**SHROPSHIRE HEALTH AND WELLBEING BOARD**
**Report**

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| **Meeting Date** | 19 November 2026 | | | | | |
| **Title of report** | A National Plan to End Homelessness: Developing a Whole-System Shropshire Response | | | | | |
| **This report is for** (You will have been advised which applies) | Discussion and agreement of recommendations | ☒ | Approval of recommendations (With discussion by exception) | | Information only (No recommendations) | |
| **Reporting Officer & email** | Laura Fisher<br>Head of Housing, Resettlement and Independent Living<br>Laura.Fisher@shropshire.gov.uk | | | | | |
| **Which Joint Health & Wellbeing Strategy priorities does this report address? Please tick all that apply** | Children & Young People | ☒ | Joined up working | ☒ | | |
| | Mental Health | ☒ | Improving Population Health | ☒ | | |
| | Healthy Weight & Physical Activity | | Working with and building strong and vibrant communities | ☒ | | |
| | Workforce | | Reduce inequalities (see below) | ☒ | | |
| **What inequalities does this report address?** | Homelessness is closely linked with health inequality and wider disadvantage. People experiencing homelessness, rough sleeping or insecure accommodation may also experience mental and physical ill-health, substance use, self-neglect, safeguarding concerns and multiple disadvantage.<br><br>Effective prevention therefore requires coordinated action across housing, health, social care, public health, safeguarding, criminal justice and the voluntary and community sector.<br><br>The report also considers the experiences of children living in temporary accommodation, people leaving care, prison or hospital, and other groups at particular risk of homelessness.<br><br>The emerging Shropshire approach seeks to identify housing risk earlier, prevent homelessness wherever possible and improve coordination between services where needs cross organisational boundaries.<br><br>The local draft delivery plan specifically identifies prevention, temporary accommodation, rough sleeping, transitions from institutions and service quality as areas for action. | | | | | |

**Report content -** *Please expand content under these headings or attach your report ensuring the three headings are included.*

## 1. Executive Summary

The Government's A National Plan to End Homelessness establishes a renewed national approach centred on making homelessness rare, brief and non-recurring, supported by a Local Outcomes Framework against which local areas will monitor progress.

Shropshire Council already has an established Preventing Homelessness and Rough Sleeping Strategy 2024–2029. Rather than replacing that strategy, an emerging supplementary delivery plan is being developed to align existing local priorities and activity with the National Plan, its Local Outcomes Framework, governance requirements and areas requiring wider partnership action.

The emerging framework includes five principal areas of activity: prevention and early intervention; temporary accommodation, B&B and move-on; rough sleeping and repeat homelessness; people leaving care, prison and hospital; and service quality and continuous improvement.

Initial feedback from the Council's MHCLG Homelessness Adviser has been positive about the alignment between the emerging local delivery plan, the National Plan and Shropshire's existing strategy. The feedback has also identified an important opportunity to strengthen partner ownership, including consideration of actions which could be led or jointly led by partners rather than Housing Options by default. Further detailed refinements have also been identified, including around the Rough Sleeping Programme, prison pathways, care leavers, veterans, development and early intervention.

Latest locally reported H-CLIC information for July to September 2026 also provides some encouraging early indications. Households with children in temporary accommodation stood at 0.39 per 1,000 households, compared with the baseline of 0.50 recorded in the emerging plan; no households with children were reported as remaining in B&B for more than six weeks, compared with a baseline of one; and successful prevention and relief stood at 34.69%, compared with the recorded baseline of 30.26%. The methodology for the Local Outcomes Framework measure relating to households with three or more support needs is still being finalised locally, while updated rough sleeping measures are due at the November checkpoint. The baseline framework is recorded in the emerging delivery plan.

The wider health and safeguarding context is also important. The recently published local Safeguarding Adult Review, SAR Bobby - Overview Report (final), identifies learning relating to multi-agency coordination, hospital discharge, safeguarding and responses to people experiencing homelessness and multiple disadvantage. It includes a recommendation relating to hospital discharge arrangements for adults at risk of rough sleeping and a target of zero discharges to the street.

This local learning is consistent with wider safeguarding evidence around multiple exclusion homelessness and reinforces the importance of moving from fragmented or crisis-led responses towards earlier, coordinated prevention.

The National Plan therefore provides an opportunity not simply to improve the Housing service response to homelessness, but to strengthen the way in which the wider Shropshire system collectively identifies and responds to housing risk.

The Health and Wellbeing Board is asked to consider how health, care, public health, children's services, safeguarding and wider partnership activity can support the emerging local delivery framework and where shared leadership or joint ownership of actions would strengthen delivery.

**2. Recommendations** (*Not required for 'information only' reports*)

The Health and Wellbeing Board is asked to:

1. Note the implications of A National Plan to End Homelessness for health, wellbeing and inequalities in Shropshire.

2. Note the development of a supplementary Shropshire delivery plan aligning the National Plan with the Council's existing Preventing Homelessness and Rough Sleeping Strategy 2024–2029.
3. Recognise that preventing homelessness and rough sleeping requires a whole-system response across housing, health, social care, public health, children's services, safeguarding, criminal justice and the voluntary and community sector.
4. Support the principle of shared ownership of the emerging delivery plan, including identifying areas where partner organisations should lead or jointly lead relevant actions alongside the Council's Housing service.
5. Support greater alignment of relevant health, care, safeguarding and prevention pathways with the emerging delivery framework, particularly in relation to people experiencing multiple disadvantage and people leaving hospital, care or prison.
6. Identify strategic gaps, dependencies or barriers which require collective action through the Health and Wellbeing partnership.

## 3. Report

### 1. Purpose and background

1.1 The purpose of this report is to update the Health and Wellbeing Board on the implications of A National Plan to End Homelessness for Shropshire and the work underway to translate the national direction into a local delivery framework.

1.2 Shropshire's existing Preventing Homelessness and Rough Sleeping Strategy 2024–2029 remains the Council's overarching strategy. The emerging delivery plan is intended to supplement rather than replace it, providing a clearer link between the existing strategy, national priorities, Local Outcomes Framework measures, local actions and partnership delivery.

1.3 The approach is therefore intended to avoid creating unnecessary parallel structures. The objective is to align existing strategies, services and partnership arrangements wherever possible, while identifying areas where further development, clearer ownership or stronger coordination is required.

### 2. From national direction to local delivery

2.1 The National Plan places increased emphasis on preventing homelessness before crisis, reducing the length of time households remain homeless, preventing prolonged use of B&B accommodation for families, reducing rough sleeping and repeat homelessness, and improving outcomes for people whose needs cross traditional service boundaries.

2.2 The emerging Shropshire delivery framework currently organises work across five principal areas:

- Prevention and early intervention
- Temporary accommodation, B&B and move-on
- Rough sleeping and repeat homelessness
- People leaving care, prison and hospital
- Service quality and continuous improvement

2.3 The framework is intended to provide a practical "golden thread" between national expectations, the existing Shropshire strategy, local performance and delivery activity.

2.4 Initial feedback from the Council's MHCLG Homelessness Adviser has welcomed that alignment and the proposed approach to Local Outcomes Framework metrics and governance.

Importantly, the feedback has also challenged the Council to consider whether sufficient delivery responsibility is currently shared across partner organisations, rather than Housing Options being identified as lead for a significant proportion of activity.

2.5 This is particularly relevant to the Health and Wellbeing Board. Some of the factors which contribute to homelessness, and some of the interventions required to prevent it, sit wholly or partly outside the direct control of Housing. A genuinely preventative delivery plan therefore requires wider system ownership.

## 3. Local Outcomes Framework and latest position

3.1 The National Plan's Local Outcomes Framework provides six measures against which local areas are expected to understand their position and set local ambitions. The MHCLG homelessness strategies and action plans toolkit sets expectations for local action plans to demonstrate alignment with the national framework and partnership delivery.

3.2 The latest locally reported position available for July to September 2026 is:

| Measure | Baseline recorded in emerging delivery plan | Jul–Sep 2026 / latest position |
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| **Households with children in temporary accommodation per 1,000 households** | 0.50 | 0.39 |
| **Households with children in B&B over six weeks** | 1 | 0 |
| **Successful prevention and relief of homelessness** | 30.26% | 34.69% |
| **Successful prevention and relief for households with three or more support needs** | 9.09% | Methodology being finalised |
| **People sleeping rough on a single night** | 22 | November checkpoint |
| **People sleeping rough long-term** | 8 | November checkpoint |

The recorded baselines appear in the emerging Shropshire delivery plan.

3.3 These early figures show positive movement in each of the three measures for which a July to September update is currently available. They should, however, be interpreted as an emerging performance picture rather than evidence that the longer-term outcomes of the National Plan have already been secured.

3.4 The measure relating to successful prevention and relief for households experiencing three or more support needs is particularly relevant to the Health and Wellbeing Board. The emerging delivery plan identifies that outcomes for this group can depend upon coordinated intervention involving Housing, Adult Social Care, Public Health, mental health, substance misuse, criminal justice and commissioned services.

3.5 Once the methodology has been finalised and validated, this measure will provide an

important indication of whether improved overall homelessness outcomes are also being experienced by households with more complex support needs.

## 4. Homelessness as a health, wellbeing and safeguarding issue

4.1 Homelessness does not sit in isolation from health and wellbeing. Housing instability can intersect with mental and physical health needs, substance use, self-neglect, safeguarding, domestic abuse, poverty and other forms of disadvantage.

4.2 The national Multiple Exclusion Homelessness: A Safeguarding Toolkit for Practitioners emphasises multi-agency support for people experiencing multiple exclusion homelessness who appear to have care and support needs and considers themes including coordination, safeguarding and hospital discharge. "Safeguarding is everyone's business": launch of new Expert Citizens toolkit | Homeless Link

4.3 The recently published Shropshire Safeguarding Adult Review SAR Bobby - Overview Report (final) provides an important local context. The Review identifies learning relating to multi-agency coordination, hospital discharge, safeguarding and responses to people experiencing homelessness and multiple disadvantage. bobby-safeguarding-adult-review-report.pdf

4.4 The Review also identifies subsequent areas of improvement in joint working and includes a recommendation relating to hospital discharge arrangements for adults at risk of rough sleeping, with a target of zero discharges to the street.

4.5 The purpose of referencing this review within the National Plan work is not to revisit the circumstances of the individual case. Rather, the published learning provides important evidence about the need for clear pathways, coordinated planning and earlier intervention where homelessness intersects with health, care and safeguarding.

4.6 The emerging homelessness delivery framework provides an opportunity to incorporate that learning into wider prevention and partnership activity.

## 5. Prevention and earlier intervention

5.1 A central principle of the emerging approach is that homelessness prevention should begin before a household reaches acute housing crisis.

5.2 This requires Housing Options to work effectively with organisations which may become aware of housing instability earlier, including health and care services, children's services, criminal justice partners and commissioned and voluntary-sector services.

5.3 The MHCLG toolkit places emphasis on partnership working, earlier identification, effective referral arrangements and responses to people leaving public institutions.

5.4 For Shropshire, the emerging delivery plan provides the mechanism through which existing pathways can be reviewed and strengthened, gaps identified and responsibilities made clearer.

## 6. Multiple disadvantage

6.1 People experiencing homelessness alongside multiple support needs are particularly important within the local framework.

6.2 The emerging delivery plan recognises that improving outcomes for households with three or more support needs cannot be achieved through Housing activity alone. It identifies the

relevance of coordinated intervention across Housing, Adult Social Care, Public Health, mental health, substance misuse, criminal justice and commissioned services.

6.3 This provides an opportunity to consider whether existing multi-agency structures are sufficiently connected to homelessness prevention and whether escalation and ownership are clear where needs span organisational or professional boundaries.

6.4 The Health and Wellbeing Board has an important strategic interest in ensuring that homelessness prevention is connected to wider work addressing health inequalities and multiple disadvantage.

## 7. Transitions from care, hospital and prison

7.1 Transitions between services or settings represent an important opportunity for early homelessness prevention.

7.2 The emerging delivery plan includes actions relating to people leaving care, prison and hospital.

7.3 Initial MHCLG feedback has suggested that the prison element of the plan is developed further to differentiate between:

- prevention and tenancy retention where appropriate;
- planning and immediate support before and around release; and
- longer-term accommodation sustainment following release, including following the end of time-limited accommodation.

7.4 MHCLG feedback has also identified the need to ensure the local plan appropriately reflects national commitments concerning care leavers under 25, rather than considering homelessness prevention solely at the point a looked-after-child placement ends.

7.5 Hospital discharge is similarly an area where housing, health, care and safeguarding responsibilities intersect. The learning within SAR Bobby - Overview Report (final) makes the continued development of effective discharge arrangements especially relevant locally.

## 8. Rough sleeping

8.1 Reducing rough sleeping and long-term rough sleeping remains a specific element of the Local Outcomes Framework and of Shropshire's emerging delivery arrangements.

8.2 MHCLG has confirmed through adviser feedback that Shropshire is not required to produce a separate Long-term Rough Sleeping Partnership Plan. The emerging delivery plan will therefore continue to address long-term rough sleeping without creating an unnecessary additional plan.

8.3 The revised delivery plan will also make the relationship with the Rough Sleeping Programme clearer and incorporate developing programme activity as this is agreed.

8.4 Shropshire has a Rough Sleeping Programme allocation of £951,168 over three years, comprised of £597,077 revenue and £354,091 capital, as recorded in the supporting National Plan material previously prepared for the Council.

## 9. Shared ownership and partnership leadership

9.1 One of the most useful themes arising from initial MHCLG feedback is the need to ensure that the local delivery plan is genuinely collaborative.

9.2 A significant number of actions within the current draft identify Housing Options as the lead. Some actions will properly remain within Housing, but where delivery depends fundamentally on another service or partnership, there is an opportunity to identify appropriate partner leads or joint leads.

9.3 This does not require the creation of entirely new structures. In many areas the focus can instead be on aligning existing pathways, strategies and programmes and establishing clear responsibility for the contribution they make to preventing homelessness.

9.4 Areas where shared leadership could be particularly important include:

- multiple disadvantage;
- hospital discharge;
- care leavers;
- people leaving prison;
- mental health and substance misuse pathways;
- safeguarding and self-neglect;
- domestic abuse;
- early identification of housing instability; and
- accommodation supply and development.

9.5 The Health and Wellbeing Board is therefore being asked to help shape this aspect of the emerging framework while the delivery plan is still being developed, rather than being asked simply to note a completed Housing action plan.

## 10. Governance and next steps

10.1 The emerging delivery plan is a supplementary action plan supporting Shropshire's existing homelessness and rough sleeping strategy. It remains under development and will continue to be refined to reflect local evidence, performance information, national expectations and partner input.

10.2 The existing draft identifies formal Council governance through Housing Overview and Scrutiny Committee and Cabinet.

10.3 The role proposed for the Health and Wellbeing Board is therefore complementary. The Board is not being asked to substitute for the Council's formal approval arrangements. It is being asked to help shape the whole-system elements of delivery, particularly where successful prevention depends upon health, care, safeguarding and wider partnership activity.

10.4 Following HWBB consideration, the emerging delivery framework can reflect appropriate partner ownership, lead and joint-lead arrangements and any strategic gaps or dependencies identified through the discussion.

10.5 The overall ambition is to move progressively from crisis response towards earlier prevention: not simply improving the response received after somebody becomes homeless, but reducing the number of households reaching homelessness in the first place.

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| **Risk assessment and opportunities appraisal (***NB This will include the following: Risk* | **Risk Management**<br><br>Failure to develop a coordinated local response creates a risk of fragmented pathways, missed opportunities for prevention, avoidable |

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| *Management, Human Rights, Equalities, Community, Environmental consequences and other Consultation*) | homelessness and emergency accommodation use, and poorer outcomes where people's needs cross organisational boundaries.<br><br>Clear governance, defined ownership, appropriate partner leadership and proportionate performance monitoring provide opportunities to identify risks earlier and strengthen accountability.<br><br>**Human Rights and Equalities**<br><br>Homelessness can significantly affect people's dignity, safety, family life and ability to access services. Some households experiencing homelessness may also face additional barriers associated with ill-health, disability, caring responsibilities, domestic abuse or other disadvantage.<br><br>The emerging delivery framework seeks to strengthen prevention and improve coordination where housing needs interact with care, health and safeguarding needs.<br><br>**Community**<br><br>Preventing homelessness and rough sleeping has wider benefits for individuals, families and communities. Earlier prevention can reduce disruption associated with housing crisis and support people to remain connected with existing services and support networks where appropriate.<br><br>**Consultation and partnership**<br><br>Development of the delivery plan is ongoing. Initial feedback has been received from the Council's MHCLG Homelessness Adviser, and the current stage presents an opportunity to strengthen involvement and ownership across partner organisations.<br><br>Further engagement will be required as lead and joint-lead responsibilities are determined and detailed actions are refined. |
| **Financial implications** (*Any financial implications of note)* | This report does not seek approval for additional expenditure.<br><br>Delivery will initially be progressed through existing services, commissioned provision, available funding and partnership arrangements. Where future activity requires additional resources or expenditure, this will be subject to the relevant financial and governance processes.<br><br>Shropshire has received a Rough Sleeping Programme allocation of £951,168 over three years, comprising £597,077 revenue funding and £354,091 capital funding. Programme activity is being developed and will be reflected within the homelessness delivery framework as appropriate. |
| **Climate Change Appraisal as applicable** | There are no direct material climate change implications arising specifically from the recommendations in this report.<br><br>Any future accommodation, capital, commissioning or development |

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| | proposals arising from the delivery plan will be subject to the appropriate decision-making processes and relevant environmental or climate considerations. | |
| **Where else has the paper been presented?** | System Partnership Boards | One Shropshire Board - The National Plan and developing local response have previously been considered through the One Shropshire Board. |
| | Voluntary Sector | Relevant voluntary and community sector partners contribute to existing homelessness and rough sleeping partnership arrangements. Further engagement will form part of the development of shared ownership and delivery arrangements. |
| | Other | Housing Overview and Scrutiny Committee, 23 September 2026<br><br>The emerging delivery plan has also been shared with the Council's MHCLG Homelessness Adviser for initial feedback. |

**List of Background Papers (This MUST be completed for all reports, but does not include items containing exempt or confidential information)**

A National Plan to End Homelessness

Shropshire Council, Preventing Homelessness and Rough Sleeping Strategy 2024–2029

DRAFT strategy delivery plan alignment to national plan

OSB - A National Plan for Homelessness

SAR Bobby - Overview Report (final)

Multiple Exclusion Homelessness: A Safeguarding Toolkit for Practitioners

TOOLKIT FOR DEVELOPING HOMELESSNESS STRATEGIES AND ACTION PLANS.pdf

**Cabinet Member (Portfolio Holder) or your organisational lead e.g., Exec lead or Non-Exec/Clinical Lead**

Paula Mawson, Service Director – Communities & Customer
James Owen – Portfolio Holder for Housing

**Appendices**

Appendix 1: Health and Wellbeing Board presentation: A National Plan to End Homelessness – From national ambition to a whole-system Shropshire response