Memorandum of Understanding to Support Joint Action on Improving Health through the Home

Nottingham a Local Perspective

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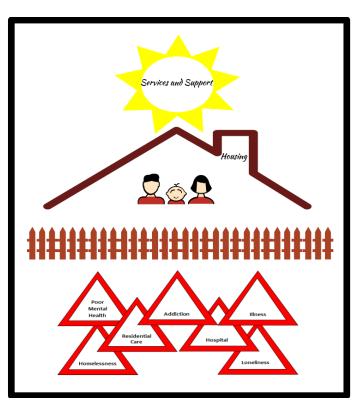
Introduction

'Where we live is a wider determinant of our health and drives health inequalities. The more deprived the neighbourhood, the more likely it is to have social and environmental characteristics presenting risks to health' Marmot 2010

In 2010, the Nottingham City Homes Decent Homes Impact Study reported that in Nottingham those living in the most deprived neighbourhoods die ten years earlier than those living in the wealthiest areas.

The link between poor housing and ill-health are well known. It is estimated that poor housing costs the NHS at least £2billion per year and ill health can be both a cause and a consequence of homelessness.

Inappropriate, unsuitable, insecure and below standard accommodation and a lack of support and poor access to services sit within an overarching context of poor or deteriorating health. However, when suitable, stable and decent standard accommodation is provided with appropriate and adequate support (including local networks and access to services) in safe, clean and positive neighbourhoods and communities, the foundations are laid for improved and stable health and wellbeing throughout life. The image right shows that good quality housing and support services can act as a barrier to negative conditions and situations.



It is critical that health, housing, social care and support services work together to ensure that a person's housing contributes positively to their health and wellbeing.

The Nottingham Memorandum of Understanding is an agreement between local health, social care, housing and support colleagues who are committing to working in partnership to ensure that there is cross-sector identification and awareness of the needs of the local population. The Memorandum of Understanding also sets out a detailed action plan to demonstrate how working together across the sectors can deliver activity which ensures that the needs of all local people across the life course are met and health and wellbeing outcomes are achieved and optimised.

The Memorandum of Understanding provides the detail of how we aim to fulfil the priorities set out in our local governing strategies for housing and health and wellbeing in

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¹ Fair Society, Healthy Lives, The Marmot Review of Health Inequalities in England, 2010

Nottingham through early intervention and prevention activity. The Memorandum of Understanding has been developed alongside the local Health and Wellbeing Strategy and emerging Housing Plan to ensure there is complete alignment.

The Health Outcome we want the Nottingham Memorandum of Understanding to help to achieve

Citizens report that they are healthier, happier and live independently for longer

To be achieved by the following objectives...

Integrating health, social care and housing services Maximising the impact from housing as part of the 'wider health workforce'

2

3

Maximising the housing contribution to reducing health inequalities between areas, social and cultural groups Further developing the housing sector's role in reducing demand for health and social care services

5

Communities and citizens playing their part in contributing to healthier and happier lives, strategies and activities

What will success look like?

- 1. Integrating health social care and housing services:

 Health, social care and housing services seamlessly interface with each other providing holistic person centred care and support. Housing factors form part of health and social care assessment.
- 2. Maximising the impact from housing as part of the 'wider health workforce' Trained and skilled housing workers identify health and care needs and broker appropriate services. Data is shared between housing health and social care services for the benefit of citizens.
- 3. Maximising the housing contribution to reducing health inequalities between areas social and cultural groups

The housing stock has improved across tenure and localities. Citizens access the benefits and improvement grants that they are entitled to.

4. Further developing the housing sector's role in reducing demand for health and social care services

There are increased alternatives to residential care and usage of assistive technologies to help people stay independent. Homes are adapted to meet needs when and where appropriate.

5. Communities and citizens playing their part in contributing to healthier lives strategies and activities

Citizens access a broad range of social and health and wellbeing activities. Local communities are at the centre of support delivery.

Background

The current legislative and policy framework nationally suggests that working with the housing sector is a means to improving health and wellbeing.

- The return of public health responsibilities to local government through the Health and Social Care Act 2012² (Department of Health, 2012) presented an opportunity for local authorities not only to address the wider determinants of health such as poor housing conditions but also harness local resources to improve health outcomes and reduce inequalities.
- Implicit within the ambitious **NHS Five Year Forward View**³ is the principle of *making* every contact count; working in the community with partners such as housing, enabling care closer to home. (NHS England, 2014)
- The Five Year Forward View for Mental Health⁴ calls for a number of approaches to better integrate housing and support for greater collaboration between NHS Providers and Housing Providers. (NHS, 2016)
- The Care Act 2014⁵ recognises the importance of the home and housing services to improved health and wellbeing. Shifting to a health preventative approach which reduces the need for health and social care and which integrates housing in commissioning and service delivery. (Dept of Health, 2014)

In an effort to drive integration between housing and health services, the Kings Fund and the National Housing Federation collectively developed a learning network in 2015. The intent of the network was to:

- share learning about existing innovations and developments in integrated services
- offer opportunities for practical and peer support between the sectors
- support housing providers and support providers in the community and voluntary sector in gaining a deeper understanding and knowledge of how health and social care commissioning works
- raise the profile of the housing and housing related support sector's contribution to better health and care outcomes

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² http://www.legislation.gov.uk/ukpga/2012/7/contents/enacted

³ https://www.england.nhs.uk/wp-content/uploads/2014/10/5yfv-web.pdf

⁴ https://www.england.nhs.uk/wp-content/uploads/2016/02/Mental-Health-Taskforce-FYFV-final.pdf

⁵ Care Act 2014

The network produced a series of slides⁶ to illustrate the connection between housing, social care and health and wellbeing.

National Memorandum of Understanding









In December 2014, there was a key move towards further integration between the health, social care and housing sectors. Twenty leading health and housing organisations came together with government departments to sign up to a pioneering Memorandum of Understanding to support joint action on improving health through the home.

































The national Memorandum of Understanding contains an action plan that aims to ensure organisations work together to:

- Establish and support national and local dialogue,
- information exchange and decision-making across government, health, social care and housing sectors;
- Coordinate health, social care, and housing policy;
- Enable improved collaboration and integration of healthcare and housing in the planning, commissioning and delivery of homes and services;
- Promote the housing sector contribution to: addressing the wider determinants of health; health equity; improvements to patient experience and
- Develop the workforce across sectors so that they are confident and skilled in understanding the relationship between where people live and their health and wellbeing and are able to identify suitable solutions to improve outcomes.

⁶ http://www.kingsfund.org.uk/sites/files/kf/media/Housing-care-and-health-infographics.pdf

 Further integrate the mutual cooperation of health, social care and housing services to deliver more person-centered outcomes (in-line with the requirements of the Care Act 2014)

Local Position

The demographics of the city support the drive for progressing integration between health, social care and accommodation and support services to achieve mutual goals and positive health outcomes.

For example, life expectancy rates in Nottingham are increasing but remain too far below the national average⁷. In the 2015 Indices of deprivation (Government, 2015) Nottingham ranks 8th most deprived out of 326 Local Authority districts in England⁸ and over one third of the Lower Super Output Areas in Nottingham City Clinical Commissioning Group (CCG) area appear in the most deprived 10% nationally for the health deprivation and disability indicator.

Poverty is also a key indicator of deprivation. National evidence tells us social housing and private rented sector tenants spend a higher proportion of their income on housing costs. The levels of gross disposable household income in Nottingham average at £11,757. This is next to bottom out of all local authorities in England where the average is £17,559⁹. Nottingham also has high proportions of low income households reliant on benefits, with 3.3% of working age people claiming out of work benefits (compared to the national average of 1.6%) and 16.5% of households claiming some sort of benefit locally (compared to 12.2% nationally)¹⁰. This means that people locally have even less money to spend on household costs which limits access to affordable, decent standard accommodation. It also increases the likelihood of falling into fuel poverty within the home and being susceptible to all of the associated health risks and damage to wellbeing.

We know that deprivation is categorised by both health inequalities and living environments (including barriers to services and housing). We also know that poor health and wellbeing can be both a cause and a consequence of unsuitable, insecure and poor standard accommodation or instances of homelessness.

The <u>Housing</u>, <u>Homelessness</u> and <u>Excess Winter Deaths</u> chapters of the Nottingham Joint Strategic Needs Assessment (JSNA) have mapped the level of need within the local population and have shown how existing partnership measures have achieved health and wellbeing benefits for local people. For example, the Healthy Housing Referral Project delivers Warmer Homes courses to health professionals to enable them to identify vulnerable households in fuel poverty and in need of energy efficiency interventions. However, there is more to do and the JSNA chapters contain recommendations for further integration and delivery of earlier and preventative interventions.

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⁷Life expectancy for males is ranked 327th lowest in Nottingham out of 346 local authority areas and for females it is ranked 300th

⁸ This is the rank level using the 'average score' measure and compares with ranks of 25th out of 326 districts in the 2010 index

⁹ Regional Gross Disposable Household Income (GDHI), 1997 to 2013 - ONS

⁰ Labour Market Profile - Nomis - Official Labour Market Statistics

Efforts have continued locally to improve home energy efficiency and reduce hazards in the home and the current statistics from 2014 show 14% of households in Nottingham are in fuel poverty (down from 21.7% in 2011). However, the English Housing Survey suggests that further targeted action is required in the private rented sector (particularly), partly because of the age and condition of many of the properties. Nottingham has a much larger proportion of property in the private rented sector than elsewhere nationally and the proportions continue to increase. A large private rented sector teamed with low income (and often otherwise vulnerable households) and transient households such as students and emerging communities, means that enhanced efforts to raise standards in this area are particularly pertinent locally to prevent detriment to health and wellbeing.

A maintained programme of improvement works implemented by social landlords has resulted in uplift in decency in social housing. Whilst Nottingham City Homes have successfully brought 100% of their housing stock up to a decent standard, continued measures to maintain decency could be threatened as budgets shrink as a direct consequence of recent changes in government housing policy.

There is a commitment in the city to driving up standards in the private rented sector through the development and delivery of housing licensing schemes, accreditation and tackling rogue landlords. This will enhance positive action already underway improving housing conditions and health protection. Essential to success is a coordinated approach with interaction between health and housing partners to maximise opportunity and outcome.

Priorities on crime and anti-social behaviour (ASB) reduction in the city are in place and the Community Safety Partnership has evidenced locally that tenure and housing type can affect the likelihood of being affected by crime. Exposure to ASB, crime and feeling unsafe has known health impacts and the planned development of further partnership approaches give opportunities to bring housing, health, police and wider partners together to achieve positive health and housing protection.

The Homelessness Prevention Strategy recognises that homelessness instances or risk of homelessness has a significant impact on the health and wellbeing of a household. In 2014-15, 4590 households presented to Housing Aid as homeless or threatened with homelessness. In around 90% of cases interventions were delivered to mean that homelessness could be prevented and associated risks to health and wellbeing averted. Locally, services such as the Homeless Health Team are commissioned to meet the health needs of homeless people and work in partnership with accommodation and support providers to prevent rough sleeping. However, reduced resources and rising number of households at risk of homelessness are threatening service capacity. Mental health is an ever-increasing issue amongst people who are homeless. Recent research carried out by Framework shows that 75% of residents living in supported accommodation have a recorded mental health issue.

Local strategic drivers

Improving the health and happiness of people in Nottingham is clearly expressed within the Nottingham Plan to 2020 as a top priority.

¹¹ 22% of households living in private rented sector in Nottingham compared to 15% nationally

The <u>Nottingham City Council Plan</u> aims for Nottingham to be a city which enables healthy lifestyles, promotes wellbeing and supports community resilience as well as Enabling Nottingham residents to have access to a high standard of accommodation, whether renting or buying.

The new Health and Wellbeing Strategy and emerging Housing Plan for Nottingham mutually reflect further detail on how the integration of housing, health and social care can deliver positive health and wellbeing outcomes for local people.

The Nottingham Health and Wellbeing Strategy was redrafted in 2016 and gave social determinants of health a high priority. One of the four outcomes the refreshed strategy seeks to achieve is that Nottingham's environment will be sustainable; supporting and enabling its citizens to have good health and wellbeing. A priority area within this outcome is that Housing will maximise the benefit and minimise the risk to health of Nottingham's citizens.

The emerging <u>Housing Nottingham Plan</u> from 2017 will also highlight improving health through housing as a key priority. Improving health and addressing multiple and complex needs is one of the strategic drivers of the Nottingham Interagency <u>Homelessness prevention Strategy.</u>

<u>The Nottingham Mental Health Strategy - Wellness in Mind Strategy</u> prioritises promotion of mental resilience and prevention of mental health problems by aligning policy strategy and services across health, care and the wider determinants such as housing, to improve their impact on mental health and wellbeing.

The revised Nottingham Vulnerable Adults Plan will outline the cities approach to collaborative working across sectors to drive integration and efficiency and promote personalisation and individual choice.

The draft Financial Resilience Plan for Nottingham recognises the long established link between poverty and ill-health and agrees the need for a co-ordinated approach to tackling issues in Nottingham effectively.

An objective of the Nottingham City CCG Primary Care Plan is to promote the shared responsibility of health and the Nottingham City CCG Strategy states that access to good housing can directly influence health and wellbeing and pledges a collective approach to directly add value, effect sustainable change and deliver common objectives.

The Nottinghamshire Sustainability and Transformation Plan footprint commits to continuing to build a collaborative approach to deliver prevention and public health improvements which includes working closely with housing partners to provide safe and warm housing appropriate to the needs of our citizens.

The intention to contribute to improved health and wellbeing of residents is also set out within the corporate plans and visions of local housing providers. For example, the Nottingham City Homes Corporate Plan commits to help improve the health and wellbeing and quality of life of tenants and communities.

The <u>RESPECT Nottingham</u> survey is undertaken annually to find out the views and opinions of local people about anti-social behaviour, crime, community safety.

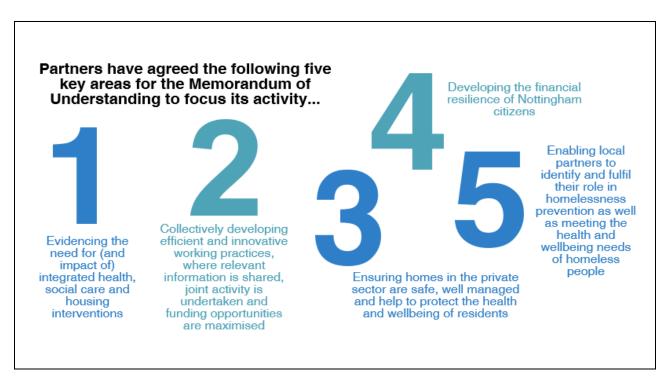
Developing a Local Memorandum of Understanding

In May 2015, the Nottingham Health and Wellbeing Board agreed that the Health and Housing Partnership Group (HHPG) should develop a local MoU which brought together the key strategic objectives for joint health and housing working to improve the health and wellbeing of local people.

The Health and Housing Partnership Group established a working task group to develop the local MoU; establish the key strategic priorities and develop an action plan which would effect change locally.

The Nottingham Memorandum of Understanding was released for consultation over May and June 2016. Methods of consultation included an online survey, discussion at relevant groups and forums and targeted one-to-one dialogue with key stakeholders. The final version was agreed by the Nottingham City Health and Wellbeing Board in July 2016.

Key Priorities for the Nottingham Memorandum of Understanding



Delivery, governance and review

The Health and Housing Partnership Group (HHPG) will meet bi-monthly and are to be responsible for developing and monitoring delivery of the MoU action plan. The MoU action plan will form the basis of the workplan for the HHPG which will be supported by a scheduled agenda timetable. Please see appendix(i) for the Terms of Reference for the Health and Housing Partnership Group.

A task coordination group will be formed from members within the HHPG who have the capacity to take on the required activity to progress the action plan and ensure the updates are available.

The lead agency identified next to each activity within the action plan will be responsible for reporting to the HHPG on the progress of the action. The HHPG will consider the how to support the delivery of the actions. Any risks will be highlighted to the Health and Wellbeing Board, via the Environment Outcome Group.

The HHPG will conduct an annual review of the implementation of the MoU and set the new workplan for the forthcoming year during this process.

The HHPG will provide an annual report of the review to the Health and Wellbeing Board in addition to providing any further information on individual actions or priorities that is specifically requested.

The annual report will also be available to support the monitoring of the Housing Nottingham Plan and the Homelessness Prevention Strategy.

Sign up

The following housing, health and social care organisations and services have signed this Memorandum of Understanding to commit to working in partnership to deliver agreed actions and in doing so; contribute to the achievement of improved health outcomes for the people of Nottingham.

| | Health and Wellbeing Board | |
|----------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------|-------------------------------------------------------------------------------------|
| Portfolio Holder for Planning and Housing | Portfolio Holder for Adults and Health | Portfolio Holder for Community Safety |
| Jane Urquhart | Alex Norris | Nicola Heaton |
| NCH Chief Executive | Police and Crime Commissioner | Fire Services |
| NUH Trust | CCG | City Care |
| Notts Healthcare NHS Foundation Trust | Wellness in Mind | DSVA Strategy Group |
| Homelessness Prevention Strategy Implementation Group | Nottinghamshire Social Housing Forum (Registered Providers) | Multi Agency Forum working with Refugees, Asylum Seekers and Emerging Communitities |
| Nottingham Vulnerable Adults Provider Network and Nottingham Children and Young Peoples Provider Network | Victim Support | DASH Landlord Accreditation |

Nottingham Memorandum of Understanding Action Plan

Priority Area 1.

Evidence the need for and impact of integrated health, social care and housing interventions

| Theme | Action | Outcome Objective | Lead | Supporting Organisation(s) | Measure of Success | Key Activity | Target Completion Date |
|-----------------------------------------------------------------------------------|------------------------------------------------------------------------------------------|----------------------|------------------------------------------------------------|-----------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------|
| Investigate the need for integrated health, social care and housing interventions | 1.1 Mapping and gapping exercise of current provision | 1,2,4 & 5 | NCC Housing Strategy and Public Health | Health and Housing Partnership Group | Existing services and missing areas of need identified | Activity of: Statutory services Housing providers Commissioned services VCS organisations (HWB3) | October 2016 |
| | 1.2 Ensure Housing related JSNA's are updated and recommendations implemented | All | NCC Housing Strategy | Health and Housing Partnership Group | Recommendations in JSNA are implemented. Research is used to inform commissioning decisions | All Housing related JSNA's refreshed - Housing - Homelessness - Excess Winter Deaths (EWD) | Homelessn ess Dec 2016 Housing Dec 2017 EWD Dec 2018 |
| | 1.3 Collaborate on the localisation redesigning of health and social care services | 3 & 4 | CCG | Health and Housing Partnership Group Area Committees Area Based Leads Communities of Identity Leads | Services are locally appropriate, accessed and utilised | Consider how housing can utilise the Care Delivery Group Health Profiles to target community interventions | April 2017 |
| | 1.4 Undertake BRE stock condition survey in private sector and publicise outcomes | 3 | NCC Housing Strategy Environmental Health and Safer Places | Health and Housing Partnership Group | BRE Stock Condition survey completed, with findings and recommendations for action | Survey to be commissioned, completed and report produced containing recommendations for strategic consideration | 2017 |
| | 1.5 Complete Annual review of | 1, 4 | Homelessness | VAPN & CYPPN | Report produced and | Collaborative information | August |

| homelessness | | SIG | Young Persons task group MAF DSVA voluntary | shared to inform strategy, commissioning and service developments | review Review of annual workplan Setting new annual | 2016 (annually) |
|------------------------------------------------------------------------------------------------------------------------------------------------------|---------|--------------------------------|-----------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------|
| | | | sector group Advice Nottm Advisors Forum | service developments | workplan | |
| 1.6 Explore potential for a cost benefit analysis of homelessness prevention through a health audit | 1,4 & 5 | Homelessness SIG | NCC Public Health Nottm City CCG NUH NHS Trust Nottm City Care Homeless Link | Better understanding of the SROI impact and financial savings of homelessness prevention measures on health and wellbeing | Consideration of Homeless Link models | December 2016 |
| 1.7 Analyse how learning from best practice partnerships and service development and delivery elsewhere nationally can be adapted to meet local need | All | NCC Housing Strategy | Health and Housing Partnership Group NCH and RP's NPRAS | Effective, innovative and integrated health, care and support, and housing partnerships and interventions are adopted in Nottingham | Utilising information learned from other local authorities, at health and housing events, through Public Health England, Housing LIN etc. | Ongoing |
| 1.8 Assess how Nottingham can adopt national models of service delivery to support vulnerable people and those with complex or multiple needs | 1 & 4 | NCC Strategic Commissioning | Nottm City CCG NCC Public Health NUH NHS Trust Nottm City Care Nottm CDP Notts OPCC NCH and RP's NPRAS | System change achieving long term outcomes for people | Person centred approach – learning from Opportunity Nottingham (and other Fulfilling Lives activity) Housing First approach Psychologically Informed Environments | Ongoing |
| 1.9 Explore need for wider support an integrated approaches for emerging ar transient communities | | NCC Public Health NCC | NCC Community Protection Nottm MAF | Improved support for emerging communities and transient | Consider specifically within work on Care Delivery Groups | April 2017 |

| | | | C | II CC | | | |
|----------------|-----------------------------------------------|-------|--------------------|------------------|-------------------------------|-------------------------------|------------|
| | | | Community | ILSS | populations | | |
| | | | Cohesion | STEPS | | | |
| | | | | NPRAS | | | |
| | | | | NCH and RP's | | | |
| | | | | NCC Strategic | | | |
| | | | | Commissioning | | | |
| | | | | Nottm City CCG | | | |
| | 1.10 Explore appropriate opportunities | 2 & 4 | NCC Public | Nottm City CCG | Support for Vanguard | Assess appropriate level of | 2017 |
| | for housing to engage in the two New | | Health | Notts Healthcare | delivery | involvement | |
| | Models of Care Vanguards being | | | NHS Foundation | | | |
| | delivered in Nottingham and | | | Trust | | | |
| | Nottinghamshire | | | Nottm CityCare | | | |
| | | | | NCC Housing | | | |
| | | | | Strategy | | | |
| Evidence the | 1.11 Explore potential of having a | 2,4&5 | NCC Strategic | Health and | Having a common | Review existing methods | April 2018 |
| impact housing | common SROI (Social Return On | , | commissioning | Housing | method of evaluation | of evaluating projects used | |
| interventions | Investment) methodology when | | Nottm City CCG | Partnership | which will assist | by different sectors and | |
| have on health | evaluating projects | | | Group | commissioning | organisations | |
| and wellbeing | eranaanng projects | | | G. 5 a.p | decisions | o.Bameariene | |
| and Wendering | 1.12 Evaluate and publicise the impact | 2,4&5 | Health and | Nouse network | Housing projects have | Winter worries drop-in | Ongoing |
| | housing related projects have on the | 2, | Housing | Trouse network | SROI health impact | Eat Well for Life | Ongoing |
| | health and wellbeing of Nottingham | | Partnership | | assessment Route map | Warm and well workshop | |
| | Citizens | | Group | | developed | Fit in the community | |
| | Citizens | | Group | | Case study examples | YMCA activity on referral | |
| | | | | | | TIVICA activity on referral | |
| | | | | | generated | | |
| | 1.12 Hold a HWD David agreement agging | 5 | No attice also are | Health and | In an an and a common and a f | CDOL attended a constitute of | I.d. 2016 |
| | 1.13 Hold a HWB Development session | 5 | Nottingham | | Increased awareness of | SROI study completed | July 2016 |
| | on the impact of Housing and | | City Homes | Housing | impact of ASB on | Outcomes are publicised | |
| | community ASB interventions on health | | and other RP's | Partnership | health and wellbeing. | Recommendations acted | |
| | and well-being | | NCC | Group | SROI influences | upon | |
| | | | Community | | commissioning | | |
| | | | Protection | | decisions | | |
| | | | | | More partnership | | |
| | | | | | working between | | |
| | | | | | housing providers, | | |
| | | | | | community protection, | | |

| | | | | police and residents. | | |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------|
| 1.14 Explore adapting the template of the JSNA so that social determinants of health have increased profile in all chapters | 2 & 3 | NCC Public Health | Health and Housing Partnership Group | Raised profile of housing determinants of health | Review JSNA template | April 2017 |
| 1.15 Assess the impact of Assistive Technology (AT) solutions on health and wellbeing | 1 & 4 | Nottingham City Homes | Other RP's ILSS Nottm City CCG | Evaluation influences commissioning decisions Promotion of AT as early intervention solution leading to increased take up and referrals. | Social Return On Investment (SROI) study completed Outcomes are publicised Recommendations acted upon | March 2017 |
| 1.16 Assess the impact of the Integrated Self-care pilot | 5 | Nottm City CCG | Self-care pilot partners | Evaluation influences commissioning decisions Continued funding of successful projects and commissioning of new projects | SROI study completed Outcomes are publicised Recommendations acted upon | Interim Evaluation May 2016. Final report 2017 |
| 1.17 Provide regular update to the HWbB on progress of the MoU | All | Chair of Health and Housing Partnership Group | Environment Outcome Group | Increased understanding of the impact of housing interventions on health and wellbeing | Timetable in annual reporting | On going |
| 1.18 Review existing signposting schemes, consider further development with broader remit and increase awareness and use by medical professionals, social care and other home visiting officers | 2 & 4 | NCC Housing Strategy NCH Health and Housing Partnership Manager NCC Adult Social Care | NCC Strategic Commissioning Nottingham City CCG Nottingham City Signposting Service | Referral mechanism developed and implement. More referrals leading to better outcomes for citizens. Reduction in ASB, addictive behaviours, DSVA | Review evaluation of existing signposting schemes alongside evidence demonstrating gaps in provision | Align with commissioni ng cycles / contract end |
| 1.19 Evaluate the NCH Health and | 3 & 4 | NCH | Health and | Post has contributed to | Including exploration of | September |

| | Housing Partnership Manager post | | NCC Housing Strategy | Housing Partnership Group HWbB Environment Outcomes Group | achieving objectives of the MoU Funding is secured to extension / expansion of the post Work achieved by the post is embedded within other local practice | potential funding streams to allow for post to be continued after fixed term and expanded across tenure to coordinate the implementation of this MoU | 2017 |
|-----------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------|-----------------|--------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------|
| Support and promote public health campaigns | 1.20 Promote public health campaigns across all housing tenures and to people who are homeless or in housing need | 1, 2,3 and 4 | NCC Public Health | NCC Housing Strategy NCH Health and Housing Partnership Manager Nottingham City Signposting service RP's PRS Landlords NCC Environmental health and Safer Housing NCVS | Communication plan developed More people (especially those vulnerable and hard to reach) are given access and take up public health advice and initiatives | PH to ensure that Housing and Homelessness colleagues are involved in relevant project groups | Ongoing |
| Communicate and share good practice to raise awareness | 1.21 Plan and deliver coordinated and targeted provision of information through awareness raising activity | 2, 3 and 4 | Health and Housing Partnership | Nouse network | More people have access to and awareness of information Appropriate services are delivered efficiently | Partnership meetings (e.g. Notts Social Landlord Forum, Homelessness SIG) Community events Electronic communications and social media Leaflets, posters and visual literature | Ongoing |
| | 1.22 Develop a local approach to integrated training within the health, | | Nottm City CCG | NCH and RP's NCC | Improved awareness and understanding of | Discussion with local universities and colleges | |

| housing, social care and support sector | | | Commissioning Housing Aid NCC Adult Social Care | issues faced across the sectors | about incorporating housing modules in medical professionals training (and a reciprocal offer to Housing professionals from health and social care) | |
|-----------------------------------------------------------------------------------------------------------------------------------------|-------|-----------------------------------------------|--------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|
| 1.23 Ensure the services of accommodation and accommodation related support providers are reflected in the Integrated Service Directory | 1 & 4 | Age UK | Health and Housing Partnership Group NCC Housing Strategy Nottm City CCG | Develop a directory of housing initiatives which support health and wellbeing and ensure these are included into the Integrated Service Directory. | Align with the development timetable of the Integrated Service Directory | December 2016 |
| 1.24 Develop and share a calendar of common housing and social care events and coordinate opportunities to share information | 2 | Health and Housing Partnership Group | Nouse network | Increase impact of 'wider health' workforce. | All partners on the health and housing Partnership Group to share their schedules and encourage their networks to do so | December 2016 |
| 1.25 Develop and share a shared library of housing, health and social care integration research /publications | 2 | NCC Public Health | Nouse network | Share good practice and new initiatives | NCC Public Health to share access to their library with partners of the HHPG as well as partners submitting key documents relating to their service area | Ongoing |

Priority Area 2.

Collectively develop efficient and innovative working practices, where relevant information is shared and funding opportunities are maximised.

| Theme | Action | Outcome Objective | Lead | Supporting Organisation | Measure of Success | Key Activity | Target Completion Date |
|--------------------|--------------------------------------|----------------------|------------|-------------------------|-------------------------|----------------------|------------------------------|
| Develop | 2.1 Identify and address barriers in | 1 & 2 | Health and | Homelessness SIG | More people are able | Data sharing etc. | Ongoing |
| integrated health, | access to services and working in | | Housing | | to access services that | Improved partnership | |

| social care and | partnership | | Partnership | | help meet their health | working | |
|-----------------|--------------------------------------------------|-------|---------------|-------------------|-------------------------|---------------------------|------------|
| housing working | partitership | | Group | | and wellbeing needs | WOLKING | |
| practices | | | Group | | (especially those | | |
| practices | | | | | | | |
| | | | | | people who are | | |
| | | | | | vulnerable or not | | |
| | | _ | | | engaging with support) | | |
| | 2.2 Collectively establish /further | 1 & 2 | NCC Strategic | Nottm City CCG | Fewer people in need | Review and renew existing | Ongoing |
| | develop, implement and review | | Commissioning | NCC Public Health | of residential care and | systems within specialist | |
| | protocols, assessment processes, | | | NUH NHS Trust | more people able to | accommodation including | |
| | referral procedures and monitoring | | | Notts Healthcare | live independently | Mental health, | |
| | mechanisms between housing, health | | | NHS Foundation | Increased choice in | Substance misuse, | |
| | and social care within specialist / | | | Trust | housing options | Learning disability, | |
| | adapted accommodation and support | | | Nottm City Care | Levels of provision are | Older people, | |
| | pathways | | | Nottm CDP | adequate and don't | Homeless, Refuge and | |
| | | | | Notts OPCC | lead to unsuitable | Offenders and services | |
| | | | | Relevant steering | accommodation | including trips and falls | |
| | | | | groups | placements or access | prevention / adaptations | |
| | | | | | issues | services | |
| | 2.3 Consider learning from the | 1 & 4 | NCC Strategic | NCC Adult Social | Fewer people in need | Incorporate | April 2017 |
| | Winterbourne View programme – | | Commissioning | Care | of residential care and | recommendations into | · |
| | 'Transforming Care for People with | | LDJCG | NCC Housing | more people able to | local service planning | |
| | Learning Disabilities' in the development | | | Strategy | live independently | 5 7 7 7 7 7 | |
| | of the local housing pathway for people | | | RP's | Increased choice in | | |
| | with learning disabilities | | | 0 | housing options | | |
| | With rearring disastinctes | | | | Levels of provision are | | |
| | | | | | adequate and don't | | |
| | | | | | lead to unsuitable | | |
| | | | | | accommodation | | |
| | | | | | | | |
| | | | | | placements or access | | |
| | 2.4 Fundame ampointmental and initial formal | 2 | NCC Dublic | NCC Charles air | issues | Take feminand property to | Ongoing |
| | 2.4 Explore opportunities to jointly fund | 2 | NCC Public | NCC Strategic | Cost effectiveness | Take forward proposals to | Ongoing |
| | projects which promote health and | | Health | Commissioning | Efficiency of service | the HWbB through the | |
| | wellbeing | | | Nottm City CCG | delivery | Environment Outcome | |
| | | | | Notts Healthcare | Improved partnership | Group | |
| | | | | NHS Foundation | working | | |
| | | | | Trust | Inclusive support for | | |

| | | | | Notts OPCC | citizen | | |
|--------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|---------------------------------------------------|--------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------|
| | 2.5 Share information regarding grant opportunities for local groups which support health and wellbeing outcomes | 2 | NCC Public Health | Nouse Network NCVS | Local providers are equipped with information about opportunities to bid for funding | Share information in weekly Nouse update bulletin | Ongoing |
| | 2.6 Embed the MoU in other emerging local plans | 1 & 3 | NCC Housing Strategy | Health and Housing Partnership Group | Local policy is aligned with a shared vision and attainable outcomes | Ensure that the MoU is aligned with the Financial Resilience Plan, Vulnerable Adults Plan, and Mental Health Crisis Concordat action plan | Ongoing |
| | 2.7 Explore ways of integrating housing into the Acute Care Pathway for Mental Health | 1, 2 & 4 | Notts Healthcare NHS Foundation Trust | NCC Public Health Nottm City CCG NCC Housing Strategy Homelessness SIG Wellness in Mind | Citizens mental health support needs are met. Continued NHS investment in supported housing and housing expertise. | Consider recommendations from the recent Commission on Acute Psychiatric Care | October 2017 |
| Develop joint actions to prevent hospital admissions, reduce re- admissions, and which speed up hospital discharge | 2.8 Collectively consider how housing and support services can help with demand management, length of stay, delayed transfers of care, re-admissions, general flow through the acute sector and extension of care pathways into the community | 1, 2, 3 & 4 | Health and Housing Partnership Group | Mental Health Strategy Steering Group LDJCG Health and Wellbeing Board | Citizens are able to access and receive care appropriate to their needs. Reduction in unnecessary hospital stays, residential care placements | Timetable into agenda of renewed HHPG | October 2016 |
| | 2.9 Evaluate the impact of the Health to Housing Pilot and produce recommendations for on-going work | 1, 2 & 5 | NCH | Nottm City Care Nottm City CCG | Reduced hospital admissions, re- admissions, and speed up hospital discharge Better utilisation of specialist housing stock | Develop baseline position Evaluate project Consider how the learning from the pilot can be applied to support a wider range of people across the lifespan | September 2016 |
| | 2.10 Promote and market Assistive Technology solutions and self- care to Nottingham Citizens and professionals | 1, 2 & 3 | NCH NCC Nottm City | RP's GP's Nottm City Care | 10,000 Telehealth/Telecare users by 2018 | Develop marketing/Comms Plan SROI evaluation | Ongoing |

| as a solution to support independent | | CCG | Notts Healthcare | Increased referrals | completed | |
|-----------------------------------------------------------------------------------|----------|--------------|------------------|-------------------------------------------|-----------------------------------------|--------------|
| living. Develop referral pathways | | 000 | NHS Foundation | from health care | Develop referral pathways | |
| liming. Develop revenue patimaye | | | Trust | professionals | Teresop reservat passina, | |
| | | | NCVS | Reduced hospital | | |
| | | | | admissions, re- | | |
| | | | | admissions, and speed | | |
| | | | | up hospital discharge | | |
| 2.11 Refresh and re-launch the use of | 5 | HHT Care | NUH NHS Trust | Reduction in the | Including | December |
| the homelessness hospital discharge | | Coordinator | Notts Healthcare | number of people | recommendations from | 2016 |
| protocol | | Homelessness | NHS Foundation | discharged from | hospital liaison pilot and | |
| | | SIG | Trust | hospital with no fixed | best practice learning | |
| | | | | abode | from national use of | |
| | | | | | Department of Health | |
| | | | | | homeless hospital | |
| | | | | | discharge funding | |
| | | | | | (including evaluation of | |
| | | | | | homeless hospital | |
| 2.12 Townstad accordination of comissa | 1 1 | NCC | Nother City CCC | Efficiency in delivery of | discharge liaison post) | A m mil 2017 |
| 2.12 Targeted coordination of services assessing the need and facilitating | 1, 4 | | Nottm City CCG | Efficiency in delivery of measures to the | Explore further or total | April 2017 |
| provision of measures to prevent falls in | | Adaptations | | people identified as | integration of Occupational Therapy and | |
| the home | | | | needing it | Adaptations in line with | |
| the nome | | | | inceding it | Government and | |
| | | | | | Foundations best practice | |
| 2.13 Promote and raise awareness of | 1, 2 & 4 | Nottm City | Nottm City CCG | Prevent and reduce | Be Self Care Aware | Sept – |
| self-care for long term conditions to | _, | CCG | GP's | hospital admissions | Campaign | November |
| reduce/ prevent hospital admissions | | | Self-help UK | | 1 1 1 | 2016 |
| , , | | | Care Point | | | |
| | | | NUH NHS Trust | | | |
| | | | Notts Healthcare | | | |
| | | | NHS Foundation | | | |
| | | | Trust | | | |
| | | | All Housing | | | |
| | | | Providers | | | |
| | | | NCVS | | | |
| 2.14 Consider ways to promote | 3,4&5 | NCH and RP's | NUH NHS Trust | More older people | Promotions campaign | December |

| | independent living, sheltered housing and extra care housing among health professionals | | | Notts Healthcare NHS Foundation Trust GP's City Care | choosing and able to access alternative accommodation options | developed | 2017 |
|---------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------|---|----------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------|-------------------------------------------|
| | 2.15 Develop a baseline position and consider how to ensure accurate readmission data from both acute and mental health hospitals | 1 | NUH NHS Trust | Wellness in Mind Self care Care- coordinators Notts Healthcare NHS Foundation Trust | Less A&E attendance and admission to NUH acute hospitals | Reliable data provided and used to capture trends and inform activity | December 2017 |
| Develop initiatives which reduce the social, mental and physical health impacts of social isolation and | 2.16 Promote the Fit in the Community project to increase uptake amongst NCH tenants and communities. | 5 | NCH | NCC Public Health / Sports England | 5,500 more active tenants by 2017 Trained Community Activators to lead sessions Increased confidence of participants | SROI study completed Outcomes are publicised Recommendations acted upon | Ongoing SROI evaluation May 2017 |
| loneliness. | 2.17 Promote the work of organisations who provide support to prevent social isolation and loneliness | 5 | Nottingham City Signposting Service | Notts Healthcare NHS Foundation Trust NCVS Click Nottingham LAEO NCH Activity Co- ordinators/Health and Tenancy Sustainment Officer/FITC GP's RP's VCS support providers | Increased number of volunteers Increased confidence of participants Reduced demand on GP's from those at risk | Age UK Nottingham CLICK Nottingham Rallyround Emmanuel House | Ongoing |
| Develop initiatives which improve the | 2.18 Grander design initiative which improves living environment in Independent Living schemes | 3 | NCH | NCC Housing Strategy / Regeneration RP's | Independent Living Schemes which meet HAPPI principles | Develop annual programme of schemes Evaluate impact of | Ongoing |

| quality of the living environment and which promote health and wellbeing | | | | Developers | Improved satisfaction Increased demand for Independent Living Schemes | improvements Share learning | |
|--------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|-------------------------------------------------------|----------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------|---------|
| | 2.19 Creating better neighbourhoods which improve the quality of the living environment | 3 | NCC Housing Strategy / Regeneration | NCH and RP's Developers NCC Community Protection Commercial and Operations | Increased satisfaction with neighbourhoods Improved quality of life | Develop annual programme of schemes Evaluate impact of improvements Share learning | Ongoing |
| | 2.20 Work with housing associations to improve the quality of their housing and repairs services as outlined in the Nottingham Council Plan 2015-2019 | 4 | NCC Housing Strategy RP's | Health and Housing Partnership Group | Raised property standards across the social rented sector | Introduction of the Nottingham Standard in the social rented sector | 2019 |
| | 2.21 Explore options for ensuring that people moving into new tenancies have access to basic facilities (especially those which help to prevent fuel poverty). | 3 | NCC Energy Services NCC Revenue and Benefits | Health and Housing Partnership Group | Less people entering fuel poverty when moving into new accommodation | Review the Discretionary Hardship Scheme | 2017 |
| | 2.22 Ensure that new developments conform to the appropriate standards that promote good health | 2 & 4 | NCC Planning Services | NCC Regeneration Developers RP's and NCH | New housing development supports the positive health and wellbeing of local citizens | New housing development conforms to space and amenity standards, eco/heating/ventilation standards and lifetime / adaptable homes standards | Ongoing |

Priority Area 3.

Ensuring homes in the private sector are safe, well managed and help to protect the health and wellbeing of residents

| Theme | Action | Outcome Objective | Lead | Supporting Organisation | Measure of Success | Key Activity | Target Completion Date |
|--------------------|--------------------------------------------------|----------------------|---------------|-------------------------|--------------------|-----------------------|------------------------------|
| Ensure PRS is safe | 3.1 Provide a single point of contact for | 3 | NCC | Nouse network | Well known & | Safer Housing Team to | April 2017 |
| and well | households &stakeholders in relation to | | Environmental | Nottingham City | publicised contact | organise and promote | |
| managed | private rented housing conditions | | Health and | Signposting | point with simple | | |
| | | | Safer Housing | Service | referral mechanism | | |

| | 3.2 Utilise regulatory and non-regulatory activity to reach more households and to deliver healthier homes | 3 | NCC Environmental Health and Safer Housing | Health and Housing Partnership Group | Extension of licensing of houses in the city Delivery of existing licensing schemes Collaborative delivery plan to tackle unsafe & unhealthy homes supporting tenants Increase in voluntary property improvement of homes through accreditation and other measures | EHO powers, rogue landlord work and safer housing activity Licensing Accreditation Relationship building with landlords and provision of advice and information | Ongoing |
|---------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------|------|-----------------------------------------------------|-----------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|
| Ensure PRS tenants have access to housing support services | 3.3 Provide support for tenants in the private rented sector to access housing, health and financial help | 2, 3 | NCC Environmental Health and Safer Housing | Nottingham City Signposting Service Advice Nottingham EMPO DASH Landlords Nouse network | Well known and Used Healthy Homes Signposting system with specific reach for our most vulnerable citizens | Using a range of methods and channels of communication, joined up provision consideration of needs of residents of this tenure within commissioning models | Ongoing |
| | 3.3 Explore health prescriptions for housing improvement | 3 | NCC Environmental Health and Safer Housing | Nottm City CCG | Housing related health harms referral mechanism in place | Look at good practice in Nottinghamshire – Warm Homes on Prescription | April 2017 |

Priority Area 4.

Develop the financial resilience of Nottingham citizens

| Theme | Action | Outcome Objective | Lead | Supporting Organisation | Measure of Success | Key Activity | Target Completion Date |
|-------------------|------------------------------------------|----------------------|-------------|-------------------------|-----------------------|-------------------------|------------------------------|
| Contribute to the | 4.1 Embed key overarching actions | 3 | Health and | Advice | Financial Resilience | Respond to consultation | Ongoing |
| development, | from this MoU into the financial | | Housing | Nottingham | Plan includes housing | on draft, include | |
| implementation | resilience action plan to support it | | Partnership | | and health | suggested key actions, | |
| and review of the | achieve outcomes | | Group | | contribution to | deliver actions, report | |
| Financial | | | | | preventing poverty | back and review | |
| Resilience Plan | | | | | | | |

| for Nottingham | | | | | | | |
|------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------|-----------|------------------------------------------------------------------------|-----------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|----------------------|
| Develop initiatives which reduce fuel poverty and the associated health impacts | 4.2 Develop and promote community events/campaigns aimed at tackling fuel poverty | 3 | Nottingham Energy Partnership (NEP) NCC Energy Services | NCH and RP's EMPO DASH Landlords Nottingham City Signposting Service Nouse network NCVS | Minimum of 12 events/campaigns organised annually Reduce fuel poverty EWD are reduced | Develop calendar of events Promote events | Ongoing |
| | 4.3 Produce a brief on the impact of fuel poverty within the City | 3 | NEP | Age UK NCH NCC Energy Services | Develop understanding of impact of fuel poverty across all housing tenures | Produce report Promote findings Implement recommendations | January 2017 |
| | 4.4 Take a strategic approach to coordinating promotion of Government initiatives to tackle fuel poverty | 3, 4 | NCC Housing Strategy NCC Energy Services | NEP NCH and RP's NCC Environmental Health and Safer Housing | Maximise funding opportunities and the benefits they deliver | New funding opportunities are identified and promoted | Ongoing |
| | 4.5 Develop in partnership the annual Severe Weather Emergency Protocol for Nottingham | 3 | Homelessness SIG | Nouse network | City is best able to respond to incidents of severe weather. EWD are reduced | An up-to-date annual plan is developed outlining clear roles and responsibilities for identifying and supporting vulnerable citizens | November annually |
| | 4.4 Train front line staff across health and housing on how to identify fuel poverty, offer advice and make referrals to support agencies | 1, 2, & 3 | NCC Energy Services | Nottingham City Signposting Service | Reduce Fuel poverty Increased understanding of impact amongst partners EWD are reduced | Front line staff across sectors trained and confident to deliver information and advice to citizens | Ongoing |
| | 4.5 Develop , support and promote energy champions within local communities | 5 | NCH Tenant Academy | NCC Neighbourhood Development Officers | Reduce fuel poverty EWD are reduced | Energy champions identified and trained Promote the role of energy champions | December 2016 |

| | 4.6 Multi stakeholder winter planning events to identify people vulnerable to health problems associated with living in a cold home | 1, 2 | NCC Public Health | NCC Community Cohesion RP's Local Area Committees NCVS NCH and RP's Homelessness SIG Environmental Health and Safer | Support tailored to those at greatest risk EWD are reduced | Planning who should be sharing and receiving information at the events | Annually June 2016 |
|------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------|------|----------------------------------------------|---------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------|-----------------------|
| | | | | Housing Community Protection Community Health Teams Nouse network | | | |
| Raise awareness of the Impact of debt on health and wellbeing | 4.7 Train health and social care professionals to improve understanding of how reductions in household budgets may impact negatively on health and wellbeing | 2 | Nottingham City Signposting Service | CCG Care Coordinators Advice Nottingham NCH and RP's, Medical professionals, social care and other home visiting officers | Practitioners are knowledgeable about where they can refer and signpost their patients to for advice and assistance Increased uptake of support Decreased health and wellbeing issues caused by insufficient household finances Reduce reliance on clinical solutions | Undertake training Promote debt advice services | Ongoing |
| | 4.8 Produce a Financial resilience Strategy | 3 | Advice Nottingham | Homelessness SIG | Greater understanding of the impact of debt on Nottingham Citizens Recommendations for tackling debt in Nottingham | Undertake a Debt Impact Assessment Develop strategy and implement actions Promote outcomes of strategy | March 2017 |

| | | | | | Tenants | Financial resilience event April 2016 | |
|-------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|-----------------------------------|-----------------------------------------------------------------|----------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------|
| Mitigate impact of Welfare Reform Changes | 4.9 Engage in a coordinated approach to model impact of government policy, consider solutions and provide information about changes and options for citizens | 3 | NCC Corporate Policy | Homelessness SIG Nouse network NCH and RP's VAPN | Consistent messages Earlier intervention with information, advice and solutions | Task group to be identified and programme of activity (including events and literature) to be agreed and delivered | Ongoing |
| | 4.10 Social Housing Landlords develop Welfare Reform action plans to mitigate the impact of changes | 3 | NCH and RP's | NCC Corporate Policy Advice Nottingham NCC Revenue and Benefits | Action plans developed Tenants better supported to manage impacts | NCH Plan developed and shared as a good practice model | September 2016 |
| | 4.11 Develop Partnership working with DWP | 3 | NCH and RP's DWP | NCC Housing Strategy | Tenant debt as a result of benefit changes reduced or avoided | Engage and inform DWP about partnership working NCH created new financial inclusion officer post to work directly with DWP | Ongoing |
| | 4.12 Deliver debt advice sessions in GP's surgeries | 1,3 | Advice Nottm Nottm City CCG | Nouse network VAPN | Increased access to interventions that reduce the need for medical solutions | Identify funding to support the hire of rooms in GP surgeries | Ongoing |
| Support tenants into work | 4.13 Promote initiatives which support tenants into work | 3 | NCC Employment and skills | NCH and RPs Advice Nottingham Nouse network NCVS | Tenants supported into work, reducing reliance on benefits and increasing household finances | Develop pathways – particularly for those furthest away from being work ready Tailor services to wraparound and enhance those commissioned Monitor who is not able to engage in systems and why | Ongoing |

Priority Area 5.
Enable local partners to identify and fulfil their role in homelessness prevention as well as meeting the health and wellbeing needs of homeless people

| Theme | Action | Outcome Objective | Lead | Supporting Organisation | Measure of Success | Key Activity | Target Completion Date |
|----------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|---------------------|--------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------|------------------------------|
| Early intervention activity supporting homelessness prevention | 5.1 Support agencies and providers across the health, housing and social care sectors to understand their contribution to preventing homeless and how preventing homelessness contributes to improved health and wellbeing | 1 | Homelessness SIG | NCC Public Health Health and Housing Partnership Group | Fewer people are at risk of homelessness Closer identification between activities and broader outcomes Fewer people are experiencing poor health and wellbeing worsened by housing instability | Homelessness SIG members to share and promote the annual strategy review | Ongoing |
| Greater Understanding of the barriers homeless people face in accessing health care | 5.2 Develop opportunities for job shadowing and training to increase awareness of issues facing homeless people | 1 | Homelessness SIG | NCC Housing Strategy NCC Public Health | Increased understanding of the issues facing homeless people | Explore the possibility of incorporating homelessness modules into training of doctors, nurses and other health and social care professionals | Ongoing |
| | 5.2 Identify and address barriers to homeless people in accessing health services | 2 | Homelessness SIG | NCC Public Health Nottm City CCG NUH NHS Trust Nottm City Care | Increased understanding of the barriers faced by homeless people | Share research and evidence gathered in the annual review with commissioners | Ongoing |
| Development and delivery of joint initiatives to support Homeless citizens | 5.3 Collaboratively develop a protocol between housing and health to ensure the health and housing needs of the client are reciprocally taking into account during assessment and decision making processes in services | 1 | Housing Aid CCG | NCH and RPs GP's Community Mental Health Teams Wellness in Mind Other health professionals | Reduction in repeat assessments of vulnerable people Delivery of a making every contact count approach | Housing Aid and Homeless Health Team to review their existing documentation, make and take forward recommendations | December 2017 |

| 5.4 Implement the recommendations developed through the Mental health Homeless task group | 1, 2 | Mental Health Strategy Steering Group | Mental Health Crisis Concordat Group Mental Health Joint Commissioning Group Homelessness SIG | People have access to suitable accommodation to meet their needs Reduction in the proportion of people presenting as homeless with enduring mental health support needs | Review emerging needs and further development opportunities | December 2017 |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------|------|------------------------------------------------|-----------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------|
| 5.5 Evaluate the provision of the CPN within the Homeless Health team to support clients with mental health needs to access mental health services | 1 | Nottm City CCG | Homeless Health Team Homelessness SIG | People have access to suitable accommodation to meet their needs Reduction in the proportion of people presenting as homeless with enduring mental health support needs | On appointing to the post, Homelessness SIG to be involved in setting data collection criteria | January 2017 (approx. 6 months after appointing) |

Glossary of Acronyms

| ASB | Anti Social Behaviour |
|-------|---------------------------------------------------------------------|
| AT | Assistive Technology |
| CCG | Clinical Commissioning Group |
| CDP | Crime and Drugs Partnership |
| CYPPN | Children and Young People's Provider Network |
| DASH | Decent And Safe Homes |
| DSVA | Domestic and Sexual Violence |
| DWP | Department of Work and Pensions |
| EHO | Environmental Health Officer |
| EMPO | East Midlands Property Owners |
| EWD | Excess Winter Deaths |
| FITC | Fit In The Community |
| HHPG | Health and Housing Partnership Group |
| HHT | Homeless Health Team |
| HWbB | Health and Wellbeing Board |
| HWbS | Health and Wellbeing Strategy |
| ILSS | Independent Living Support Services |
| JSNA | Joint Strategic Needs Assessment |
| LAEO | Looking After Each Other |
| LDJCG | Learning Disabilities Joint Commissioning Group |
| MAF | Multi Agency Forum (for supporting refugees, asylum seekers and |
| | migrants) |
| MoU | Memorandum of Understanding |
| NCC | Nottingham City Council |
| NCH | Nottingham City Homes |
| NEP | Nottingham Energy Partnership |
| NHS | National Health Service |
| Nouse | Not an acronym – Nouse is the Strategic Housing Network facilitated |
| | by Nottingham City Council |
| NPRAS | Nottingham Private Rented Assistance Scheme |
| NUH | Nottingham University Hospital |
| OPCC | Office of Police and Crime Commissioner |
| RP's | Registered Providers (of social housing) |
| SIG | Strategy Implementation Group (homelessness prevention) |
| SROI | Social Return On Investment |
| VAPN | Vulnerable Adults Provider Network |

Appendix (i)

Nottingham City Health and Housing Partnership Group (HHPG)

TERMS OF REFERENCE

Version June 2016

Purpose / role of the group

Improving health and wellbeing is a priority for Nottingham as stated in the Nottingham Plan to 2020.

- A key priority of the renewed Health and Wellbeing Strategy for Nottingham is that housing will maximise the benefit and minimise the risk to health of Nottingham's citizens
- A key priority of the Strategic Housing Network's new Housing Nottingham Plan will be *improving health through housing*.
- A strategic driver of the Nottingham Interagency Homelessness Prevention Strategy is *improving health and addressing multiple and complex needs*
- The priority of the Nottingham Vulnerable Adults Plan is that *people are safer,* happier and live longer.

Partners across the Health, Housing and Social Care sectors clearly recognise the direct correlation between suitable, safe, decent standard accommodation and good health and wellbeing and the need for integrated services to generate positive outcomes for residents.

The HHPG brings together expertise from the health, housing and social care sectors to set and deliver the shared actions outlined in the local Memorandum of Understanding and in doing so supporting the local strategic ambitions.

Aims

Residents in Nottingham report that they are healthier, happier and live independently for longer, achieved by the Health and Housing Partnership Group focus on the following objectives;

- 1. Integrating health, social care and housing services
- 2. Maximising the impact from housing as part of the wider health workforce
- 3. The housing contribution to reducing health inequalities between areas, social and cultural groups
- 4. Further developing the housing sector's role in reducing demand for health and social care services
- 5. Communities and citizens playing their part in contributing to health and happier lives, strategies and activities

Directive

Key responsibilities of the HHPG:

Development, implementation and review of the Nottingham Memorandum of

Understanding action plan

- Reporting to the Environment outcome group on the progress of the action plan
- Functioning as a consultative body on integral health, housing and social care work
- Making recommendations which ensure that integration of health, housing and social care is reflected in local planning, strategy development and commissioning

The HHPG will fulfil a workplan based on the implementation of set actions within the following five priority areas (as set out in the Memorandum of Understanding):

- 1. Evidencing the need for (and impact of) integrated health, social care and housing interventions
- Collectively developing efficient and innovative working practices, where relevant information is shared, joint activity is undertaken and funding opportunities are maximised
- 3. Ensuring homes in the private sector are safe, well managed and help to protect the health and wellbeing of residents
- 4. Developing the financial resilience of Nottingham citizens
- 5. Enabling local partners to identify and fulfil their role in homelessness prevention as well as meeting the health and wellbeing needs of homeless people

Meeting arrangements

- 1. Meetings will take place every two months according to an annually planned schedule
- 2. A Health and Housing Partnership task coordination group will pre-meet to facilitate the following:
 - Agenda setting
 - Work plan development
 - Technical support
 - Action delivery reporting
 - Regular and bespoke data collection and analysis
- 3. The HHPG task coordination group will consist of the Chair, Vice chair, NCC Housing Strategy, NCC Public Health and a 'front line services' elected representative from the group.
- 4. Task groups and sub groups may be created to develop specific pieces of work
- 5. Agenda and papers to be circulated a minimum of one week before the meeting date.

Governance

- The HHPG is governed by the Health and Wellbeing Board and reports to the Environment Outcome Group.
- The HHPG will provide bi-annual reports to the governing bodies as well as to the Portfolio Holder for Planning and Housing and the Corporate Director for Development and Growth. One of these reports will be a summary of the annual report.
- The HHPG will provide additional reports upon request and in exceptional circumstances.

Accountability

Partner agencies have pledged commitment to the delivery of activity set out within the Memorandum of Understanding.

The HHPG will collectively identify the annual priorities, it is then the responsibility of

| | the individual agencies involved (headed by the lead agency) to fulfil the action and report back to the HHPG. The HHPG will provide monthly updates to the Environment Outcomes Group. The MoU has been agreed by the Health and Wellbeing Board who will monitor its progress. |
|---------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Review | The HHPG task coordination group will coordinate an annual review of the work plan of the HHPG which will determine the priorities for the following year. |
| | The MoU will be reviewed in line with the Housing JSNA. |
| Membership Roles and Responsibilities | Members of the HHPG are expected to: • be clear and confident in presenting and contributing their views and the views of the organisations they represent • take decisions and commit resources on behalf of their organisation / department or service area • nominate an appropriate substitute from their organisation to attend in their absence • work in partnership with other HHPG members • be committed to contributing to a broad multi agency view • represent their agency or partner agencies effectively providing feedback and gathering information when occasion arises • become members of task groups and sub-groups for specific issues and / or nominate other representatives. • act as 'champions' for the work of the HHPG within their organisations and represent the HHPG positively outside of meetings • lend expertise of their own service areas willingly • ensure that the HHPG informs policy and strategy development within their own organisations / sectors • monitor the implementation of the HHPG workplan within their organisations / sectors and report on progress to the HHPG when required (including providing data and statistics) Members will be supported through access to the HHPG task coordination group: • to submit agenda items for the HHPG • to resolve issues or difficulties around any actions set in the meetings • for advice on specific areas when appropriate Chair The chair can be elected from existing members of the Health and Wellbeing Board. Where the Chair is from one of the represented agencies or departments another colleague can attend to fulfil the role of organisation representative. |
| | Vice chair The vice chair can be elected from existing members. The role of the vice chair is to: Substitute for the chair in the chairs absence or when discussing topics where there may appear to be a direct conflict of interests Time keep the agenda items |
| Members | The HHPG is a decision making and delivery accountability meeting of inter-agency representatives from across the housing, health and social care and support sectors and the membership reflects this. |

| The group may co-opt additional members for specific tasks or topics as appropriate |
|-------------------------------------------------------------------------------------|
| |