to address environmental risks. Advocate for improvements when living conditions impact health, ensuring the family's voice is heard.

05

Facilitate Strong Community Connections

Encourage engagement with community groups, parent networks, and support services to reduce isolation. Social connections offer emotional support and practical assistance, enhancing overall well-being.

Overview of Health Inclusion Principles for Homeless Families

- **Equity of Access:** Homeless families often face barriers to mainstream health services (e.g., registration, documentation, transport, stigma). Health inclusion aims to remove these barriers so they can access primary care, preventive services, and specialist support on equal terms.
- **Person- and Family-Centred Care:** Services should recognise the complex needs of homeless families, including children's developmental, educational, and safeguarding needs, alongside parents' mental and physical health.
- **Trauma-Informed Approaches:** Many homeless families experience domestic violence, poverty, and instability. Health inclusion requires services that are sensitive to trauma, non-judgemental, and supportive of recovery.
- **Integration of Care:** Effective support requires coordination between health, housing, social care, and voluntary services, reducing fragmentation and preventing families from "falling through the gaps."
- **Prevention and Early Intervention:** Focus on addressing social determinants of health (e.g., housing, food security, income, education) to break the cycle of poor health and repeated homelessness.

Hidden Homelessness

Hidden homelessness refers to individuals who are experiencing homelessness but are not visible in official statistics or on the streets. They are often staying with friends or family (sofa surfing), in temporary or inadequate housing, or in other situations that are not officially recorded as homelessness.

Key characteristics of hidden homelessness:

Not officially counted:

Individuals experiencing hidden homelessness are not included in official homelessness counts and statistics.

Precarious housing:

They may be staying in overcrowded or unsuitable conditions, such as "beds in sheds," squats, or with friends or family on a temporary basis.

Lack of support:

Hidden homeless individuals often lack access to the support and services available to those who are visibly homeless.

Invisible to the public:

Hidden homelessness is often not apparent to the general public, making it an under-recognized and under-addressed issue.

3 groups are more likely to face hidden homelessness:



Women



Children



Ethnic
minority
groups

“ It is estimated there are 400,000 hidden homeless individuals in the UK

Hidden Homelessness



Sofa surfing is a precarious form of homelessness, marked by instability and poor living conditions. It adversely affects mental and physical health, relationships, and job prospects while increasing exposure to risks like exploitation. Key drivers include housing affordability issues, welfare reform gaps, and personal crises. Local authorities often overlook sofa surfing, missing chances for intervention. Effective prevention demands improved access to affordable housing, personalized support, and legal frameworks to recognize sofa surfers as homeless and provide necessary assistance.

LONDON ASSEMBLY

Housing Committee

Holding the Mayor to account and investigating issues that matter to Londoners

Hidden homelessness in London

September 2017



Executive summary

- Hidden homeless people are those without a place to call home, but who are hidden from official statistics and not receiving support.
- They can find themselves in precarious situations, including sofa surfing, sleeping rough, squatting and sleeping on public transport. These can be dangerous, and leave people at risk of abuse, assault and exploitation.
- We have estimated the numbers in London and found that 13 times more people are homeless but hidden than are visibly sleeping rough – as many as 12,500 each night.
- Young people are most likely to be affected, particularly people who identify as LGBT. We also heard that this affects people who aren't eligible for homelessness support and people fleeing domestic violence.
- Only one in five young people affected present to a council, meaning they remain hidden from possible support.
- Some that do seek help from councils fail to be recognised as vulnerable, despite being in danger.
- The new Homelessness Reduction Act may help with this problem, but the Mayor and Government need to support local authorities in tackling it, look at gaps in eligibility for support, and do more to promote access to homelessness services.

Practical tools

From recognising early signs of need to connecting families with the right support, this journey shows how joined-up action can prevent homelessness from becoming a cycle of disadvantage. At every stage, the child and family remain at the centre.



The **SAFE Protocol** developed by the Shared Health Foundation and the APPG for Households in Temporary Accommodation aims to improve continuity of support by ensuring that schools and GPs are notified when a child enters temporary accommodation. Alongside this, the statutory **Duty to Refer** provides an important route for specified public authorities in England to refer people who are homeless or at risk of homelessness to a housing authority, with their consent.

['How to Support Homeless Families': Guidance for Local Authorities, Schools and Primary Care - Shared Health Foundation](#)

Practical Resources

Here is a short selection of trusted resources for professionals supporting families experiencing homelessness.

Shared Health Foundation – Homeless Families

Practical guidance for local authorities, schools and primary care, including the SAFE Protocol.

Shelter – Professional resources

Practical tools and guidance on homelessness, housing rights, temporary accommodation and Duty to Refer.

Queens Institute of Community Nursing - ICN:

Addressing health inequalities in homeless children, young people and families

GOV.UK – Homelessness: Applying All Our Health

Guidance for health and care professionals on recognising homelessness, improving access to services and working across systems.

Groundswell – Health Resource Hub

Practical health resources developed with people with lived experience of homelessness and frontline professionals.

This section is continually updated as new guidance, tools and resources become available. If you know of a resource that would be useful to professionals supporting families experiencing homelessness, we would welcome your suggestions.

Temporary Accommodation Notification Duty



The **Temporary Accommodation Notification Duty (TAND)** is an important step towards ensuring children and families do not become invisible when they move into temporary accommodation. It strengthens communication between housing, health and education services, helping professionals work together to maintain continuity of support and identify needs early.



What is the Temporary Accommodation Notification Duty?

The Temporary Accommodation Notification Duty (TAND) introduces a statutory requirement for local authorities to notify key services when a child moves into temporary accommodation, with consent. The aim is to help ensure that key professionals know about the move and can maintain continuity of care, education and support.



Who needs to know when a child moves into temporary accommodation?

The notification is intended to alert the child's school, GP and Health Visiting Team, helping services understand that the child has moved and consider what support or follow-up may be needed.



What does this mean for professionals working with families?

Professionals need to understand their role in responding to a family's move into temporary accommodation and use the notification as an opportunity to strengthen communication and coordination around the child.



**Shared
Health
Foundation.**

Reducing the Impact
of Poverty on Health.

Click [here](#) to watch 'Understanding the Temporary Accommodation Notification Duty'

Here you will find a practical guidance and training from Shared Health Foundation

04

Family Needs Assessment



Building a Comprehensive Picture of Family Needs

We are piloting a family needs assessment tool.

This assessment is designed to support our understanding of the needs and strengths of families experiencing homelessness. It is an iterative process; it may be revisited and updated over time to build a more comprehensive picture of each family's situation.



The assessment is divided into six key areas:

1. **Physical and Mental Health Concerns;** identifying any health needs that may require immediate or ongoing support.
 2. **Educational Concerns;** exploring access to learning and barriers to education.
 3. **Environmental Health Concerns;** considering the impact of housing conditions and surroundings.
 4. **Social and Emotional Support;** looking at networks of care, resilience, and emotional wellbeing.
 5. **Safeguarding Assessment;** ensuring children and vulnerable adults are safe from harm.
 6. **Risk / Vulnerability;** recognising wider risks that may affect stability, safety, or access to services.
-

By approaching these areas in stages and returning to them as needed, we aim to build a fuller, more accurate understanding of family needs, and to ensure that support is both timely and tailored to individual circumstances.

The Assessment Tool

– currently being piloted

This assessment tool is currently being piloted with practitioners working with families experiencing homelessness.

We are using the pilot to test how well the assessment works in practice, whether it captures the issues that matter most to families, and how easy it is for practitioners to use within their existing work.

Questions we are looking at

Is it practical?	Does it capture the whole family?	What could improve it?
Does the assessment work within real-world practice and time constraints?	Does it help practitioners identify the health, developmental, environmental, social and safeguarding needs that may otherwise be missed?	We will use feedback from practitioners to refine the questions, structure and guidance.

What happens next?

The assessment will be reviewed and updated as the pilot develops.

This page will be updated as we learn from practice and make changes to the tool.

We welcome feedback from practitioners using the assessment. Your experience will help us develop a practical tool that is useful, proportionate and relevant to families experiencing homelessness. Please contact us directly

05

Building Skills and Confidence



Professional Learning Resources

This section brings together key reports, research, and professional insights relevant to frontline practitioners.

The materials are intended to strengthen our understanding of homelessness and its impact on children and families, while supporting reflective practice and continuous learning.

By engaging with this evidence base, practitioners can enhance their knowledge, build confidence, and apply informed approaches when supporting families in temporary or unstable housing.

Professional Associations: Your First Point of Contact

Queen's Institute of Community Nursing is a registered charity dedicated to improving the nursing care of people in the home and community



The Institute of Health Visiting has extensive resources and e-learning modules to improve knowledge, confidence and skills.



Culturally Responsible Care: Considerations for Inclusive and Equitable Healthcare

Health visitors and community professionals play a crucial role in supporting inclusion health groups; populations facing severe social exclusion and multiple barriers to healthcare. These groups include people experiencing homelessness, substance dependency, migrants and refugees, Gypsy, Roma, and Traveller communities, individuals involved in the justice system, victims of modern slavery, and sex workers.

Inclusion health requires tailored approaches. Health visitors often work within multidisciplinary teams, collaborating with school nurses, community nursery nurses, therapists, and specialized coordinators.

For example, Surrey's Inclusion Health Team provides healthcare to Gypsy, Roma, Traveller, asylum-seeking families, and those in temporary accommodation. Similarly, in Hounslow, specialist health visitors support vulnerable families in temporary housing, coordinating services to ensure comprehensive care.

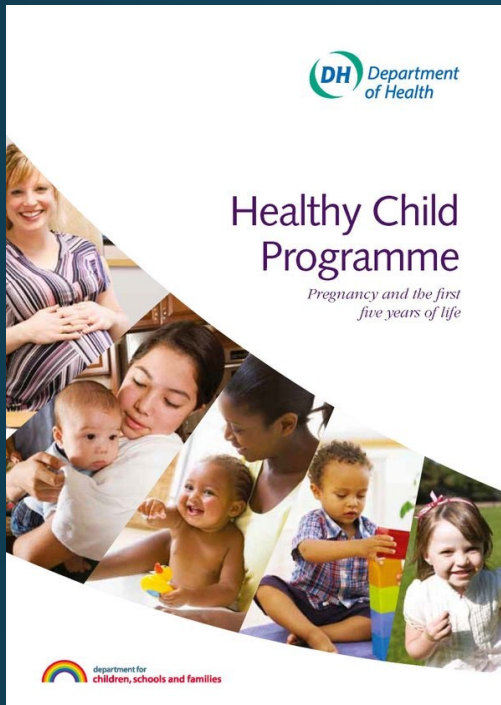
Collaboration is essential. Effective interprofessional teamwork helps address social determinants of health and ensures interventions are holistic and culturally sensitive.

Challenges include limited resources, communication barriers, and lack of clarity about roles. Overcoming these requires ongoing training, structured communication, and commitment to collaborative practice.

National frameworks for inclusion health guide workforce development, integrated service delivery, and reduction of health inequalities.

By working collaboratively and following national principles, health visitors can significantly improve health outcomes for inclusion health groups, bridging gaps in access and supporting vulnerable populations.

Department of Health & Government publications



The Healthy Child Programme (updated in Feb 26), is our national framework for improving the health and wellbeing of children and young people aged 0 to 19 (age 25 for care leavers or those living with special educational needs and disabilities) in England. The programme is led by qualified specialist community public health nurses (SCPHNs) and is structured around 2 age-based phases:

- pregnancy and the early years (ages 0 to 5) delivered by health visiting teams
- the school years (ages 5 to 19) delivered by school nursing teams



The Child Poverty Taskforce set up in July 2024 has comprised Ministers and officials from across government, with advice from external experts. The goal of this strategy is to make systemic change and improvement. The foreword of the report sets out this ambition:

‘Imagine a future where poverty is not a barrier to opportunity. Where every child has the same chances in life. Where background has no bearing on future success. Where every child starts the day ready to learn, having had a good breakfast and slept in a warm bed.’

Pregnancy and Babies



An unstable start

ALL BABIES COUNT:
SPOTLIGHT ON HOMELESSNESS

Sally Hogg, Alice Haynes, Tessa Baradon and Chris Cuthbert

NSPCC
EVERY CHILDHOOD IS WORTH FIGHTING FOR

Caring for young minds
Anna Freud Centre

**Adverse pregnancy outcomes
attributable to socioeconomic and
ethnic inequalities in England: a
national cohort study**
Volume 398, Issue 10314

THE LANCET

NSPCC

The impact of homelessness on babies and their families

Learning resource for the
Homeless Health network, QNI

EVERY CHILDHOOD IS WORTH FIGHTING FOR

Children



A variety of videos are accessible to illustrate the effects of temporary housing on families.

Natasha's Story: life as a new mum in temporary accommodation Shelter Click [here](#)

Young People



At the end of 2018, 62,000 homeless families with 124,000 children lived in temporary accommodation in England, an 80% increase since 2010. Additionally, 92,000 children were in sofa-surfing families, and 375,000 children lived in households behind on rent or mortgage payments, putting them at risk of homelessness. Around 51,000 children lived in temporary accommodation for over six months, and 6,000 for over a year. Poor conditions, overcrowding, and unsafe environments in B&Bs, office block conversions, and shipping containers severely impact children's health, education, and emotional well-being. Including hidden homelessness, over 550,000 children are homeless or at risk of homelessness in England.



The resource draws upon insights from young individuals and families who have experienced homelessness.

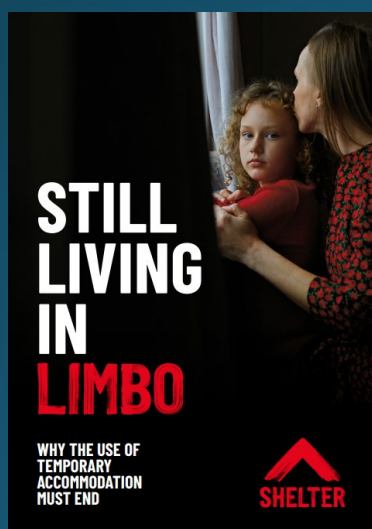
Independent reports



This report by the LGiU Local Government Homelessness Commission highlights the urgent need for a comprehensive housing and homelessness strategy in the UK. It states that homelessness is a national issue, symbolic of broader policy failures and societal neglect. While rough sleeping has been a focus—with government strategies aiming to end it by 2027—it only represents a fraction of the problem.



This research follows on from a 2003 survey on the impact of temporary accommodation, which formed the basis for Shelter's Living in limbo report. One of its key findings was the impact of homelessness on health, and this report is based on further analysis of almost half of the original questionnaires that were returned.



Over the last decade, England has seen a decline of over 100,000 social rented homes, leading to a rise in the use of temporary accommodation. Originally meant for emergencies, temporary housing, it now houses many families, most of them will spend a year or more in these arrangements, highlighting its inadequacy as a short-term solution. Research involving 1,112 individuals in temporary accommodation—the largest survey of its kind—provided valuable insights.

Independent reports



Families are facing huge disparity in the quality and quantity of early childhood services available across the UK. The findings and recommendations in this report make the case for urgent reform and investment in early childhood services, with the aim of reducing the impact of poverty and providing a gateway to wider support for families on low incomes.



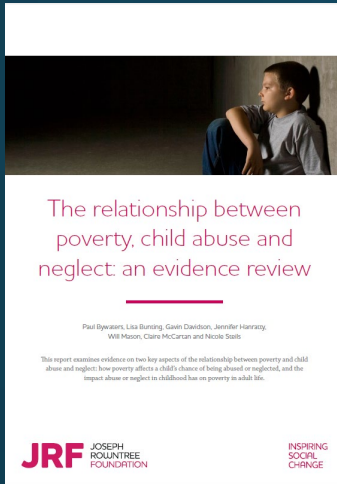
Temporary accommodation is meant to be a short-term solution. But for tens of thousands of people across London, it has become a long-term reality - often in unsuitable, unsafe conditions, and far from the communities they know.

This research lays bare the dire state of temporary accommodation in London



For further information about the Routes to Impact for Temporary Accommodation project and the guidance, contact Leila Leila@leilabaker.net or Theo theo.harrison@urbanhealth.org.uk. You can read more about IUH's work on children's mental health on their website [here](#).

Safeguarding homeless families



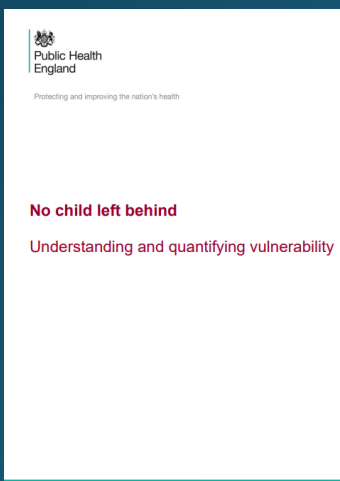
This report outlines:

- UK and international evidence about the association between family poverty and child abuse and neglect;
- UK and international evidence about the impact of childhood abuse or neglect on poverty in adulthood;
- evidence about the costs of child abuse and neglect;
- strengths and weaknesses in the evidence base, and implications for policy-making.



This guidance paper has been produced to help practitioners identify the needs of homeless families and propose interventions and solutions that will act as a safeguard for families who are homeless, thus embedding good practice in service delivery.

This guidance looks at the issues and risks that homeless families and children face or present with and will help you to identify factors that can give you an indication of the risks for families.



This report is intended for leaders and practitioners nationally, regionally and locally concerned with improving outcomes for children and young people. It aims to support directors of public health, working with their local partners, to inform coordinated approaches to reduce the number of children who are vulnerable to poor health and wellbeing and to take action to mitigate risks of poor outcomes. It will be of interest to integrated care systems in planning services which are preventive and protective

Alignment of Policy and Systems



The National Direction of Travel

National policy is increasingly recognising that homelessness is not solely a housing issue but a significant public health challenge requiring coordinated action across health, housing, social care and the voluntary sector.

Recent government and NHS initiatives place greater emphasis on prevention, early intervention, reducing health inequalities and delivering neighbourhood-based, person-centred care.

Community nurses have a pivotal role in identifying families at risk, improving access to healthcare, safeguarding vulnerable children and working collaboratively with partners to improve long-term outcomes. .

Useful policy links

[National Plan to End Homelessness \(MHCLG\)](#)

[Neighbourhood Health Framework \(DHSC & NHS England\)](#)

[NHS Inclusion Health Framework](#)

[NHS Inclusion Health Groups](#)

[Homelessness Statistics – Ministry of Housing, Communities and Local Government](#)

By approaching these areas in stages and returning to them as needed, we aim to build a fuller, more accurate understanding of family needs, and to ensure that support is both timely and tailored to individual circumstances.

Recent policy developments (2025–2026)

Development	Relevance to community nursing
National Plan to End Homelessness (2025)	Introduces a cross-government strategy focused on prevention, earlier intervention, reducing the use of temporary accommodation and improving outcomes through partnership working. (GOV.UK)
Neighbourhood Health Framework (2026)	Promotes integrated neighbourhood teams, closer working between NHS organisations, local authorities and VCSE partners, and a stronger focus on tackling health inequalities within local communities. (GOV.UK)
NHS Inclusion Health Framework	Reinforces the need for trauma-informed, person-centred services and proactive outreach to people experiencing homelessness and other forms of social exclusion. (NHS England)
Housing-led approaches	Recent debate continues to emphasise Housing First, prevention, affordable housing and coordinated multi-agency responses as the most effective long-term solutions for reducing homelessness. (The Guardian)

06

Case Studies and Best Practice



Learning from your Peers

This section highlights real-world case studies and examples of best practice from local areas and projects supporting families experiencing homelessness or living in temporary accommodation. By showcasing innovative approaches, practical strategies, and lessons learned, we aim to provide health visitors and other professionals with tangible insights that can be adapted and applied in their own practice. These examples demonstrate how collaborative, family-centred care can make a meaningful difference in the lives of some of the most vulnerable families in our communities.

1. Shared Health Foundation
2. The Magpie Project
3. Surrey Child and Family Health
4. Queens Institute of Community Nursing
Homeless and Inclusion Network
5. The Home Office / NHS England
6. Champions Project
7. Health Innovation Kent, Surrey and Sussex
8. Homewards
9. Friends Families and Travellers

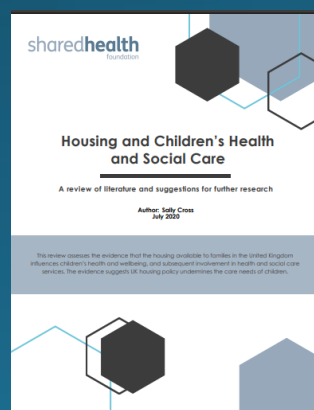
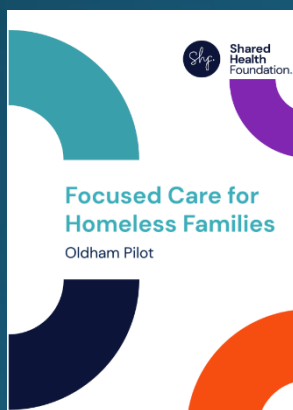
Shared Health Foundation Oldham

Introduction

The Shared Health Foundation in Oldham focuses on reducing health inequalities caused by poverty. They work across Greater Manchester to identify challenges, pilot solutions, and advocate for system changes. Their initiatives include supporting homeless families in temporary accommodation, improving mental health outcomes for vulnerable parents and young people, and engaging communities in health and wellbeing resources.

They also promote integrated working across sectors like health, education, and social care, ensuring that communities are actively involved in their projects. You can learn more about their work [here](#).

Articles and Presentations



The Magpie Project

Introduction

In 2017, a group of around 15 individuals, including mothers, grandmothers, daughters, and concerned community members, came together to address the challenges faced by mothers and their young children living in temporary or unstable housing in our area.

We decided to create a safe, enjoyable, and supportive environment for them to spend their days, and we simply asked how we could assist. This led to the establishment of the Magpie Project, built in collaboration with many remarkable mothers and their children. Some of these families have successfully transitioned to stable lives after their time with us, while others continue to volunteer, participate in our Right Experience Advocacy and Change team, or serve on our Steering Committee. Notably, one individual has even secured employment with us. We feel fortunate to have attracted outstanding staff and volunteers who help us achieve our goals, alongside the incredible support from our enthusiastic community in Newham and our considerate funders.



Surrey Child and Family Health

Access to Health Services

Ensuring Romany, Gypsy, and Traveller communities have equal access to essential health services.

Tailored Support Programs

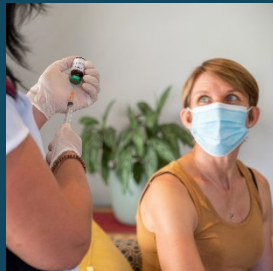
Providing tailored support to meet the unique needs of Romany, Gypsy, and Traveller communities.

Building Community Trust

Building trust with community members through consistent engagement and support.

Advocacy and Collaboration

Advocating for equal opportunities and collaborating with other organizations to address health disparities.



Health Screenings and Immunizations

Health screenings and immunizations are provided to children in temporary housing to ensure their well-being and prevent diseases.



Developmental Support

Developmental support is offered to children to help them reach their full potential despite the instability of temporary housing.



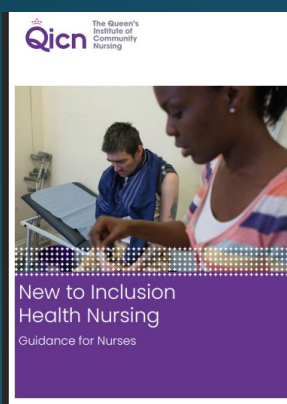
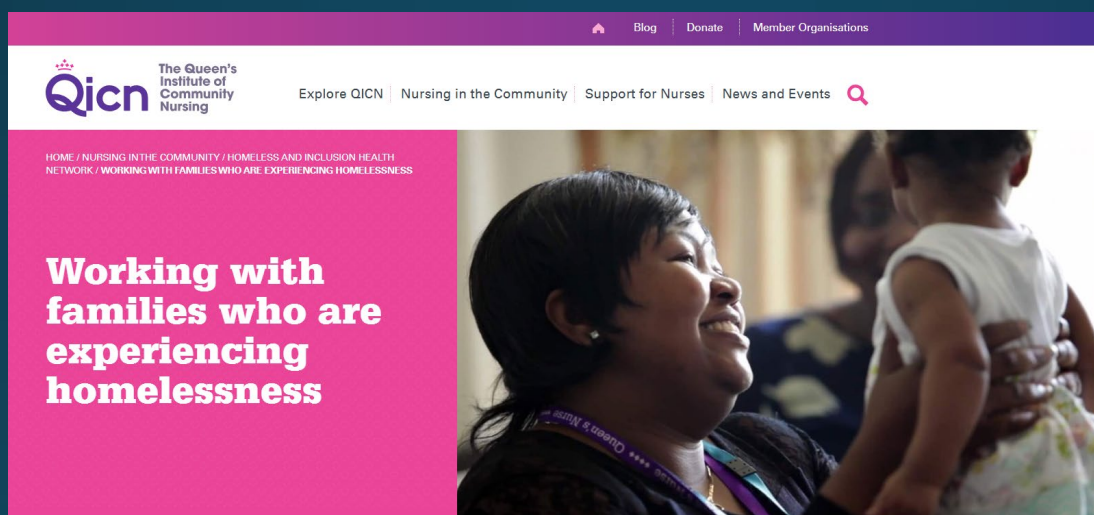
Access to Education and Healthcare

Ensuring children in temporary housing have access to education and healthcare fosters a stable and healthy environment.



Queens Institute of Community Nursing Homeless and Inclusion Network

- To find out more about work across the country please visit the **Queens Nursing Institute** section on Homeless and Inclusion Healthcare. Click [here](#) to find out more



Having worked in this sector for over 10 years, I have seen first-hand the value that nursing brings - not only in direct clinical care, but also in spaces where nurses have not traditionally been present. This includes influencing local policy, leading multi-disciplinary and multi-sector meetings, and shaping education. We would like community nurses to use this guide in whatever way is most useful to them - whether as a reference to look up agencies and articles, or as a workbook to inform their practice and professional development.

Kirit Sehmbi, QICN Homeless and Inclusion Health Project Lead and Clinical Coach

The Home Office

This document provides an overview of the workstreams, resources and case studies developed or endorsed by the Home Office Asylum Mental Health and Wellbeing (MHW) team.



Home Office

Guidance

Workstreams, tools and case studies by the Home Office Asylum Mental Health and Wellbeing team (accessible)

Updated 12 August 2025

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“

“We need to listen, learn and act. Children are our future and it is our duty to provide them with the best start in life. The pandemic should not be allowed to prevent this. We are at risk of failing children living in temporary accommodation..”

Professor Monica Lakhanpaul

Principal Investigator (PI)
University College London
London, United Kingdom

Champions Project

Introduction

CHAMPIONS is a national project looking at the impact of living in poverty on children under 5 who are living in temporary accommodation (TA) due to experiencing homelessness. We are working alongside families and professionals to co-develop recommendations for future support and best practices.

These are grounded in research evidence in order to support families' recovery after the pandemic and enable professionals to prepare for future pandemics. [here](#)

Professor Monica Lakhanpaul is Professor of Integrated Community Child Health at UCL Great Ormond Street Institute of Child Health, Consultant Paediatrician.



She has extensive experience of leading multidisciplinary research teams to tackle some of the most pressing issues facing marginalized, minority and vulnerable families globally through participatory research, citizen science and multisector approaches, ensuring that communities are involved in co- developing holistic integrated solutions for the health

Health Innovation KSS



Nafsiyat Intercultural Therapy Centre, Health Innovation Kent Surrey Sussex (Health Innovation KSS) and NIHR Applied Research Collaboration Kent Surrey and Sussex (ARC KSS) have published an intercultural awareness toolkit to support those working with asylum seekers and migrants. It covers key intercultural principles such as cultural competence, intersectionality, and micro-incivilities, and provides practical tools, real-life examples, and guidance for both practitioners and employers. Click [here](#) to access the toolkit.

Homewards

Introduction

- Launched in **June 2023** by Prince William and **The Royal Foundation**, Homewards is a **five-year programme** with a bold mission: to make homelessness **rare, brief, and unrepeated** across the UK.

- **Locations**

Homewards is working intensively in **six flagship locations**:

- Newport (Wales)
- Lambeth (London)
- Aberdeen
- Sheffield
- Northern Ireland
- Dorset (Poole, Bournemouth & Christchurch)

Each location develops a **bespoke Local Action Plan** tailored to its unique challenges.

Homewards brings together:

- Local councils, charities, and businesses
- Up to **£500,000 in seed funding** per location
- Access to national expertise and partnerships
- Innovative housing projects to unlock homes at scale
- It also supports **early intervention**, such as school-based programmes to identify at-risk youth, and has already helped deliver **over 300 homes** through creative collaborations.



Cambridge Homeless Outreach Programme

Introduction

Street Outreach Team in Cambridge identify and work with people over the age of 18 in the City of Cambridge that are street homeless. They help rough sleepers on the street or at the day centre by informing them of the options available. You can learn more about their work [here](#)

Articles and Presentations

Family Hubs

Family hubs in the UK play a crucial role in supporting families experiencing homelessness or living in temporary accommodation. These hubs serve as central points where families can access a wide range of services designed to address their immediate needs and promote long-term stability

Find a Hub: All Family Hubs

The search engine is intended for **professionals** - we encourage families to access Family Hubs via their local authority's website and/or social media.

The search engine enables you to search for Family Hubs by location (town/postcode) or conduct an advanced search by constituency, local authority, hub type or service. Click here to find out more: Click [here](#) to find out more



07

Human Rights of the Child



What is the United Nations Convention on the rights of the child?

“The United Nations Convention on the rights of the child (UNCRC) was adopted in 1989. It is the most widely ratified human rights treaty in history.

This is in itself an acknowledgement of the importance of children’s rights. The UNCRC embodies the idea that every child should be recognised, respected and protected as a **rights holder** and as a **unique and valuable human being**. It applies to all persons under the age of 18.”

Section 17 of the Children Act 1989 states that it is the general duty of every local authority to safeguard and promote the welfare of children within their area who are in need; and so far as it is consistent with that duty, to promote the upbringing of such children by their families.

Human Rights

Right to a house

Right to play

Summary: A call to care for homeless families - Early and Equitably

This toolkit equips community nurses to respond to the complex, life-altering impact of family homelessness. Grounded in a health inclusion approach, it champions early, coordinated, and compassionate care that sees beyond the immediate crisis—toward long-term stability, wellbeing, and equity.

By recognising all forms of homelessness and addressing the interlinked challenges of housing, health, and social support, this resource empowers practitioners to interrupt cycles of disadvantage and help families build healthier, more hopeful futures.

For commissioners and the wider NHS, investing in this approach promotes more efficient service use, reduces avoidable health inequalities, and supports integrated care systems to deliver better outcomes with lasting impact.

**Add in contacts once agreed*

Every interaction matters

Families experiencing homelessness often remember the professionals who treated them with kindness, listened without judgement and helped them navigate an overwhelming system.

Community teams have a unique opportunity to improve health outcomes, build trust and create lasting positive change.



END
