

HEALTH AND WELLBEING BOARD – DATE 27 MAY 2015

Title of paper:	Housing's Contribution to the Health and Wellbeing Agenda –	
Director(s)/ Corporate Director(s):	Gill Moy – Director of Housing Nottingham City Homes &	Wards affected: Citywide
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Other colleagues who have provided input:	Members of the Nottingham Health and Housing Partnership Board	
Date of consultation with Portfolio Holder(s) (if relevant)		
Relevant Council Plan Strategic Priority:		
Cutting unemployment by a quarter		<input type="checkbox"/>
Cut crime and anti-social behaviour		<input type="checkbox"/>
Ensure more school leavers get a job, training or further education than any other City		<input type="checkbox"/>
Your neighbourhood as clean as the City Centre		<input type="checkbox"/>
Help keep your energy bills down		<input checked="" type="checkbox"/>
Good access to public transport		<input type="checkbox"/>
Nottingham has a good mix of housing		<input checked="" type="checkbox"/>
Nottingham is a good place to do business, invest and create jobs		<input type="checkbox"/>
Nottingham offers a wide range of leisure activities, parks and sporting events		<input checked="" type="checkbox"/>
Support early intervention activities		<input checked="" type="checkbox"/>
Deliver effective, value for money services to our citizens		<input checked="" type="checkbox"/>
Relevant Health and Wellbeing Strategy Priority:		
Healthy Nottingham: Preventing alcohol misuse		<input type="checkbox"/>
Integrated care: Supporting older people		<input checked="" type="checkbox"/>
Early Intervention: Improving Mental Health		<input checked="" type="checkbox"/>
Changing culture and systems: Priority Families		<input checked="" type="checkbox"/>
Summary of issues (including benefits to citizens/service users and contribution to improving health & wellbeing and reducing inequalities):		
<p>The purpose of this report is to identify the contribution housing services makes to improving the mental and physical health outcomes for Nottingham citizens. This is the 'housing offer to health services'.</p>		
Recommendation(s):		
1	<p>To note the contribution that housing providers, and housing interventions, make to the health and wellbeing of Nottingham citizens, particularly in reducing demand for primary and secondary health and social care services, and to consider the contribution that housing services can make when commissioning health services.</p>	
2	<p>To note the Memorandum of Understanding (MOU) to 'Support Joint Action on Improving Health through the Home' and to agree that the Health and Housing Partnership Board should own such actions locally and make future recommendations to the HWB Board.</p>	

3	To note the outcomes from the Health and Housing event on 28th November 2014 organised by the Strategic Housing Network and the Nottingham Health and Housing Partnership Board.
	<p>How will these recommendations champion mental health and wellbeing in line with the Health and Wellbeing Board aspiration to give equal value to mental health and physical health ('parity of esteem'):</p> <p>Housing conditions are one of the multiple factors of deprivation that can impact negatively on health outcomes, including mental health and wellbeing. There is a clear social gradient in health nationally, with those living in the most deprived areas having worse outcomes across a number of health conditions including poor mental health. Good quality housing, and appropriate housing services, can make a positive impact on both physical and mental health.</p>

2 REASONS FOR RECOMMENDATIONS

- To raise awareness of the positive contribution that housing makes to improve the mental and physical health and wellbeing of Nottingham citizens.
- To help align relevant local priorities in the fields of health, public health and housing in order to maximise delivery, outcomes and efficiency.
- To highlight the role of housing in the early intervention prevention agenda as this reduces the demand for more expensive primary and secondary health and social care interventions.
- To help identify ways in which partner organisations in health and housing can work together to deliver outcomes that help health services reduce instances of ill health and thus reduce demand for such services.
- To highlight best practice and emerging solutions provided by housing service providers as a contribution that forms the housing offer to health services.
- To help those that commission services to consider the role housing has in improving the mental and physical health outcomes for citizens when services are commissioned.

2. BACKGROUND (INCLUDING OUTCOMES OF CONSULTATION)

Early social reformers recognised the critical link between housing and health. 19th century social reformers and philanthropists sought to make significant improvements in the health of the population via housing and public health reforms that are well known. Since that time, of course, we have seen massive technological, social and organisational change in the fields of health and housing. However, it is always worth recalling the aspirations of pioneers in these fields because there remain fundamental links in the way in which improved health can be brought about by good quality housing and the services associated with it.

The challenge facing health and care bodies is huge, with the drive for £20bn efficiencies in the NHS and increasing demand on restricted budgets for social care. New ways of working are needed, that shift the focus to better health and wellbeing, preventing or delaying ill health, reducing demand for health/care interventions.

Housing is one of the key factors that determine health outcomes. Poor quality housing, including cold, damp and insecure conditions, have a negative impact on both physical and mental health, whilst the occupants of poorer quality housing are most likely to be adversely affected by many of the social determinants of health identified in the Marmot Review (Fair Society, Healthy Lives). Life expectancy is also closely related to disparities in social and economic circumstances. Those living in the wealthiest neighbourhoods live on average 10 years longer than those in the most deprived neighbourhoods.

Housing and Health Bodies Joint Memorandum of Understanding

In recognition of their shared commitment to tackling these issues twenty housing and health organisations signed a Joint Memorandum of Understanding (MoU), to improve health through the home, in December 2014. The MoU is available to download [here](#), and commits to a shared commitment to joint action across government, health, social care and housing sectors, in England.

It is proposed that the Health and Housing Partnership Board should become the owner of these actions locally and determine how Nottingham City can best deliver against the MoU agreement, in order to make future recommendations to the HWB Board.

Nottingham City hosted a conference in November 2014: Delivering Better Health Outcomes through Housing, organised by the Nottingham Strategic Housing Network and Nottingham Health & Housing Partnership Board. The report of this major piece of consultation is available at this [link](#). It is recommended that the outcomes from this conference will populate an MOU Action Plan.

Evidence Based examples of the ‘Housing Offer to Health’ that are around early intervention / preventing demand on health services:

Environmental Health (EH)

This service is active in securing housing improvements that protect health, it has a statutory duty to make sure that the homes people live in are safe and do not cause hazards to health. There are over a 1000 visits to homes annually primarily in the private sector (particularly the private rented sector). The homes are often occupied by some of the city’s most vulnerable citizens and many are multi occupied. Involvement can be through referrals received or through licensing or targeted approaches. The service can require that improvements are made or properties closed. EH also seeks to achieve managerial and behavioural improvements to protect the physical and mental health and wellbeing of occupants and prevent illness. Matters addressed include overcrowding, excess cold, dampness, falls, unsanitary and unsafe conditions such as dangerous electrics, fire, noise, legionella, and vermin. The service tackles some of the poorest housing conditions and achieves remedies.

Areas where more could be achieved

Environmental Health and Housing Strategy will be assessing the health outcomes of these impacts which will evidence the public health benefit and the savings to the NHS. It is intended to use the Building Research Establishment (BRE) Housing Health Cost Calculator to do this. Further activities include developing improved referral arrangements from partners, including health and social care and targeted action to respond to hot spot health and housing matters to support initiatives such as encouraging behavioural change eg smoke free homes.

Affordable Warmth

The health benefits from reducing cold homes are known. Certain housing types are particularly prone and ‘Hard to Treat’. Nottingham has many instances of fuel poor households. The City Council, NCH and Nottingham Energy Partnership have delivered multi tenure insulation schemes in certain neighbourhoods. Decent Homes programmes have tackled issues around fuel poverty, and Nottingham Energy Partnership have co-

ordinated and sourced funding for a range of schemes to improve insulation and reduce energy use.

Areas where more could be achieved

There are a significant number of housing estates and house types across the city that can be treated with equivalent insulation schemes. It will be necessary to continue programmes of this sort to maximise the health and other benefits of warmer homes, working with Nottingham Energy Partnership to help those most in need.

Social Housing Decent Homes Programme

Now delivered across the city council's social housing stock (approximately 35,000 homes – 26% of homes in the city) this programme has made significant improvements to the quality of housing in Nottingham.

In 2011 Nottingham City Homes (NCH) commissioned research into the health impact of its decent homes programme, Secure, Warm and Modern (SWM) and this is available at this [link](#). Key findings included:

- improved heating systems have reduced the cases of respiratory illness in children;
- work to remove serious fall hazards have helped to reduce hospital admissions;
- the number of excess winter deaths and hospital admissions have reduced as a result of improved thermal efficiencies;

Other areas of investment also make significant contributions. For example upgrades to Independent Living Schemes (ILS) to Housing our Ageing Population: Panel for Innovation (HAPPI) standards, aids dementia sufferers meet their longer term needs and help them to live more independently.

Areas where more could be achieved

Social landlords will seek to maintain decency, but as the occupant profile of the households changes over time the potential for risk of hazards in the home may change. It will require proactive work to ensure hazards are continually reduced.

Improvements and Adaptations

The council delivers improvements and adaptations to homes that have an impact on health. The Home Safety and Improvement Service, funded by the council and currently delivered by Age UK Nottingham is designed to help those aged over 60 and other vulnerable citizens to remain in their homes. This is achieved by reducing the occurrence of avoidable injury or ill health caused by hazards within the living environment. This aims to reduce emergency hospital admissions. Nottingham has a high level of Injuries due to falls in those aged 65 and over.

Adaptations for disabled and older people help citizens remain at home safely and maximise their independence. This helps to minimise home care and residential care, to prevent admissions to A & E, and facilitates timely discharge from hospital. The Adaptations Agency is preparing a clinical research study with the University of Nottingham's Medical School to identify the health benefits of the timely installation of adaptations.

The Healthy Housing Referral Service commissioned by Public Health, aims to improve the quality of life of vulnerable people aged over 60 and families with children by reducing cold-related illnesses through the delivery of practical, home energy improvements. Health and care frontline staff receive training in identifying the effects of poor housing on

health and can make referrals directly to the service through the Nottingham Energy Partnership website here – [Healthy Housing referral service](#)

Areas where more could be achieved

In many cases adaptations will be triggered following an assessment of need after a health or care intervention. Further resources to raise awareness of the benefits, and proactively providing adaptations would be likely to reduce accidents in the home.

The Healthy Housing Referral Service could be expanded to support more citizens with this service.

Assistive Technology (AT)

AT is the collective name for a number of devices which promote independent living. It includes community alarm devices, Telecare and Telehealth products which can make a major contribution to helping people live independently at home, secure in the knowledge that help can be summoned at the press of a button.

NCH delivers a call centre service supported by response staff. This often saves ambulance call outs when there are alternative solutions. During 2013/14 the NCH Nottingham on Call (NOC) response service attended 1,200 calls which otherwise would have relied upon an ambulance response. NOC has been commissioned by the City Care Partnership/CCG to install and monitor its Telehealth programme.

Areas where more could be achieved

There is considerable scope to expand the existing NOC service across tenures. Partner organisations in the health sector can support these expansion plans by promoting the benefits of the service with citizens they are working with.

There are ambitious plans to extend the use of Telehealth products and reduce reliance on primary health and social care provision whilst enabling service users to monitor their own long term health conditions.

Social Isolation and Mental Health

Isolation is a significant problem for many people and a contributing factor for those who experience mental health issues.

Housing providers offer services, particularly for older residents, aimed at tackling social isolation. A signposting service provided by Metropolitan Housing is commissioned by NCC to link people into a wide range of services which promote independent living. First contact agencies in health and social care are well placed to help residents access other services provided by housing organisations following initial assessments. Projects such as Nottingham Circle and the 'Looking After Each Other' project (an NCC initiative) are also initiatives that housing organisations work with to help address social isolation.

Areas where more could be achieved

Those suffering from loneliness are, almost by definition, 'hidden'. Whilst housing providers may be well placed to help identify them, some local authorities have used 'loneliness mapping' techniques to identify areas where people may be at risk (see this example linked here). This could be an initiative that could be used locally to identify at risk groups.

Housing with Support

A range of providers in Nottingham provide various sorts of 'supported housing' for a wide variety of citizens with support needs, as well as floating support that is delivered to people in their homes, which enables them to live independently for longer, reducing the need for more expensive residential social care. Provision is often targeted at specific groups and providers often have particular specialisms. This reduces the long term dependency of individuals on primary and secondary health services.

Areas where more could be achieved

Improving older supported housing schemes will need to continue to address changing needs and aspirations. Upgrades to schemes have proved successful, and developments of modern 'extra care' housing provision, capable of change to meet differing needs, shows the way forward for this type of housing.

Homelessness and homelessness prevention

The link between homelessness and poor health is long established. Ill health can be both a cause and a consequence of homelessness. As a result the City's Homelessness Prevention Strategy identifies improving health and addressing multiple and complex needs as one of its five cross-cutting strategic drivers. The actions delivered by the city's homelessness partnership (the Homelessness Strategy Implementation Group (SIG)) reflect the recognition in Nottingham that we must not only provide services to meet the health needs of homeless people but ensure that the health needs of vulnerable people are met to prevent them from becoming homeless. The multi-agency group is responsible for the development and delivery of the Homelessness Joint Strategic Needs Assessment.

Areas where more could be achieved

There are ongoing efforts to ensure that the financial and human value of homelessness prevention is recognised amongst wider partnerships and that particularly health commissioners, governing bodies and practitioners understand that an incidence of homelessness is a failed opportunity for earlier intervention.

Housing Health Co-Ordination

This partnership initiative between NCH and the Nottingham City Care Partnership will pilot an approach to housing options and support as part of Integrated Care. Objectives seek to ensure that at hospital discharge suitable accommodation is available, and speed up discharge from hospital where inappropriate housing is the delaying factor in discharge. This will serve to smooth the transfer from hospital to home, free up hospital bed spaces and help prevent re-admissions. The project evaluation will have a clinical focus to help measure health outcomes most effectively.

Low incomes, debt, worklessness and the relationship with ill health

There are recognised relationships between low incomes, worklessness and debt problems with ill health, both physical and mental. Housing providers will typically provide debt advice and income maximisation. Staff can support residents complete benefit applications and generally signpost to available support services such as food banks. Helping tenants into work is a priority for social landlords. This takes people out of the poverty trap and will positively impact on individual physical and mental wellbeing. Housing

providers facilitate training opportunities for tenants, as well as apprenticeship schemes targeted at those who live in the homes they provide.

Areas where more could be achieved

Support work with residents to help maximise advice, training and the acquisition of skills increases the prospects of many residents finding pathways to increased incomes, most notably via supporting people into work, with the prospects of commensurate reductions in associated ill health. There will be significant further challenges to address as a result of ongoing welfare reform and the introduction of Universal Credit.

3. OTHER OPTIONS CONSIDERED IN MAKING RECOMMENDATIONS

The report is for noting so no other options were considered.

4. FINANCIAL IMPLICATIONS (INCLUDING VALUE FOR MONEY/VAT)

The offer that housing services can make is designed to save money on a range of health interventions to deliver better value, more 'joined up' services and partnership working. This aims to maximise the benefits that housing services bring to improving citizens' health and wellbeing.

5. RISK MANAGEMENT ISSUES (INCLUDING LEGAL IMPLICATIONS AND CRIME AND DISORDER ACT IMPLICATIONS)

Not applicable

6. EQUALITY IMPACT ASSESSMENT

Not needed (report does not contain proposals or financial decisions)



7. LIST OF BACKGROUND PAPERS OTHER THAN PUBLISHED WORKS OR THOSE DISCLOSING CONFIDENTIAL OR EXEMPT INFORMATION

Not applicable

8. PUBLISHED DOCUMENTS REFERRED TO IN COMPILING THIS REPORT

1. The Secure Modern and Warm Programme in Nottingham, Decent Homes Impact Study: Health and Wellbeing, December 2011. [Link](#)
2. Fair Society, Health Lives ('the Marmot Review'), Institute of Health Equity, February 2010. [Link](#)
3. A Memorandum of Understanding (MoU) to support joint action on improving health through the home, Chartered Institute of Housing, December 2014. [Link](#)
4. Delivering Better Health Outcomes through Housing, Nottingham Strategic Housing Network, and Nottingham Health & Housing Partnership Board, November 2014, workshop report here [Link](#).
5. Nottingham City Joint Strategic Needs Assessments – Housing, and Excess Winter Deaths [Link](#)
6. Care Act 2014. [Link](#)
7. BRE Trust 'The Cost of Poor Housing to the NHS', Briefing Paper, 2015. [Link](#)
8. National Institute for health and Care Excellence Excess (NICE), Winter Deaths and Morbidity and the Health Risks Associated with Cold Homes, March 2015. [Link](#)