

Homeless Health Community of Practice: supporting inclusion health groups with GP registrations and access

15 September 2021

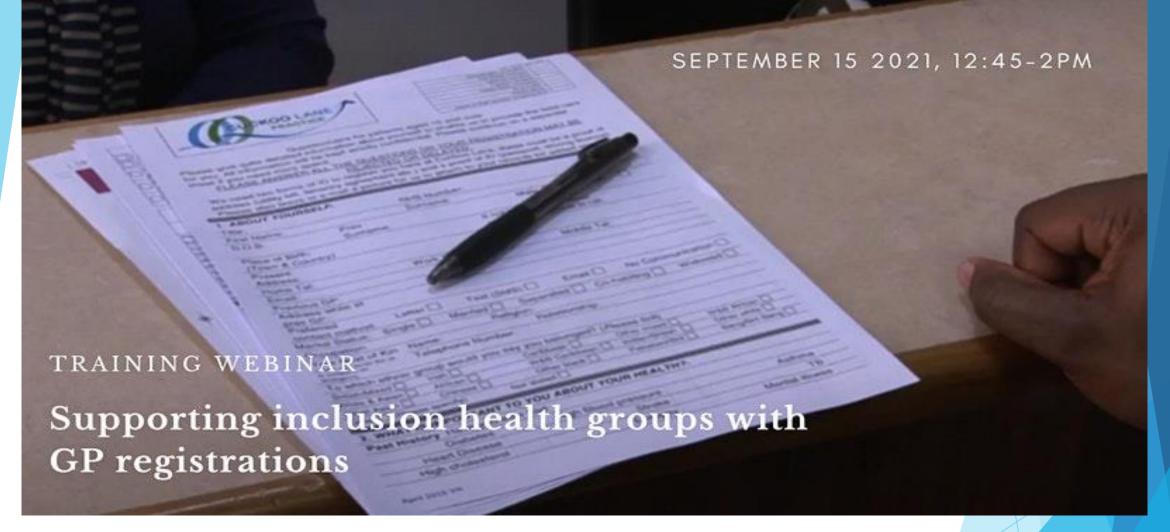
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Dr Jasmin Tzortzakakis Malik GP Homeless and Inclusion Health

Clinical Lead Homeless Health and Mental Health NCL
Co-Clinical Lead Homeless Health HLP

AGENDA

- Outlining GP Patient Registration Standard Operating Principles for Primary Medical Care
 - Dr Jasmin Malik
- GP mystery shopping findings
 - Dr Aaminah Verity
- Considerations for people with no recourse to public funds
 - Henry St Clair Miller
- Groundswell's Homeless Health Peer Advocacy (HHPA) service - The challenges of registering at a GP practice without a permanent address
 - John Driscoll
- Doctors of the World Safe Surgeries initiative
 - Emmanuel Serrano
- Experience of a London GP practice which has become a Safe Surgery
 - Elaine Morsman

Healthy London Partnership













Client: Nursing and Midwifery Council Media Coverage

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 Reach:
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 Value:
 347529.0000



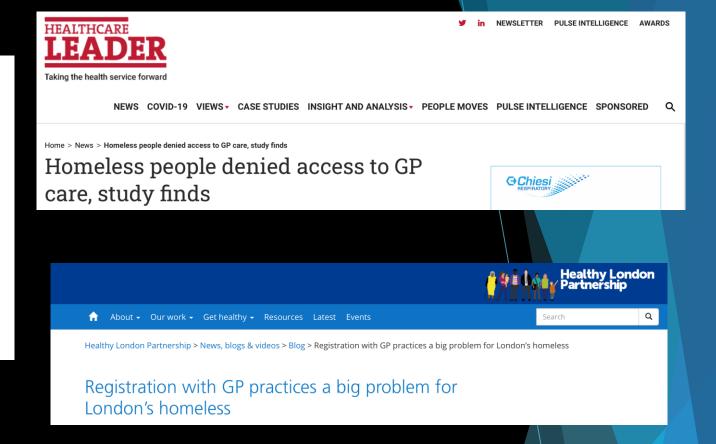
GP surgeries that refuse to register undocumented migrants still rated 'good'

MAY BULMAN

SOCIAL AFFAIRS CORRESPONDENT Scores of GP surgeries are rated "good" by the Care Quality

Commission (CQC) for the care they provide to vulnerable

people despite wrongly refusing to register undocumented migrants, new analysis shows.



News > UK > Home News

Rough sleepers denied access to healthcare, pushing them into 'repeat cycles of homelessness', study says

One homeless man tells researchers he committed crimes just to go to prison so he could access healthcare



About us

Our work

Commissioning

Get involved

Our advice for clinicians on the coronavirus is here.

If you are a member of the public looking for information and advice about coronavirus (COVID-19), including information about the COVID-19 vaccine, go to the NHS website. You can also find guidance and support on the GOV.UK website.

Primary Medical Care Policy and Guidance Manual (PGM)

https://www.england.nhs.uk/publication/primary-medical-care-policy-and-guidance-manual-pgm/

NHS England » Primary Medical Care Policy and Guidance Manual (PGM)

4.2 Aims

- 4.2.1 In issuing these patient registration operating principles we aim to:
 - Clarify the contractual rules in respect of patient registration for patients, practices, CCGs and NHS England's regional teams
 - Reduce the risk of worsening health inequalities for specific populations (for examples, asylum seekers or homeless people

4.9 Requesting documentary information from patients

- 4.9.1 Under the terms of their primary medical services contracts, GP practices <u>cannot</u> <u>refuse</u> an application to join its list of NHS patients on the grounds of race, gender, social class, age, religion, sexual orientation, appearance, disability or medical condition.
- 4.9.2 Practices can refuse an application to join a practice list if:
 - The commissioner has agreed that they can close their list to new patients,
 - the patient lives outside the practice boundary; or
 - if they have other reasonable grounds
- 4.9.3 In practice, this means that the GP practice's discretion to refuse a patient is limited.
- In addition, when applying to become a patient there is no regulatory requirement to prove identity, address, immigration status or the provision of an NHS number in order to register. However, there are practical reasons why a practice might need to be assured that people are who they say they are, or to check where they live. Seeing some form of ID will help to ensure the correct matching of a patient to the NHS central patient registry, thereby ensuring any previous medical notes are passed onto a new practice. It is legitimate therefore for the practice to apply a policy to ask for patient ID as part of their registration process.
- 4.9.5 Any practice that requests documentation regarding a patient's identity or immigration status <u>must</u> apply the same process for all patients requesting registration equally. A practice policy should not routinely expect a patient to present a photograph as this could be discriminatory.

- 4.9.6 The majority of patients will not find it difficult to produce ID / residence documentation, however there will be some patients who do live in the practice area, but are legitimately unable to produce any of the listed documentation. Examples of this may be;
 - People fleeing domestic abuse staying with friends, family or in a shelter
 - People living on a boat, in unstable accommodation or street homeless
 - People staying long term with friends but who aren't receiving bills
 - People working in exploitative situations whoseemployer has taken their documents
 - People who have submitted their documents to the Home Office as part of an application
 - People trafficked into the country who had their documents taken on arrival
 - Children born in the UK to parents without documentation.
- 4.9.7 Reasonable exceptions therefore need to be considered and the individual registered with sensitivity to their situation.

- As there is no requirement under the regulations to produce identity or 4.9.8 residence information, the patient MUST be registered on application unless the practice has reasonable grounds to decline. These circumstances would not be considered reasonable grounds to refuse to register a patient and neither should registration or access to appointments be withheld in these circumstances. If a patient cannot produce any supportive documentation but states that they reside within the practice boundary then practices should accept the registration
- 4.9.9 Where necessary, (e.g. homeless patients), the practice may use the practice address to register them if they wish. If possible, practices should try to ensure they have a way of contacting the patient if they need to (for example with test results).

- 4.9.10 If a practice suspects a patient of fraud (such as using fake ID) then they should register and treat the patient but hand the matter over to the NHS Counter Fraud Authority (NHSCFA)
 - the NHS Counter Fraud Authority Reporting Line: 0800 028 4060
 - filling in an online form at https://reportfraud.cfa.nhs.uk/reportFraud
 - email at: generalenquiries@nhscfa.gsi.gov.uk
 - by post to the NHS Counter Fraud Authority, Skipton House, 80 London Road,
 London, SE1 6LH.



Expected standards of care

GP practices have a responsibility to register people who:

- are homeless
- have no fixed abode
- are legitimately unable to provide documentation living within their catchment area.

Homeless patients are entitled to register with a GP using a temporary address. This may be a friend's address or a day centre. They can also use the practice address to register.

https://www.cqc.org.uk/guidance-providers/gps/gp-mythbuster-29-looking-after-homeless-patients-general-practice

Examples of good practice

When caring for patients who are homeless or are at risk of becoming homeless, you could consider:

- introducing double appointments
- · keeping prescriptions as short a duration as possible
- ensuring clear boundaries for consultations are in place
- · giving fast access to a named GP
- · waiving any charges for housing letters or medical reports



Pay & contracts

Patient registration

Practices should know the rules regarding temporary residents, homeless patients, overseas visitors, the duty to give treatment, and when they can decline to register a patient.

O Location: England & Audience: GPs - Practice managers

Updated: Monday 7 September 2020



<u>Guidance on patient registration for GP practices</u> (bma.org.uk)

Registering without proof of identity or address

There is no contractual duty to seek evidence of identity, immigration status or proof of address. Practices should not refuse registration on the grounds that a patient is unable to produce such evidence.

Practice staff do not have to make any assessment of immigration status or eligibility for NHS care; they are not expected to act as immigration officials.

Homeless patients

People who are homeless have particular health needs and often suffer some of the worst outcomes. Both the BMA and NHS England are committed to ensuring homeless patients receive the same level of care as those with permanent addresses.

The same rules as above regarding identity and proof of address applies to homeless patients. Homeless patients are entitled to register with a GP using a temporary address, which may be a friend's address or a day centre. The practice address may also be used to register them.

CQC guidance on homeless patients

Homeless and Inclusion Health standards for commissioners and service providers

These standards are endorsed by the following organisations:

































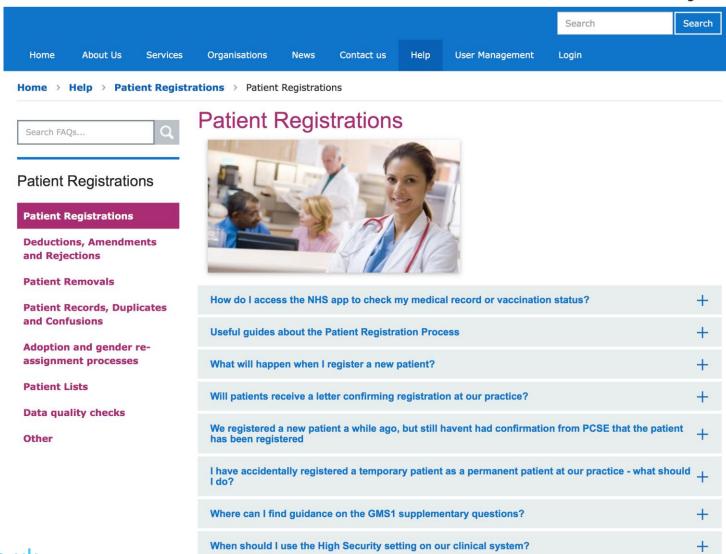




Version 3.1 Published October 2018 https://www.pathway.org.uk/wpcontent/uploads/Version-3.1-Standards-2018-Final.pdf

Primary Care Support England





How do I register homeless patients?

pcse.england.nhs.uk

Please register the patient as normal. In the field for the patient's address, please enter the full address for the GP practice including the practice postcode, putting CO (Care of) at the start of the address.

Please note, putting 'no fixed abode' in any field would cause the registration request to be rejected.

Remote GP access and triage impact on Health inequalities

Dr Aaminah Verity North Lewisham PCN GP Fellow for Health Inequalities Pathway Fellow







Method:



Interviews with key stakeholders providing support services to vulnerable patients and feedback from Healthwatch BAME patient forums



Survey to GP practices in Lewisham



Mystery Shopper exercise of 10 practices in North Lewisham PCN

Mixed Methods Evaluation of Access for vulnerable users



Worsening of **existing** barriers



New barriers

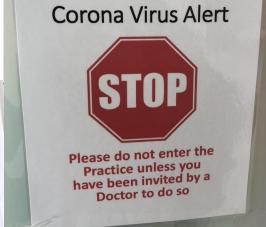
- Unclear and inconsistent messaging / 20% thought surgery was closed
- No walk-in route
- Online registration only digital exclusion



40% refusal to register

DOI: <u>10.22541/au.161445317.72605597/v1</u>







Inclusive triage system
Face to face option

Clear consistent messaging about how to access GP

Recommendations

Interpreter access

Work with Advocates

Reduced time waiting for call

Continuity
Face to face where appropriate

Appointment length flexibility

PCN GP Fellow for Health Inequalities

Admin Focus Groups

Admin champions

Improving GP access

Audit and PCN guidelines on triage

Adapted
Safe
Surgery
Training

Community Engagement

Community Link worker



North Lewisham
Community
Forum



PEOPLE OF NORTH LEWISHAM

WHAT CAN HELP YOU LIVE LONGER AND HEALTHIER LIVES?

Have your say on health inequalities in North Lewisham!

Be Part Of The Desicion Making

Hosted by Your Local GPs

JOIN ZOOM MEETING

MEETING ID: 899 9194 0932

PASSCODE: 277963

RSVP: commlink.nlpcn@nhs.net

Join us in person or online



11TH OCTOBER 20216.30-8.30PM

MOONSHOT COMMUNITY CENTRE
FORDHAM PARK
ANGUS STREET, NEW CROSS, LONDON SE14 6LU

Recommendations

Admin

- Main concern should be to not send someone away who cannot access healthcare
- Let the GPs and practice managers worry about fraud

Clinicians/Practice managers

- Is your triage/appointment booking system inclusive?
- Do your patients understand how to make appointments?
- Do your clinicians have flexibility to manage complex patients?

Commissioners

- How can we think about health inequalities differently?
- PCN GP fellow / champion for health inequalities role
 - 2-4 sessions a week can use the SPIN HEE funded fellowships
- Community Link Worker
 - Can be employed under ARRS

Acknowledgements

Health Education England

- Sarah Divall
- Nikki Payne

QMUL Institute of Population Health Sciences

Dr Victoria Tzortziou Brown: Project Supervisor

Pathway

- Samantha Dorney-Smith
- Dr Nigel Hewett

North Lewisham PCN

- Dr Rachel Forgan: Clinical Director
- The practices of NLPCN

Contact Details

Aaminah.verity@nhs.net











Supporting people with no recourse to public funds

Henry St Clair Miller 15 September 2021





'No recourse to public funds' (NRPF) condition



What are 'public funds'?

Benefits

- Includes:
 Universal Credit,
 Income-based
 ESA, Pension
 Credit & Child
 Benefit
- Some exceptions

Homelessness assistance

Part VII of the Housing Act 1996

Social housing allocation

 Part VI of the Housing Act 1996 (i.e. local authority allocation)



What services can a person with NRPF access?

















These services should not be refused to a person solely because they have no recourse to public funds. However, some services may have eligibility requirements relating to the person's immigration status.



Who is subject to the NRPF condition?

Leave to enter/remain with NRPF

- Visitor
- Student
- Work visa
- UK Ancestry
- Family migration routes
- Private life route

No current immigration permission

- Visa overstayer
- Illegal entrant
- Asylum seeker/ appeal rights exhausted (ARE) asylum seeker

Leave subject to a maintenance undertaking

 Indefinite leave to remain as adult dependent relative (first five years in UK)



EEA residence rights – key groups

- People required to apply to the EU Settlement Scheme:
 - Granted settled status or pre-settled status
 - Pending application made before deadline of 30 June 2021
 - Resident in UK by 31 December 2020 but missed the deadline (can make a late application)
 - Close family members with EU Settlement Scheme family permit or not yet arrived in the UK
- People who are not entitled to apply to EU Settlement Scheme (entered on/after 1 January 2021:
 - Leave to enter as visitor, student, worker etc.



Support options for people who have no recourse to public funds and are destitute/ at risk of homelessness



What is the role of social services?

 NRPF = immigration condition restricting access to benefits & housing assistance

Social services support is not a 'public fund'

 Social services may provide support to prevent vulnerable people and children from being destitute/ homeless

Social services' support = safety net



Local authority 'safety-net' duties to provide accommodation and financial support

Adults with care needs

- The Care Act 2014
- Duty to meet care and support needs arising from/ related to a physical or mental impairment or illness

Families

- Section 17 of the Children Act 1989
- Duty to safeguard and promote the welfare of children who are in need (destitute child = in need)

Care leavers

- Leaving care provisions of the Children Act 1989
- Duties to support former looked after child until age 21/25



Initial information that social services will need

Is the local authority responsible?

- Families = physical presence test
- Adults = ordinarily resident/ no settled residence

Person/ parent's immigration status

- Section 184 homelessness decision/ benefit eligibility decisions (EEA nationals)
- Immigration documentation if available

Is urgent help needed?

- Evidence of lack of accommodation/ financial support
- Evidence of health/ care needs (adults)



What happens next

- Social services will undertake assessments to determine eligibility:
 - Care Act needs assessment (adult)
 - Child in need assessment (family)
 - Human rights assessment (if exclusion applies to an adult/ parent)
- Emergency support may be provided whilst assessments are completed
- Outcome of the assessment should be provided to the person in writing or a written explanation if an assessment is not completed



Gaps in support for adults without children/ care needs

- When there is a public health emergency, local authority (usually housing department) will need to determine whether any assistance can be provided to adults on public health grounds who are at risk of rough sleeping - s138 Local Government Act 1972 & s2B National Health Service Act 2006
- Victims of domestic abuse may be supported by Southall Black Sisters project –referred via Voluntary Community Sector agencies
- No Accommodation Network list of projects providing accommodation



Asylum Seekers

- Home Office provides support when person is destitute:
 - Section 95 support for people seeking asylum (a pending claim/ appeal) and most 'appeal rights exhausted' (ARE) families
 - Section 4 support for people who are 'appeal rights exhausted' (ARE) when certain criteria are met, e.g. taking up return/ further submissions made
- Local authority may support families/ adults with care needs when there are delays/ gaps in Home Office support
- Support accessed via Migrant Help



NRM support

- National Referral Mechanism (NRM) local authority has duty to notify as first responder
- Potential victims who consent to NRM referral can access specialist support –including accommodation- from Salvation Army/ partner
- Refer to Salvation Army as soon as possible after NRM referral made— can telephone for immediate support
- Adult social care may carry out safeguarding enquiry



More information

- Home Office <u>https://www.gov.uk/asylum-support</u>
- Migrant Help
 https://www.migranthelpuk.org/
- Asylum Support Appeal Project Factsheets <u>http://www.asaproject.org/resources</u>
- Salvation Army referral helpline <u>https://www.salvationarmy.org.uk/modern-slavery/supporting-adult-victims</u>



Home Office Voluntary Returns Service

- The Home Office can fund and arrange travel for people who want to return to their country of origin when they do not have any current immigration permission/ have been refused, or they are intending to withdraw an immigration/ asylum application
- An assisted financial reintegration package may be available to:
 - Certain asylum seekers/ ARE asylum seekers
 - Vulnerable adults with no current permission
 - Families with a child under 18
 - Victims of modern slavery/ trafficking
- Person may need legal advice about implications of return on future residence rights/ ability to re-enter the UK
- www.gov.uk/return-home-voluntarily



Next steps

- Identify patients who have NRPF/ outstanding immigration issues and assist them to access immigration advice early
- Ensure referrals to Adult Social Care are made in good time
- When making a referral to social services, provide supporting information and evidence
- Establish referral pathways with local authorities in the area –
 Children's Services/ Adult Social Care/ NRPF team/ Housing/ Rough
 Sleeping Outreach team
- Establish local signposting lists: immigration/housing/welfare rights advice; asylum support; Home Office voluntary return/ VCS orgs. etc.



Any questions?

Please write a question in the chat facility



Further information



- Rights and entitlements information
- Guidance for councils
- Training
- Regional NRPF meetings

Web: www.nrpfnetwork.org.uk

Contact: nrpf@islington.gov.uk

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Croundswell

Out of homelessness

John Driscoll Care Navigator - Lambeth

'My right to healthcare' cards





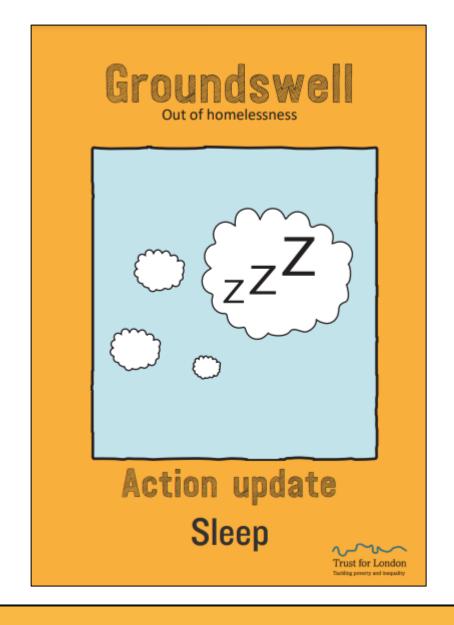
Order FREE: groundswell.org.uk/healthcare-cards



Action updates

Each Action Update highlights a topic and offers practical advice targeted at people who are currently using homelessness services.

groundswell.org.uk/what-we-do/resources





Thank You



john.driscoll@groundswell.org.uk









Doctors of the World UK, part of the Médecins du Monde network

Barriers to healthcare for migrants



Lack of knowledge regarding the NHS



Barriers around accessibility (language, digital, transportation)





Administrative difficulties (lack of ID or proof of address)



Unaffordable charges for secondary healthcare

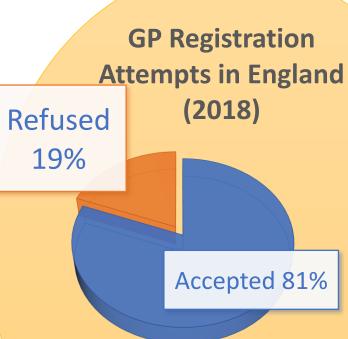


Immigration status checks



Fear of being reported to the Home Office





A growing community:









An initiative to work together with GP practices to take steps to tackle the barriers to healthcare faced by migrants and excluded groups.

 Approved by CQC, RCGP, RCN & acknowledged as an evidence-based intervention to tackle health inequalities in the NHS Long Term Plan.





WHAT CAN WE DO TO HELP? GP practices can take concrete steps, both at reception and in consultations, to improve equity of access to their services. Don't insist on proof of address documents $\overline{\mathsf{V}}$ Don't insist on proof of identification Never ask to see a visa or proof of immigration status Make sure patients know that their personal information is safe Use an interpreter, if needed Display posters to reassure patients that your surgery is a safe space Empower frontline staff with training and an inclusive registration policy

Safe Surgeries Principles

Don't insist on proof of address

Don't insist on ID

Never ask about immigration status

Keep information safe

Use an interpreter

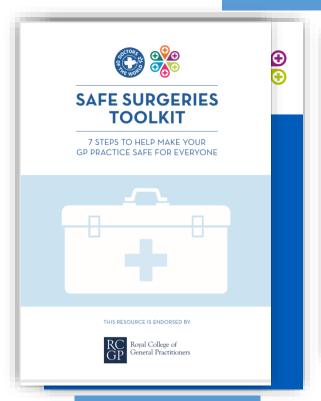
Display Posters

Empower frontline staff





Free resources to improve patient registration



Toolkits



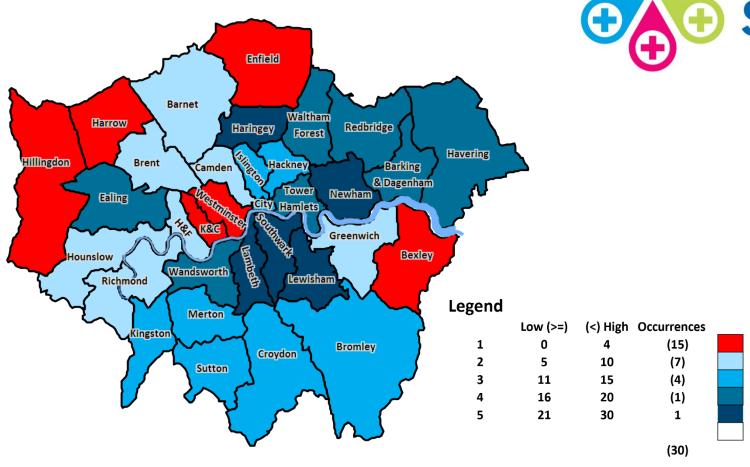
Translated patientfacing posters





Newsletters

Guidance, templates, policy notes











VACCINATIONS FOR MIGRANTS

A number of GP practices in Hackney are now accepting migrant patients to help people access the free COVID-19 vaccine and keep safe from this dangerous disease no matter what their immigration status.

- You do not need proof of identity or immigration status to register with a GP and receive the vaccination
- Your information or identity will not be passed onto police or immigration officers

Below is a list of the practices now accepting patient registrations from migrants and those who are undocumented.

Magdi Ibrahim, Advanced Health Care Assistant at Whiston Road Surgery



Look for the doctors nearest to your home and call the number, or visit the practice to get registered.

Lawson Practice, 85 Nuttall St, N1 5HZ Call: 020 3538 6044

Hoxton Surgery, 12 Rushton St, N1 5DR Call: 020 3487 0200

Cedar Practice, 220 Green Lanes, N4 2NU Call: 020 8036 6388 Spring Hill Practice, 57 Stamford Hill, N16 5SR Call: 020 8806 6993

Lea Surgery, Alfred Health Centre, 186 Homerton High St, E9 6AG Call: 020 8986 3106 Allerton Road Surgery, 34A Allerton Rd, N16 5UF Call: 020 8802 2882

Lower Clapton Surgery, 36 Lower Clapton Rd, E5 0PQ Call: 020 8986 7111

Access to the Covid-19 Vaccine

Get the COVID-19 vaccine when it's your turn



How to join Safe Surgeries?



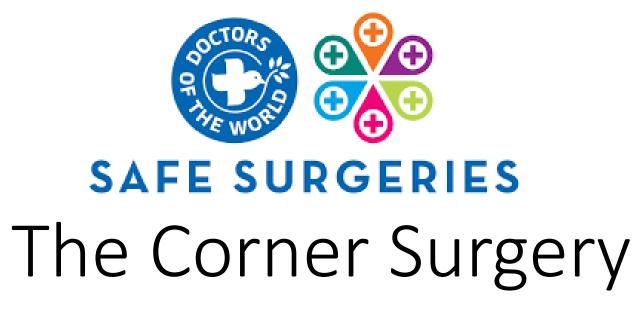
Sign up at https://linktr.ee/safesurgeries or use QR code

"As the primary care service we should be able to provide continuity, reliability and safety for our patients and Safe Surgeries can benefit all local practices in this."

PM from a Safe Surgery

"Safe Surgeries is a brilliant example of how passionate people can offer their help to the marginalised"

NHS England Deputy National Medical Director for Primary Care



Elaine Morsman



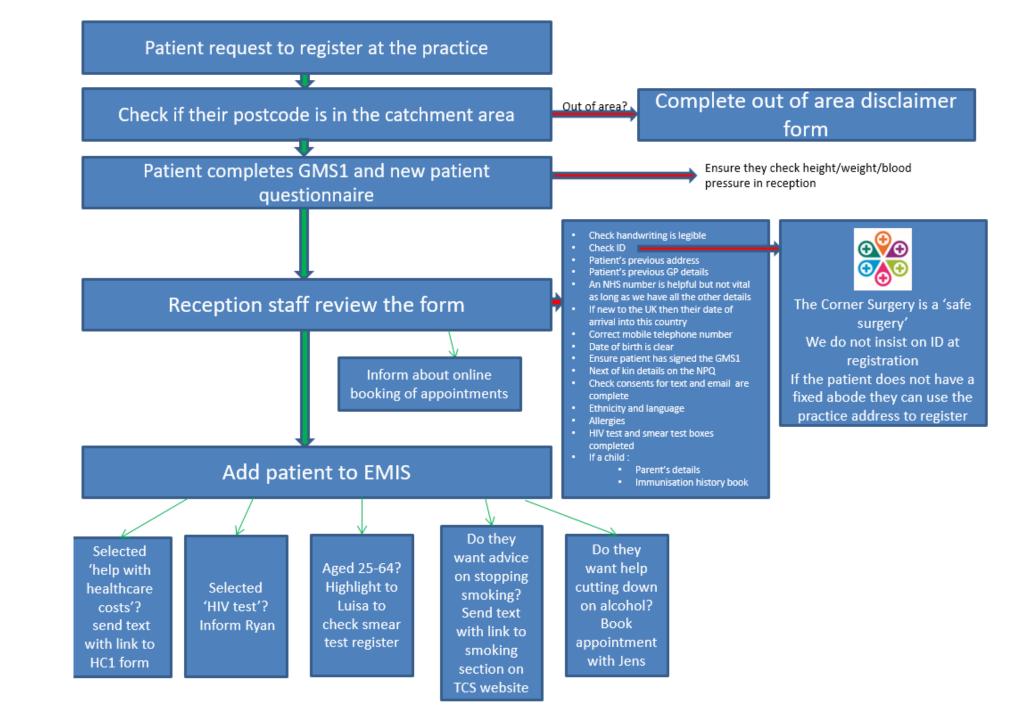


What does this mean for the Corner Surgery?

- Assessment of staff knowledge and values
- Policy review
- Training
- Implement policy changes
- Reassess staff knowledge and values
- · Share findings!

Policy and practice review: What did we do?

- Practice Registration Policy
- Registration flowchart
- New patient questionnaire
- Reception handbook
- Posters





Staff knowledge and attitudes: What did we do?

- Surveyed staff knowledge and attitudes on migrant access to healthcare.
- Held a training session on a practice training day over zoom with Yusuf from Safe surgeries.
- Re-surveyed staff after 3 months to compare changes to staff knowledge and attitudes.

Knowledge





■ Before ■ After ■ % increase

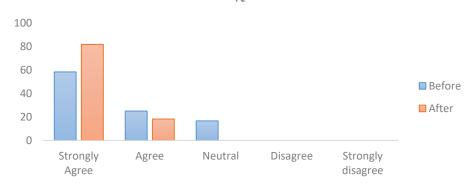
Knowledge



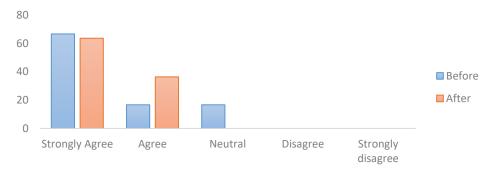


■ Before ■ After ■ % increase

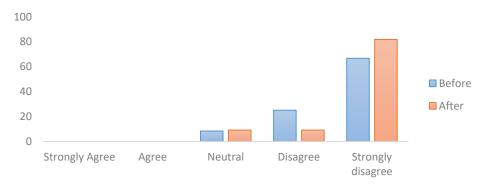
Regardless of the rules, I want our GP practice to try to offer services to everyone who needs it



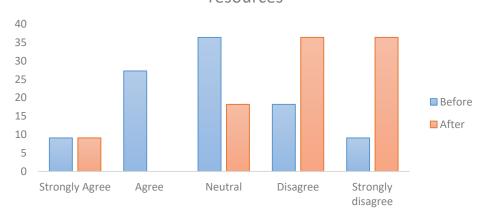
Anyone in England has the right to medical consultations in their preferred language using a translator



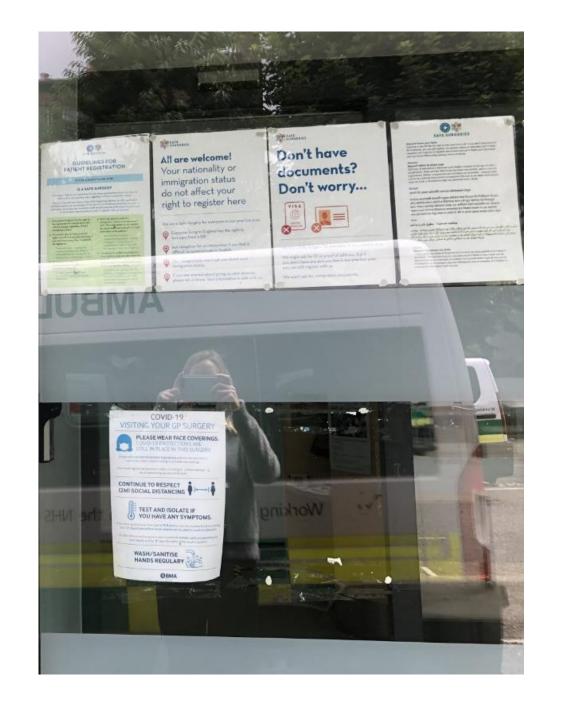
It is our responsibility as workers in the GP surgery to find people who are not in the country legally and report them to the relevant authorities

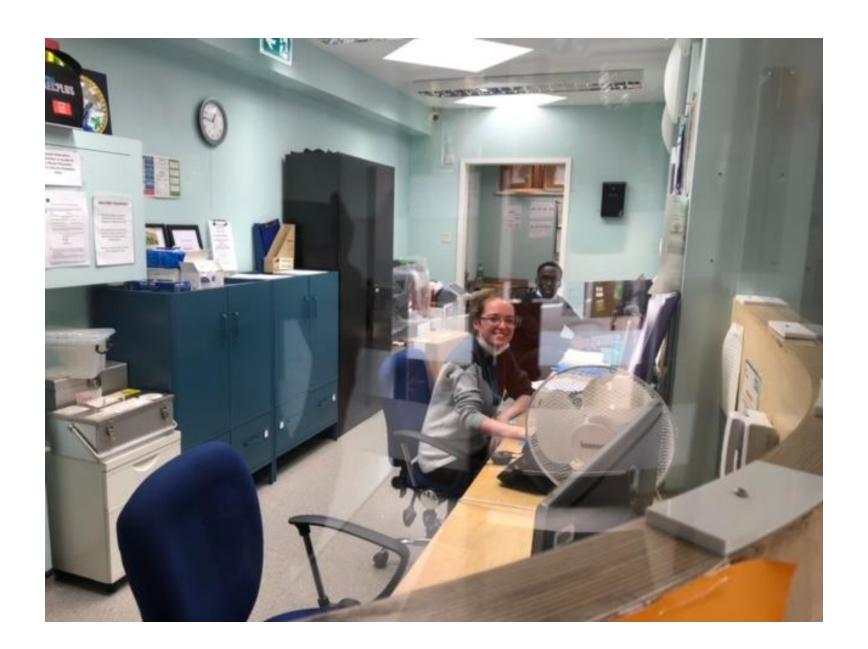


I feel that it is my responsibility to try to ensure that health tourism isn't a burden on NHS resources



Patient perspective







The future...





SAFE SURGERIES

500

Safe Surgeries

We are proud to be part of the #SafeSurgeries community





Next steps

Thank you to all speakers and attendees for joining us today

If you'd like to assist in planning or facilitating a follow up event, please contact the team on: hlp.homelesshealthcovid19team@nhs.net

www.healthylondon.org @healthyLDN

