



**8 June 2016**

**Agenda Item: 8**

**REPORT OF THE CORPORATE DIRECTOR OF ADULT SOCIAL CARE,  
HEALTH AND PUBLIC PROTECTION, NOTTINGHAMSHIRE COUNTY  
COUNCIL  
UPDATE ON THE NOTTINGHAMSHIRE HOUSING AND HEALTH  
COMMISSIONING GROUP DELIVERY PLAN AND RECOMMENDATIONS  
FOR NEXT STEPS**

**Purpose of the Report**

1. This report updates a previous paper presented to the Health and Wellbeing Implementation Group in January 2015 to outline progress on the Nottinghamshire Health and Wellbeing Strategy Housing Delivery Plan and October 2015 Board report on Excess Winter Deaths Among Older People in Nottinghamshire. The report also recommends next stage actions to be approved by the Health and Wellbeing Implementation Group and Health and Wellbeing Board

**Summary**

- 1.1 Housing Chapter for the Joint Strategic Needs Assessment (JSNA) completed in 2013.
- 1.2 The Housing Delivery Plan has been progressed and refined, overseen by the Health and Housing Commissioning Group. Key actions are outlined in this report.
- 1.3 A successful Housing and Health Scoping Event was held on 19<sup>th</sup> January 2016 reviewing partnership working between housing, health and social care and approaches to future collaboration (the Delivery Plan is included at Appendix 1).
- 1.4 The Health and Housing Commissioning Group are feeding into work around the Sustainability and Transformation Plan.
- 1.5 There are officer capacity issues affecting progress of the Housing Delivery Plan.
- 1.6 Nottingham City Council is developing a Memorandum of Understanding between Housing, Health and Social Care – it is recommended that Nottinghamshire replicates this approach building upon the current Terms of Reference of the Health and Housing Commissioning Group.
- 1.7 The 2016/17 Better Care Fund included an increased allocation in Disabled Facilities Grant funding. The Health and Housing Commissioning Group are developing options to utilise this funding.

## Information and Advice

2. **Housing is a significant determinant of health.** The Health and Wellbeing Strategy seeks to address the need for “sufficient and suitable housing, including housing related support, particularly for vulnerable people”.
3. Housing in its broadest sense has an important role to play to support the delivery of a number of the Strategy’s priorities. This is primarily due to the daily contact housing providers have with residents, tenants and their families across the County covering a range of issues beyond the traditional housing management and enforcement functions.
4. Housing can potentially make a positive contribution towards many of the wider Health and Wellbeing Strategy priorities which include:
  - 4.1 Keeping children and young people safe.
  - 4.2 Improving children and young people’s health outcomes through the integrated commissioning of services.
  - 4.3 Delivering integrated services for children and young people with complex needs or disabilities.
  - 4.4 Reducing the number of people who smoke.
  - 4.5 Reduce the number of people who are overweight and obese.
  - 4.6 Improving services to reduce drug and alcohol misuse.
  - 4.7 Supporting people with learning disabilities and Autistic Spectrum Conditions.
  - 4.8 Supporting people with long term conditions.
  - 4.9 Supporting older people to be independent, safe and well.
  - 4.10 Providing services which work together to support individuals with dementia and their carers.
  - 4.11 Improving services to support victims of domestic abuse.
  - 4.12 Providing coordinated services for people with mental ill health.
5. It cannot be underestimated the role housing has to play in the health and wellbeing agenda to achieve efficiencies, savings and introduce new ways of working. Public Health England and the King’s Fund have already identified such opportunities in a recent study focussing on the role of Housing Associations/Housing Providers, which has shown that:
  - 5.1 Nearly one in three social housing residents are over 65. Housing Associations and other housing providers can support older people through, for example falls prevention; dementia champion training; programmes to reduce social isolation and healthy eating; smoking cessation and exercise.
  - 5.2 One in two social housing residents have a long term condition or disability. Housing Associations and other housing providers have a key role to play in the management of long term conditions through supporting independence and provision of services such as Extra Care Housing and support with personal care.
  - 5.3 One in four people in England experience a mental health problem each year, costing the NHS at least £14 billion a year. Housing has a role to play in offering support and accommodation to people with a mental health problem; signposting to community based mental health services and work with mental health providers to ensure treatment is provided in the most appropriate setting.

5.4 Housing Associations and housing providers have a role to play in reducing social isolation through interventions such as befriending; volunteering and community schemes which can reduce the pressure on NHS and social care services.

### **Health and Housing Commissioning Group**

6. In recognition of the significant role that housing and housing related support plays in improving health related outcomes and reducing demands on acute services such as those provided by the NHS and Social Care, the Nottinghamshire Housing and Health Commissioning Group was formed in 2014. This group is chaired by Beverly Smith, Chief Executive of Mansfield District Council. The aim of the group is to drive forward an integrated health and housing agenda in line with the Health and Wellbeing Strategy and Housing Delivery Plan. The Group is accountable to the Health and Wellbeing Implementation Group (HWIG), and ultimately the Health and Wellbeing Board (HWB).

### **Housing Delivery Plan**

7. In January 2015, the seven Nottinghamshire districts worked collaboratively through the Nottinghamshire Housing and Health Commissioning Group to produce the Nottinghamshire Housing Delivery Plan which provided key actions based around the four themes identified in the Joint Strategic Needs Assessment '*An assessment of the Impact of Housing on Health and Wellbeing in Nottinghamshire, November 2013*'. This can be viewed at <http://www.nottinghaminsight.org.uk/d/112956>.

The four identified themes are:

- 7.1 **Poor housing conditions** – particularly the impact of falls in the home, cold and damp homes and fuel poverty, fire in the home and inadequate home security.
  - 7.2 **Insufficient suitable housing** – including the impact of overcrowding and lack of housing that enables people e.g. older or disabled people, to live independently.
  - 7.3 **Homelessness and housing support** – including the impact of homelessness on families and other crisis that may result in the loss of a home and an individual's ability to live independently.
  - 7.4 **Children and young people** – ensuring they have the best home in which to start and develop well.
8. Since January 2015, the Delivery Plan has been refined to take account of changing priorities. Significantly, this included feedback from the stakeholder event held at County Council on 19<sup>th</sup> January 2016. Specifically, stakeholder feedback at the event identified the need to prioritise improvements in two areas in particular; private sector rented housing conditions and improving services for people with mental health issues. The updated Housing Delivery Plan is attached as Appendix 1.
9. The key housing milestones identified in the Housing Delivery Plan are summarised in the table below:

Housing Priority	Actions/Milestones
1) Poor housing conditions	<p><b>Milestone 1:</b> Expanding the Nottinghamshire ‘Warm Homes on Prescription’ Pilot;</p> <p><b>Milestone 2:</b> Gathering intelligence on private sector housing through the PHE/CIEH health and housing profiling toolkit.</p> <p><b>Milestone 3:</b> Explore means of focussing integrated working on the removal of hazards in private sector homes in the most deprived areas to improve property condition, health outcomes, independence and quality of life</p> <p><b>Milestone 4:</b> Explore the feasibility of a single point of access for housing related referrals from health and social care and other partners alongside ‘awareness raising’ initiatives with health colleagues regarding poor private sector housing conditions and the housing offer.</p> <p><b>Milestone 5:</b> Identify key priorities within NICE Guidance for implementation to address the needs of at risk groups, and develop a corresponding action plan.</p>
2) Insufficient suitable housing	<p><b>Milestone 1:</b> We will deliver, through the Better Care Fund DFG allocation, assistance and services that promote early intervention and prevention and independence at home by March 2017. This will include mandatory and discretionary disabled adaptations and a feasibility study of the Nottinghamshire Handyperson and Adaptation Service (HPAS).</p> <p><b>Milestone 2:</b> We will remodel existing and develop new supported/specialist housing schemes to increase the range of housing on offer to people with health and care needs by March 2018.</p>
3) Homelessness and housing support	<p><b>Milestone 1:</b> We will explore options to deliver housing training with GP surgeries and other front line health staff across the County with a view to increasing awareness of housing, targeting homelessness prevention and housing support at hard to reach groups by March 2017.</p> <p><b>Milestone 2:</b> Working in partnership with</p>

	<p>health and social care, further develop hospital discharge schemes and protocols to reduce unnecessary hospital admissions and ensure timely discharge by March 2017.</p> <p><b>Milestone 3:</b> Undertake a mapping exercise to establish current approaches and relationships between mental health services and housing providers in order to identify gaps in provision and knowledge.</p> <p><b>Milestone 4:</b> Working in partnership with the County Council, we will review homelessness prevention pathway service provision in the County following the closure of Homelessness Prevention Services delivered by Framework.</p>
4) Children and young people	<p><b>Milestone 1:</b> We will carry out County-wide review of baseline research to identify the scale of impact of the home and housing circumstances (including overcrowding) on the health and wellbeing of children and young people, and child poverty by March 2017.</p> <p><b>Milestone 2:</b> We will ensure consistent approaches on the safeguarding and improvement of children and young people's health and wellbeing through the Nottinghamshire District/Borough Safeguarding Group.</p>

## Housing Delivery Plan – Progress to date

10. A number of specific projects have been developed to take forward these identified actions:

10.1 **The County-wide 'Warm Homes on Prescription' Pilot** utilises GP Practices and Integrated Care/PRISM Teams to help identify and contact 'high risk' patients with long term health conditions which are made worse by living in a cold home, particularly COPD and other respiratory diseases and those at risk of heart attack, stroke and falls. A range of actions are taken to achieve affordable warmth on behalf of the householder, including commissioning heating and insulation works and income maximisation (benefits checks and fuel switching). Positive impacts on patients' health and wellbeing are anticipated, leading to cost savings to the NHS particularly around anticipated reductions in emergency admissions, readmissions and visits to A&E for these patients.

10.2 Through the **County Council's extra care programme** a number of partnerships have been formed with districts to develop new extra care housing. This has seen the development of Poppyfields in Mansfield and recently approvals have now been given

to commence the development of an extra care scheme of 60 apartments on Bowbridge Road, Newark. Early partnerships are being forged for the Bowbridge Road scheme between health (CCG and local GP practices) and social care looking at developing more integrated services and working within the scheme for residents.

11. Significant progress has been made in Mansfield with regard to **hospital discharge services** with the support of the Council's ASSIST staff at Kings Mill Hospital. This project links with the priorities of the Sustainable Transformation Fund and Better Care Fund as detailed below and provides a basis for wider roll-out of similar schemes across the County. In addition, the Disabled Facilities Grant allocation 2015/16 via the Better Care Fund affords an opportunity to link preventative initiatives e.g. 'rapid adaptation grants' and minor adaptations to such schemes to facilitate timely discharge. This approach is supported at national level as detailed in a recent blog by Jon Rouse, Director General, Social Care, Local Government and Care Partnerships, Department of Health at <https://jonrouse.blog.gov.uk/2016/04/28/good-health-begins-at-home/>. The blog states:

*"We want to see more authorities integrate the provision of equipment and adaptations into hospital discharge services with rapid deployment. Get this right and the extra money could mean around 85,000 more people across the country benefitting from improved access to their property, fewer hazards, better heating and the latest technology to help them live independent, happier lives. Good health starts at home".*

## **Moving the Housing Delivery Plan Forward**

12. There is an increasing recognition of the role of housing and housing support services across the County in contributing to residents remaining independent; improving outcomes for individuals and reducing the burdens on more acute services such as those provided by Social Care and Health. For example, recent evidence from the Building Research Establishment (BRE) shows that if we were able to improve the 3.5million properties in the worst condition in England, this would save the NHS £1.4 billion per year and pay for itself in 7 years (see <https://www.bre.co.uk/filelibrary/pdf/87741-Cost-of-Poor-Housing-Briefing-Paper-v3.pdf>). The BRE study provides in-depth analysis of potential savings, including relating to removing hazards around the home and improving energy efficiency. Additional national evidence identifies cost savings as a result of other housing interventions including housing support; improved discharge services and provision of affordable housing.
13. With an increasingly elderly population and more calls on health and care services, it is more important than ever to ensure that there are effective prevention services in place, of which, effective housing and housing support is a key component. Care and Repair England's recent report '*Off the Radar: Housing Disrepair & Health Impact in Later Life*' March 2016 sets out the national picture with regard to the scale of poor housing conditions amongst older people, the resulting impact on the health and wellbeing of an ageing population, and the concentration of poor housing in the owner occupied sector. It quantifies the scale of action necessary to address housing disrepair amongst older households, identifying the benefits of targeted use of public funds for those in greatest need. <http://careandrepair-england.org.uk/wp-content/uploads/2014/12/Off-the-Radar-2016-Final.pdf>.
14. This report identifies that what is needed now is concerted, targeted action to ensure that the private homes in which older people live, particularly those on low incomes with chronic health conditions and disabilities, are made fit for purpose. Without such action, there will be

growing demands on the NHS, particularly hospitals, as it becomes increasingly difficult to discharge patients to cold, unsafe homes. Where there are good local housing solutions like there are huge benefits to individuals and potentially financial gains for the NHS and social care.

15. With this in mind, the revised Housing Delivery Plan places greater focus on private sector housing condition and safety as well as understanding the extent of these problems locally. In priority 1 of the plan, it is proposed that intelligence around private sector housing condition is improved and that the Health and Housing Profiling toolkit developed by Public Health England/Chartered Institute of Environmental Health is considered for this purpose. Mansfield District Council are at the early stages of using this profiling system with the support of Public Health colleagues with a view to targeting interventions in those areas of the district most in need. The support of the HWB to facilitate the use of this profiling method across the County will help inform local health and housing conversations and target limited resources effectively. Public Health England have also provisionally agreed to support the Board in trialling the profiling method in Mansfield initially.
16. Where local health and housing profiling identifies particular areas of need, the Housing Delivery Plan proposes in priority 1, milestone 2 that means of focussing integrated working on the removal of hazards in private sector homes in the most deprived areas is explored to improve property condition, health outcomes, independence and quality of life. Successful models include the Derby City Council 'Healthy Housing Hub' recognised by the Kings Fund and PHE plus Liverpool's 'Home Action Zones'. Housing interventions are recognised as a 'foot in the door' and offer of opportunity for engaging with some of the most vulnerable in society. These models build on this premise and have proven positive health impacts and health savings.
17. Local profiling will be further supported by the government's recently announced commitment to investigate the extent to which people's health is negatively affected by poor housing. The Department of Health will lead initial scoping work to examine local data on housing stock conditions and link this to the health of local populations. It intends to estimate the costs to health bodies and local authorities of poor housing and further strengthen links between housing, health and social care policy.
18. Implementation of the Housing Delivery Plan actions to date has resulted in stronger relationships between the health, housing and care sectors. The 'Warm Homes on Prescription' pilot has provided districts with the opportunity to work closely with local PRISM/multi-disciplinary teams and has provided a valuable 'in-let' for raising awareness of housing in its broadest sense and the local services offered.
19. Feedback from GP's and other health staff suggests however that often they are unsure where to refer patients to when they come across housing related issues. In addition, patients' housing circumstances are not considered as standard during an appointment with a GP or other health visits alongside some of the other routine questions relating to smoking for example. With a view to raising awareness of the many aspects of housing amongst health staff and ensuring there is a simplified method of referring patients with housing concerns, an additional action has been added to the Housing Delivery Plan under priority 1 to explore the feasibility of a single point of access for housing related referrals from health and social care and other partners. This could perhaps be a single telephone number that is widely promoted alongside housing related training for health staff. Successful models of

this approach can be seen in Islington with the 'Shine' telephone number as a means of channelling housing referrals from health sources.

### **Sustainability and Transformation Plan**

20. The Health and Wellbeing Board's (HWB) Strategic Actions recognise the contribution of housing specifically through Strategic Action 7: Extend integrated working to include Housing so that support for vulnerable people is assessed collectively and delivered by the most appropriate agency. Housing also links with several of the other strategic actions as highlighted in the Housing Delivery Plan and has a wider role to play in effectively contributing to improved outcomes and reducing pressures on acute services as outlined earlier in this report.
21. Furthermore the emerging Sustainability and Transformation Plan (STP) recognises the important role of housing whilst the HWB 7 Strategic Actions identifies the key objectives of care organised around individuals and populations not institutions; preventative and proactive care enabling independence; people remaining at home where possible with hospitals and care homes only for people who need to be in these settings with a 'shift' of resources to support this; teams working together across organisational boundaries delivering integrated care; value based and sustainable care based on the real needs of populations; with health and social care providing added social value to our communities.
22. The emerging themes in the Nottingham and Nottinghamshire STP include a focus on prevention and independence and a focus on out of hospital care. Housing and housing support services are essential to realising this.
23. There are a number of factors which are seeing increased demands on local services. This includes increasing numbers of residents approaching housing services with mental health issues; the impact of homelessness and an increasing number of older people placing demands on acute services across the County. Without a radical shift to preventative services, of which housing is key, demands on acute services will continue to increase. It is therefore essential to significantly focus on prevention services.

### **Health & Housing Memorandum of Understanding**

24. In December 2014, a range of health, housing and social care organisations signed up to a joint Memorandum of Understanding <http://www.cih.org/resources/PDF/Policy%20free%20download%20pdfs/MOU%20project%20final%20Dec%202014.pdf> which recognised the need for joint action and a shared commitment to improve health and wellbeing outcomes. At a local level, Nottingham City Council is developing a local Memorandum of Understanding with housing, social care and health to develop an approach to joint working with an action plan. The advantages of this are to ensure clarity and a shared commitment to joint working.
25. In line with the STP footprint, which now includes the City, links have been made between the Nottinghamshire Housing and Health Commissioning Group and the equivalent group at Nottingham City to align priorities where possible. It is also proposed that a health, housing and social care joint Memorandum of Understanding is developed across the County and builds upon the scoping event held on 19 January 2016, which would be led by Health and Housing Commissioning Group.



## **Delivery of Housing Actions & Officer Capacity**

26. To deliver true integration of housing, health and social care services equitably across Nottinghamshire to meet the ambitions of the Health and Wellbeing Strategy a significant step change in direction is required with housing professionals being placed within health and social care teams. This is starting to be seen, for example through hospital discharge schemes, though currently on a more local ad hoc basis rather than a co-ordinated activity across the County.
27. Set against the above statement and to deliver the Boards ambition of 'working together' an identified blockage hindering progress of the delivery plan and wider integration of housing, health and social care is the absence of a designated co-ordinator to truly drive this agenda forward to the next step.
28. At this present time work to co-ordinate actions within the housing delivery plan and raising the profile of the health and housing agenda is being undertaken through the goodwill of districts officers. This is in addition to their existing workloads and not sustainable over the longer term. Though positive progress has been made and partnerships formed, opportunities to make a real change are being missed. It is proposed, therefore, that the Health and Housing Commissioning Group prepare a business case for consideration by the HWB on recruiting a designated 'Health, Social Care & Housing Integration Officer' to lead this agenda.
29. The Board should note that in terms of resourcing such a role, one potential funding source may be the BCF or Pioneer development funding, subject to eligibility criteria and agreement from the BCF Programme Board.
30. A local example of such a role exists in Derbyshire where public health have funded and directly employed a health and housing co-ordinator. This is resulting in significant demonstrable benefits including savings for health services and improved outcomes for individuals. The benefits of having access to an additional resource to deliver housing actions can also be seen in the progress made by the Local Authority Energy Partnership (LAEP) in supporting the districts to introduce local 'Warm Homes on Prescription' Pilots.

## **Better Care Fund**

31. As the Board are aware, the Better Care Fund (BCF) creates a local single pooled budget to incentivise the NHS and local government to work more closely together around people, placing their wellbeing as the focus of health and care services, and shifting resources into social care and community services for the benefit of the people, communities and health and care. The BCF paper presented at the 6 April meeting advised the Board that the 2016/17 allocation for Disabled Facilities Grant had been substantially increased.
32. As such, the Health and Housing Commissioning Group has been tasked by the BCF Programme Board to identify and recommend the appropriate utilisation of this funding in order to improve health outcomes for individuals across Nottinghamshire, set against local agreements. As there is overlap in the emerging activities that could be funded through the BCF and those already within the Housing Delivery Plan, stronger co-ordination is required

between the BCF Programme Board and Health and Housing Commissioning Group to maximise the use of this funding to deliver the wider outcomes of the health, housing and social care agenda.

33. The Board will be kept up to date with developments through its quarterly BCF updates.

### **Planning Healthier Environments**

34. As reported at the 4th May 2016 Health & Wellbeing Board public health Officers are working closely with planning colleagues across Nottinghamshire to increase awareness of the importance of addressing health as part of the planning process. Following the adoption of the "Spatial Planning for Health & Wellbeing of Nottinghamshire" officers are taking forward discussions with Local Planning Authorities on progressing implementation. Another important area of work will be the development of Planning and Health Engagement Protocols to ensure that health is fully considered as Local Plans are drawn up and applications considered.

### **Impact on health inequalities**

None

### **Other Options Considered**

None created.

### **Reason/s for Recommendation/s**

To progress future collaboration between housing, health and social care to develop a Nottinghamshire Memorandum of Understanding and update the housing delivery plan.

### **Statutory and Policy Implications**

35. This report has been compiled after consideration of implications in respect of crime and disorder, finance, human resources, human rights, the NHS Constitution (Public Health only), the public sector equality duty, safeguarding of children and vulnerable adults, service users, sustainability and the environment and ways of working and where such implications are material they are described below. Appropriate consultation has been undertaken and advice sought on these issues as required.

### **Financial Implications**

36. There are no financial implications directly arising from this report.

## **RECOMMENDATION/S**

That the Board endorse:

- 1) The updated Housing Delivery Plan and activity for the next 12 months.

- 2) The progression of a Nottinghamshire Memorandum of Understanding between housing, health and social care. Memorandum to be presented to HWB/ HWIG in six months.
- 3) A report to be presented to HWB within six months covering progression of a business case for a designated officer to co-ordinate health, housing and social care activity across the County to include a monitoring and co-ordination role. Together with further exploration on the potential support for this post through the Better Care Fund (BCF) or Pioneer development funding.

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**Constitutional Comments (SLB 26/05/2016)**

37. Health and Wellbeing Board is the appropriate body to consider the content of this report.

**Financial Comments**

38. There are no financial implications directly arising from this report

**Background Papers and Published Documents**

Except for previously published documents, which will be available elsewhere, the documents listed here will be available for inspection in accordance with Section 100D of the Local Government Act 1972.

Appendix 1: Housing Delivery Plan  
Better Care Fund 2016/17 Plan 6 April 2016

**Electoral Division(s) and Member(s) Affected**

All.