# SJOG News

## Research & Policy

**March 2026**

## Publications

**Navigating Homelessness: challenges faced by survivors of modern slavery** - This report is based on a research project conducted by The Passage and funded by the Modern Slavery and Human Rights Policy and Evidence Centre (PEC). It explores the housing challenges faced by survivors who only received outreach support under the Modern Slavery Victims Care Contract (MSVCC).

**Assisted dying in practice: International experiences and implications for health and social care** – explores what the UK can learn from other countries as the UK and Scottish Parliaments debate bills to legalise assisted dying and potentially set up assisted dying services. It finds that that safe and effective implementation will require substantial planning, infrastructure and funding.

**National Referral Mechanism 2025 End of Year Statistics -** The Home Office has published its end of year summary for the National Referral Mechanism (NRM) and Duty to Notify Statistics in 2025. In 2025, 61% of reasonable grounds decisions in the NRM were positive, whilst 66% conclusive grounds decisions were positive. 77% of conclusive grounds decisions which were reconsidered received a positive outcome. View the data here.

## Resources

**Inclusion Health Training Framework:** West Yorkshire ICB has developed an Inclusion Health Workforce Training Framework to help tackle the severe health inequalities faced by socially excluded groups, including asylum seekers, people experiencing homelessness, and Gypsy, Roma and Traveller communities. By embedding trauma-informed, person-centred care into everyday practice, this initiative aims to support the development of a health and care workforce equipped to deliver equitable care for everyone.

**What Works Wellbeing:** The network shares knowledge, ideas and challenges collaboratively to find out what works to improve wellbeing at the **end of life**. It provides resources on how to improve wellbeing for individuals with terminal illnesses and their families by placing it at the center of palliative care, Advance Care Planning, and workplace policies.

**Support in England and Wales after a positive conclusive grounds decision**: The Home Office have published new guidance on support for survivors of modern slavery after they have received a positive conclusive grounds decision in the National Referral Mechanism. The guidance details how support will change at this stage, what a recovery needs assessment is and how it is used, and how the Home Office will decide when survivors should exit support.

**The Mental Health Act 2025 summarised :** Specialist lawyer Tim Spencer-Lane sets out how for Community Care the Mental Health Act 2025 reforms the law on the detention and compulsory treatment of people with mental health needs who are considered a risk to themselves or others.

# Evidencing everyday practice

## Policy into practice: shaping healthcare in 2026

### Introduction

Across the UK and healthcare sector, we have seen, in the past months, significant reforms in mental health, disability benefits, migration, social care, employment law and digital regulation – regulations that have a direct impact on people we support at SJOG.

### A year of reforms

First, the reforms to the Mental Health Act 2025 - that received Royal Assent on December 18, 2025 - aims to strengthen patient rights, reduce inappropriate detention, and address racial inequalities. The introduction of statutory Care and Treatment Plans, Advance Choice Documents, and enhanced tribunal access represent a meaningful transition toward autonomy and accountability.

For SJOG, this reinforces our psychologically, trauma-informed and person- centred practice. It also has operational considerations. Clarity will be needed on how advocacy and the Mental Capacity framework are shaped and integrated in service delivery. While the reform increases dignity, it also increases the responsibility to be legally informed and ethically accountable.

For the disability sector, proposed changes to Personal Independence Payment - including tighter eligibility criteria - and restructuring of the Universal Credit health element may significantly reduce income for some disabled people. For people we support, this could increase risk of late rent payments, social isolation, digital exclusion, and deterioration in mental health.

We should remain committed to the principle of hospitality to help people navigate complicated care and benefit systems, by integrating welfare advice, financial capability support, and proactive tenancy sustainment into everyday practice.

Similarly, higher regulatory standards introduced by the Renters Reform agenda, such as extension of the Decent Homes Standard, and the Awaab's Law ensure tenant protections and housing quality. This aligns strongly with our ethos. Safe, decent housing is not a luxury; it is a determinant of health. However, it may reduce landlord participation in supported housing markets if funding and guidance are not allocated accordingly. We must continue to engage strategically with commissioners to ensure that quality improvement is matched by sustainable investments to access properties people can call home.

In terms of migration and modern-day slavery, the combined impact of the Nationality and Borders Act 2022 and the Illegal Migration Act 2023 has created a more restrictive environment for asylum seekers and survivors of exploitation to receive support. Higher evidential thresholds and shorter recovery periods within the National Referral Mechanism mean that some of the most traumatised people may struggle to access and secure and access protection.

For SJOG, it demands considering even stronger documentation, safeguarding and trauma-informed practice, advocacy and extended multi-agency collaboration. It also requires emotional resilience within services. The moral tension between restrictive policy and hospitaller values is real and it limits the type of long-term support we can provide. Remaining grounded in hospitality and compassion, while navigating statutory realities professionally is living our values through this time.

The establishment of a Fair Work Agency under the Employment Rights Act 2025 and the development of Social Care Fair Pay Agreements signal a need to improve sectors pay and enforcement of labour standards, which are positive steps and impacts recruitment, retention, and wellbeing. The delivery of compassionate care requires also an organisational culture that is embedded in service quality, fairness, and support towards colleagues.

Finally, the Online Safety Act 2023 introduces new duties around harmful online content, particularly

for children and vulnerable adults. As services increasingly digitise - through online engagement and AI-assisted tools - governance must ensure that data protection, digital literacy, and ethical AI use remain updated and central to safeguarding practice at SJOG.

Legislative reforms in 2026 consolidate rights in some areas and require careful consideration and adaptation in others. For SJOG, this means combining expertise, values and advocacy: staying connected to lived experience and practice, understanding the implications, and raising the voices of those most affected, to ensure people live their lives with dignity.

# Article of the month

## Accompanying with Dignity: The Terminally Ill Adults (End of Life) Bill and the role of charities

By Ioana Brezeanu, Senior and Policy Research Officer

Introduced on 11 November 2024 by Labour MP Kim Leadbeater, the Terminally Ill Adults (End of Life) Bill 2024–25 proposes a legal framework in England and Wales allowing mentally competent adults with a terminal illness and a prognosis of six months or less to request assistance to end their lives. The process involves approval from two independent doctors, a High Court judge, and an Assisted Dying Review Panel- including a lawyer, psychiatrist, and social worker - with strict safeguards against constrain. It requires the person to self-administer the approved medication.

While eligibility defines that applicants must be 18+, ordinarily resident in England or Wales for at least a year, are registered with a GP, and suffering from an inevitably progressive terminal illness - disabilities, mental health conditions alone, or voluntarily stopping eating or drinking do not qualify.

Legal protections are to be provided for professionals participating within the statutory framework, and a Voluntary Assisted Dying Commissioner and disability advisory board will oversee implementation and monitor impact on vulnerable groups.

For organisations such as SJOG, the Bill reaffirms the critical mission in accompanying people and families with compassion, dignity, and choice at life's end.

If the Bill passes, which is by no means certain at the current time, charities will be uniquely placed to act as the bridge between formal health services and the lived reality of those undertaking the procedure and their families, ensuring they are not left isolated or pressured, and that their choices are respected at every stage. It will involve attentive presence, emotional support, and the guidance needed to navigate complex medical, legal, and social systems.

While the legislation sets boundaries and sets recommendations and safeguarding of medical procedures, it is important to ensure care is humane, attentive, and affirming.

Compassionate care in action may look like:

**Presence and advocacy:** listening deeply, responding to fears and making sure people's voices shape the care people receive.

**Supporting families:** recognising that families, in all their diverse forms, are central to a person's care. Charities can help them provide practical, emotional, spiritual, and social support, and include them in decision-making where the patient wishes.

**Respecting and facilitating individual choice:** ensuring the people understand all available options, including palliative and hospice care, and supporting their autonomous decisions without pressure or influence.

**Multidimensional support:** helping address non-medical needs - material, psychological, relational - that directly affect quality of life at the end.

**Some practical steps for charities and care providers might include:**

1. Training support teams to engage sensitively in end-of-life discussions and recognise vulnerability.
2. Coordinating with health services to provide consistent, accessible palliative care.
3. Advocating for systemic improvements while accompanying the persons with empathy and presence.
4. Engaging families as partners in care, respecting their role as essential caregivers and witnesses.

Ultimately, the extensive discussions surrounding the Bill as it moves through different phases through Parliament demonstrate that this this goes beyond policy design and legal frameworks – it concerns the very values that shape us as a society and the way we take care. Whether or not assisted dying becomes law, the debate highlights the urgent need for measures within the care system that protect dignity, relieve suffering, and provide support to the most vulnerable. In this context, community and faith-based organisations play a crucial role, ensuring that no one faces the end of life alone and that are supported with compassion and choice.

## News and training

**The Education and Health and Social Care Committees** have jointly launched an inquiry into **the mental health of children and young people.** This inquiry will examine the mental health support and services, which are provided to children and young people up to the age of 25. The Committees wish to understand how this provision is integrated with specialist Child and Adolescent Mental Health Services (CAMHS), acute and other statutory NHS services. The Committees are accepting written evidence submissions until 27 March 2026 (by 23:59pm).

**Changes to Further Submissions and Appeals:** Failed asylum seekers must now meet all validity requirements when submitting further submissions, including being physically present in the UK, and having no outstanding appeals or protection claims. A person making further submissions must now attend an in-person appointment at a Service and Support Centre. A new implicit withdrawal provision also allows the Home Office to treat further submissions as withdrawn if applicants fail to comply with process requirements (e.g. maintaining contact or attending reporting events).

**Social Work Month and Neurodiversity Celebration Week Webinar:** The focus will be on 'belonging' and discussions will examine how everyone has a role to play in creating and sustaining an inclusive culture, in which every social worker – whether neurotypical or neurodivergent - feels that they belong, and that their differences are celebrated rather than minimised.

**When?** Thursday 19th March 2pm-2:45pm **Where?** Online

**A human rights-centred approach to addressing modern slavery and human trafficking conference,** organised by the Modern Slavery & Human Rights Policy & Evidence Centre, will take place on 21st April 2026 in London. Please save the date and register to attend the event here.