


**Cwm Taf Morgannwg**  
**Regional Housing Support Collaborative Group (RHSCG)**  
**3<sup>rd</sup> September 2024 – Microsoft Teams**  
**Minutes – Q2 2024/25**

Attendees		Representing
Hannah Mills (Acting Chair)	HM	Housing MTCBC
Cllr Bob Harris	BH	RCTCBC
Cheryl Emery	CE	Housing RCTCBC
Ryan Jones	RJ	Housing BCBC
Jessica Ware	JW	Housing BCBC
Sian Bunston	SB	Substance Misuse APB
Deborah Evans	DE	VAWDASV Rep
Christa Bonham-Griffiths	CB	Youth Justice Rep
Emma Richards	ER	Probation Rep
Clare Lagier	CL	Housing Outreach Service Rep
Gary Hortop	GH	RPB Housing Rep
Lorraine Griffiths	LG	Support Provider Rep
Mariam Elmirghani	ME	Support Provider Rep
Bethan Underwood	BU	Health, Housing & Innovation Rep
Kelly Francis	KF	CTM Regional Development Co-ordinator
<b>Guest</b>		
Debra Mitchell	DM	Regional Neurodivergence Improvement Programme

<b>1</b>	<p><b>Welcome</b>  The Chair gave everyone the opportunity to introduce themselves. No declarations of interest raised.</p> <p><u>Apologies</u>  Cllr Michelle Symonds, Cllr Rhys Goode, Susan Preece, Suzanne Stephens, Sarah O'Keeffe, Emma Howells, Alyson Jones, Rachel Thomas, Lukasz Kuziow, Melinda Powell.</p>
<b>2</b>	<p><b><u>Minutes of previous meeting and Actions.</u></b></p> <p>Minutes accepted as an accurate account and no issues raised.</p> <p>Action:  KF to liaise with BU and arrange for Debra Mitchell to speak at the next RHSCG and discuss how neurodiversity links to housing.  <b>Update:</b> Please see item 3.1 below.</p>
<b>3.1</b>	<p><b><u>CTM - Regional Project Update</u></b></p> <p><b>Neurodiversity Regional Transformation Programme (Debra Mitchell)</b></p> <p>  NDIP introduction for  RHSCG 3.9.24.pptx</p> <p>Attached presentation delivered by Debra Mitchell regarding the Regional Neurodivergence Improvement Programme - <a href="mailto:Debra.Mitchell@bridgend.gov.uk">Debra.Mitchell@bridgend.gov.uk</a>.</p>

	<p>DM is the Autism Lead for BCBC, which is a statutory role and as part of the role it covers involvement in the regional and national groups regarding neurodivergence until a separate role is established.</p> <p>The Autism Code of Practice requires the Regional Partnership Boards to ensure they consider the needs of autistic people when they are planning and from this there are now several Regional Neurodivergence Steering and Improvement Boards (RNSIB).</p> <p>DM is leading on Work Stream 5 - Access, Inclusion and Support (Adults) and is hoping to work with RHSCG members on the Housing element of this work stream (see slide 10 of the attached presentation). Specifically wanting to consider homelessness and the interface between LA services and where changes or improvements can be made to structures, systems and how to improve interactions with neurodivergent individuals.</p> <p>DM leads on the adult work stream, but also sits on the four other work streams which include children.</p> <p>DM to link in with the Regional Provider Forum and so KF to share contact details with Stephanie Whitehead.</p> <p>DM clarified success would be measured by neurodivergent individuals reporting back that things are different and improvements have been made for the better.</p> <p>DM confirmed diagnosis can come under the support element of 5, as there are strategies that can be put in place while waiting for a diagnosis, but there is a work stream specifically for diagnosis and the waiting list issues are being looked at.</p> <p>CE pointed out there is a large amount of offenders in homeless services currently so it would be of benefit if the RPB could carry out a piece of research around the offender population.</p> <p>BU suggested research be carried out around how neurodivergence manifests and how to identify the symptoms, then the training and/or support you can put in place while people are awaiting diagnosis.</p> <p>HOS currently provide courses on managing the negative symptoms of ADHD, but are also looking to offer ADHD assessments in the future to help reduce waiting lists for diagnosis, DM to link with CL on behalf of HOS.</p> <p><b>3.2 Task &amp; Finish group update</b></p> <p>KF explained the CTM Work Plan has been enhanced and includes tangible outcomes and numerous actions will be taken forward by the T&amp;F group, who are currently looking into the 'back payment' issues. Any queries or input regarding the regional work plan please forward to <a href="mailto:Kelly.Francis@merthyr.gov.uk">Kelly.Francis@merthyr.gov.uk</a>.</p>
4	<p><b><u>Housing / Homelessness Updates (including 24/25 HSG uplift)</u></b></p> <p><b>BCBC - RJ:</b></p> <p>Temporary accommodation is still the biggest issue and a lot of work streams are ongoing to reduce this. The key focus is getting more sustainable and cost-effective measures to deal with the issue. Numerous buildings are being repurposed for temporary accommodation, including a number of large family units. Working closely with RSLs in connection with TACP. Starting to see the impact of the Rented Homes Act on temporary accommodation as those on Occupational Contracts create issues with regards to</p>

	<p>safeguarding residents, staff, neighbours and property. It provides greater protection for the individual and allows them to go back to the property with little consequence.</p> <p><b>MTCBC – HM:</b>          Agree with Ryan regarding the impact of the Rented Homes Act and how this is adversely affecting temporary accommodation. TACP properties have been completed recently and this will slightly reduce the amount of individuals in temporary accommodation, which stands at 117. High demand for those requiring supported accommodation particularly those with complex or multiple needs and working with an RSL to provide a new 19 unit supported accommodation provision.</p> <p>GH mentioned the Pearl House Project in Torfaen and will provide links to the HSG Leads.</p> <p><b>RCTCBC – CE:</b>          Similar situation to Bridged and Merthyr, RCT have a high demand for temporary accommodation with limited supply but in RCT the biggest cohort is offenders with a high concentration of very complex and challenging individuals. Working very closely with the Police and Probation to try and resolve some of the issue. Increase of need from households with children and using the TACP to buy larger accommodation. Opening a new temporary accommodation project for women with complex needs and domestic abuse issues. HMOs not working so well in RCT due to the offender population but what is working well is dispersed units within the community. Working with Pobl at remodelling some of our projects and looking at the first ever managed unit, which will be long term accommodation. Complexities of clients is immense at the moment and there is no size fits all. Working closely with ER regarding the early release of prisoners next week.</p>
<b>5</b>	<p><b><u>Partner/Stakeholder/Representative Updates</u></b></p> <p>ER – At the middle of July it was announced that certain prisoners would be released at the 40% point and the start of these early releases would be the 10<sup>th</sup> September. RCT as the larger cohort of prison leavers and some are being released street homeless with the offer of a tent. The primary focus of Probation and our Housing colleagues is public protection and our collaborative working has been vital during these intense times.</p> <p><b>5.1 Housing Support Provider Update - LG:</b>          At the last RPF the main discussions were regarding the increase of the HSG which has now been passed onto providers, the White Paper process and the impact it will have but the main discussion was around the complexities and impact within supported accommodation and how it is managed and working in partnership with the LA to resolve this. LG has had discussions on behalf of the RPF with each individual LA and we have a way forward and a plan in progress which I can take back to the RPF. Each LA is different and allocate in a different way and so worked better doing it per LA and having a consistent approach for providers. The main focus is continued communication and working together in partnership.</p> <p><b>5.3 RPB Housing Rep Update - GH:</b>          The last RPB took place on the 15<sup>th</sup> August and the key issues discussed was the Integrated Care Hub Strategy, GH will forward this to KF for circulation. End of year performance around RIFT and the Capital Programme were also discussed. GH and EH are relatively new to the RPB so would like to offer the group the opportunity to raise issues on behalf of the RHSCG. The focus is mainly around capital, but not necessary the same level of conversation around existing services, and it was pointed out that the RPB's annual report did not cover the really good exciting services out there. GH and EH need to understand better what the RHSCG is asking of them as Housing Reps on the RPB and get housing issues heard so the focus isn't solely on capital. KF to include on</p>

5.4	<p>the HSG Leads agenda a regular key message for the RPB Reps and also look to set up a meeting to discuss this further.</p> <p><b>Partner updates:</b></p> <p>Successful again this year in gaining a VAWDASV capital grant for dispersed accommodation in order to provide an alternative for refuge accommodation. Grants are not only needed for capital but for support provision as well.</p>
6	<p><b><u>AOB</u></b></p> <p>The next meeting in December will be on Teams but the meeting in March will take place at March House in Merthyr Tydfil unless there are any other suggestions for a venue.</p>
7	<p><b>Meeting dates 2024/25:</b></p> <p style="text-align: right;"><b>Q3 Tuesday    3<sup>rd</sup> December 2024</b>  <b>Q4 Tuesday    4<sup>th</sup> March 2025 – <i>In Person</i></b></p>
	<p><b>Actions arising from this meeting:</b></p> <p>KF to include on the HSG Leads agenda a regular key message for the RPB Reps and also look to set up a meeting to discuss this further.</p>