Harnessing health and housing support to improve population health

Integrated care webinar series 2020/21

25 November 2020

NHS England & Improvement System Transformation, in partnership with the Social Care Institute for Excellence (SCIE)

Chair:
David Pearson

Chair Social Care Sector COVID-19 Support Task Force
Chair of Nottm and Notts ICS
Chair of TEC Quality
Past President of ADASS

Two polls

Are you aware of the Memorandum of Understanding: Improving Health and Care through the Home?

Have you heard of the National Statement of Expectations for Supported Housing and the guidance for local authorities?

NHS England and NHS Improvement

Housing LIN
Connecting people, ideas and resources

Housing Learning and Improvement Network

Beyond bricks and mortar: Harnessing health and housing support to improve population health

25 November 2020

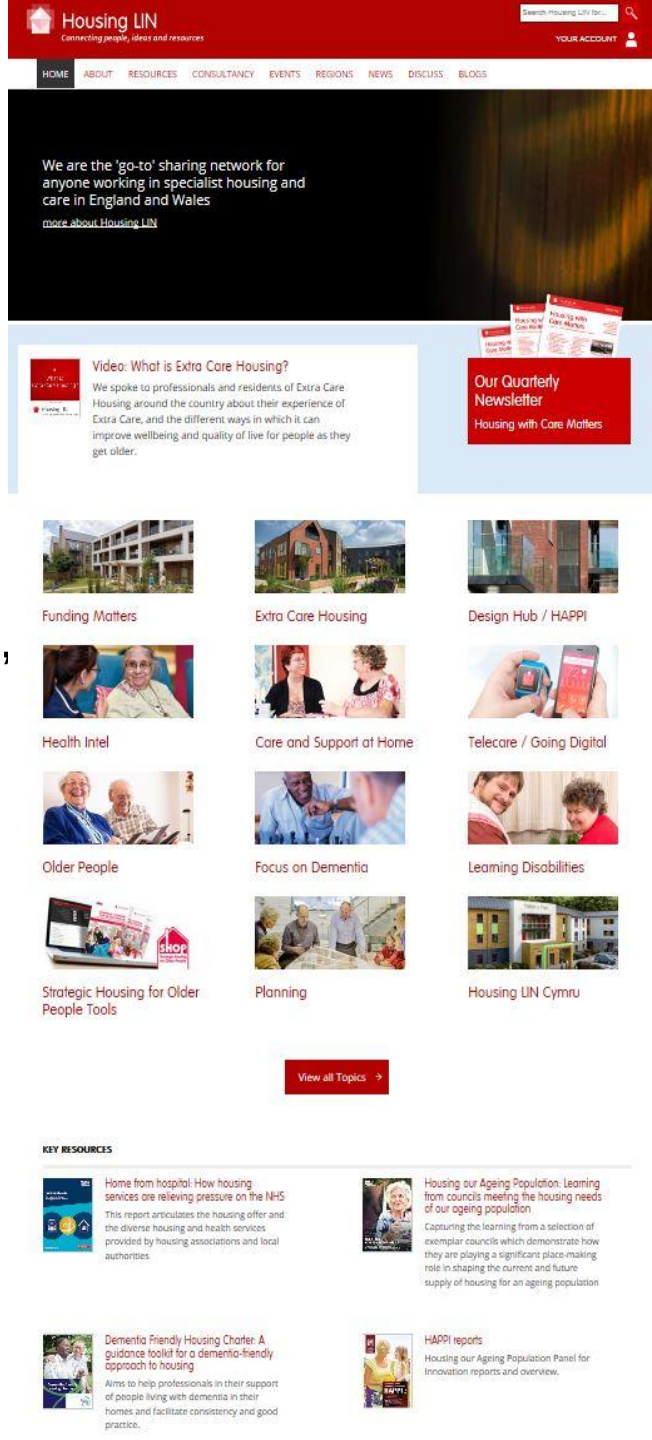
Jeremy Porteus
Chief Executive
@HousingLIN

Housing LIN

Connecting people, ideas and resources

Housing LIN – *Ideas Lab*

- Formerly housing **Change Agent** in Department of Health and responsible for integrated care
- Sophisticated network bringing together housing, health and social care 25,000+ professionals in England, Wales and Scotland to exemplify innovative housing solutions for older adults and working age disabled adults
- ‘Health Intel’ recognised as a leading knowledge hub’ on housing, health and social care
- Online platform supporting networked activities.
- We connect people, ideas and resources to inspire, inform and improve the range of contemporary housing choices that enable older and disabled people live independently



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Making integration work: system levers

- The **Health and Housing Memorandum of Understanding** – better partnership working, strategic planning/commissioning, knowledge sharing
- The **Improved Better Care Fund** makes reference to Disabled Facilities Grants and other capital grant funding to support better care at home
- **DH Care and Support Specialised Housing Fund**, administered by Homes England and GLA.
- **NHS England Learning Disability and Autism programme -** creating alternative accommodation for people with complex needs to deliver 'Building the right home' goals.
- **MHCLG** – National Statement of Expectations on Supported Housing
- **NHS England** – quick guide on health and housing
- **TCPA** – Healthy Homes Act campaign – quality of our future homes
- **SCIE -** Commission on role of housing in the future of care and support

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Housing inequalities

Housing inequality

- Access to housing/housing choices
- Physical disrepair
- Other housing conditions ie digital exclusion, fuel poverty

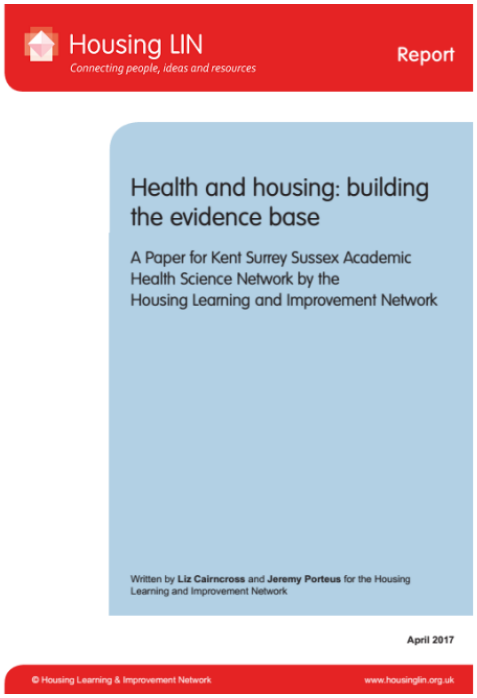
Housing inequity

- Affordability
- Homelessness
- Tenure disparity

Housing quality

- Poor design (inaccessible)
- Overcrowding
- Unhealthy neighbourhoods

Health systems, inequalities & housing interventions



To stop people entering system

- Public Health – exercise, eating, drinking, etc
- Care pathways – the right treatment & preventive measures (stroke recovery or falls prevention)
- Information and Advice to support self care / management and patient experience

To reduce demand within the system

- Recovery, re-ablement, recuperation
- Right level of health care at home/out of hospital
- Partner with community-based organisations and housing

Wider environmental solutions

- Better housing choices, energy efficiency, fuel poverty, aids & adaptations, equipment & advice, digital and assistive technology

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Aligning the health and housing vocabulary

- *Specialist housing* - delay move to costly residential or nursing care
- *Housing support* - to prevent homelessness, support wellbeing
- *Mainstream housing* – design quality and accessibility (such as HAPPI) to offset future health and social care costs
- *Home improvement agencies and handyperson services* - deliver aids and adaptations that can reduce hazards, falls, fuel poverty, support hospital discharge, reduce hospital readmissions
- *Environmental health* - tackle chronic disrepair and environmental conditions that can lead to a long term condition (mental health), disease (COPD) or increased health inequality
- *Regeneration and renewal* – promote sustainable health outcomes via health neighbourhoods/age-friendly communities
- *Spatial planning* - support housing growth and link to strategic local needs eg PCNs, STPs, JSNAs, NHS estate strategies

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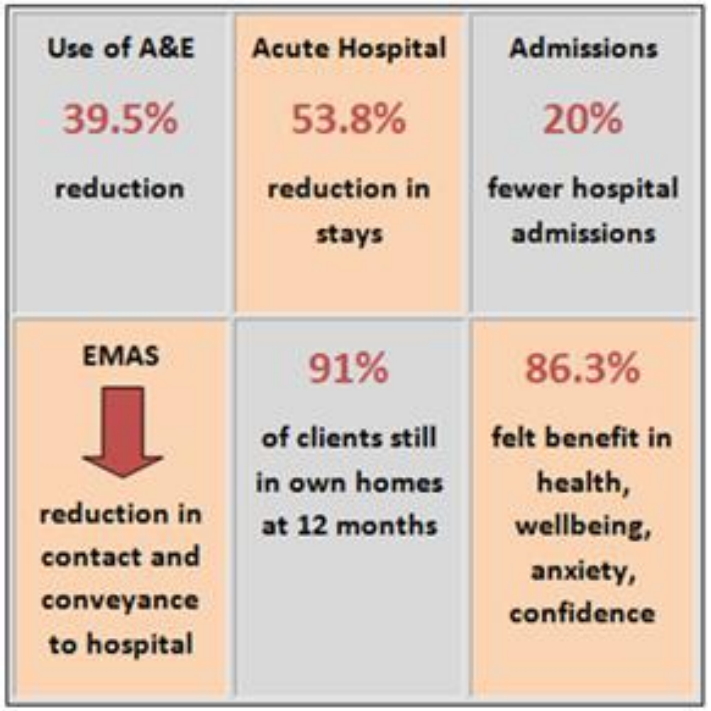
When integration works well it can deliver better outcomes: what's the evidence?

Derby City Council, Healthy Housing Hub

- Housing related advice and support
- Prescribed housing support
- Healthy housing assistance
- Partnership links across health, housing, social care and the voluntary sector
- Evaluation - positive outcomes / efficiencies



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Building blocks: What can be done to support your local health economy?

- Scale up provision of extra care housing
- Housing options services as part of hospital discharge teams and in A&E to prevent admissions
- Home improvement agencies – proactive support to enable daily life, prevent accidents, tackle fuel poverty
- Specialist support in hospitals, targeted at people with LTCs, eg mental health needs, learning disabilities or dementia
- Fast track adaptations / repairs to get people home
- Step up / step out crisis accommodation in housing settings, supporting hospital discharge and effective reablement
- Wider neighbourhood and public health interventions that promote healthy lifestyles and exercise

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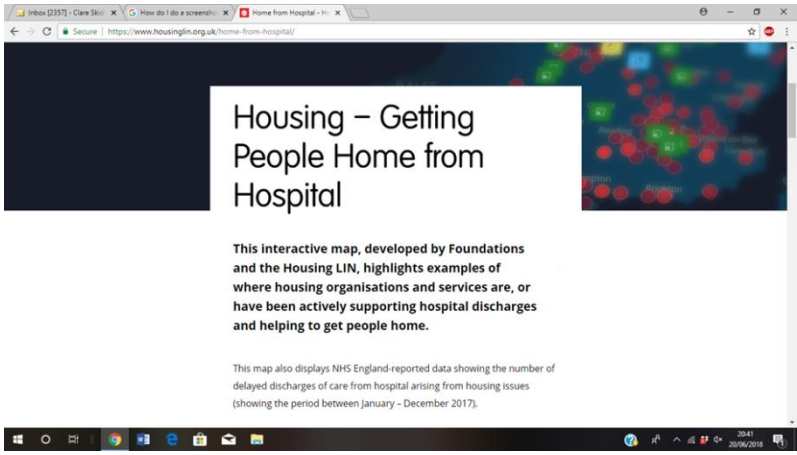
Home from Hospital – Interactive Map

- Developed jointly by Foundations UK and Housing LIN
- Highlights where housing organisations are supporting hospital pathways in range of practical ways



- Projects from across England are profiled, set alongside 'DToC' (Delayed Transfer of Care) data
- Aim: to inspire, support and inform local conversations
- Quarterly updates planned to capture new activity
- In future, include examples from Wales

- Visit https://www.housinglin.org.uk/home-from-hospital/

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Knowing the vital signs for building effective relationships

- *Practice manager*: Have you engaged with your local PCN/CCG or the hospital trust to improve their knowledge and understanding about how housing can impact and support health achieve their outcomes?

- *Strategic partnerships:* Are you engaged strategically within your local health and social care economy to increase and support joint commissioning of housing services ie Local Resilience Forum?
- *Health intelligence*: Do you have links with your local HealthWatch or other patient advisory services to better understand patients' experience of using local NHS services or local care system pressures?
- *Healthy living:* Have you undertaken a 'healthy equity' audit of your residents/users of services to better understand their health and wellbeing needs and links to wider determinants of poor health?

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Some concrete solutions

- *Memorandum of Understanding* – bring local housing, health care partners together to form local MoU drawing on national framework
- *Evidence base – work with AHSN to build evidence base (also Housing LIN report for KSS AHSN at:* https://www.housinglin.org.uk/News/Health-and-housing-building-the-evidence-base/). Also Nottingham example
- *Training and workforce development*
- *Crisis housing team eg homelessness, mental health, learning disability*
- *Hospital discharge team housing officer* – see Housing LIN Home from Hospital map for examples
- *Strategic partnership on intermediate care with housing association (see Whittington NHS Trust example) at:* https://www.whittington.nhs.uk/default.asp?c=36168)

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Thank you

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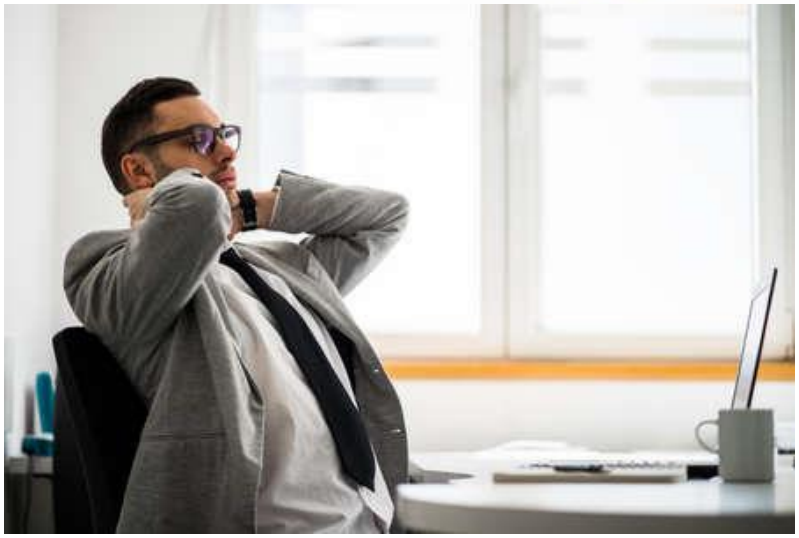
Housing to Health

Harnessing Housing Support

Richard Holland
Assistant Director of Housing Operations
Nottingham City Homes

"Working with health impacted on my health!"



- Learning the ***terminology***…
- Who should we ***engage with***?
- Who can we get to ***listen***?
- Getting ***housings offer*** across to the right people…
- Obtaining the ***level of proof*** needed…

Key factors and considerations for housing and health collaboration

Getting started…

- Identifying what **we could offer** as a partner e.g. stock
- Finding the **right people** – passionate, experienced coordinators
- Building a **relationship with the NHS, CCG, our Commissioner** and **networking** to maintain this
- **Flexibility with the model** by tailoring to partners and **integrating** within their teams e.g. hospital Integrated Discharge Team, mental health
- Understanding the need for **higher level of proof** and **demonstrating our worth**
- Understanding the hospitals need for staff to help with **the management of rehousing** e.g. removals, help with benefits and utilities

Key factors and considerations for housing and health collaboration

Nottingham City Homes

Why does it work in Nottingham?

- We **tailor our pathways** to what we have available and can deliver.
- We are able to **provide a high level of proof** that our service works.
- We bring the **human touch** and can demonstrate **social outcomes.**
- It's a **win/win situation!**
  - We're creating **sustainable communities** and **filling our properties**.
  - We have a large reach working with **ICP**, helping with **smoking cessation**, promoting **flu vaccines**, helping with **social prescribing**, alleviating levels of stress by **managing debt**, **Housing First** (street homeless), partnership working with **holistic view…**

The results speak for themselves!

Nottingham City Homes

9.8 out of 10 satisfaction with service

97% couldn't have moved without the service

311

REDUCED HOSPITAL READMISSIONS

15% increase in their health-related quality of life

23% improvement in self-reported health.

86% improvement mental wellbeing score

23% showed a substantial reduction in anxiety/depression

AVOIDED **7250** BED DAYS in NHS or Adult Social Care

Final poll question

Have you heard of difficulties accessing housing-related services following hospital admission / other interventions?

NHS

Blackpool Clinical Commissioning Group
Fylde and Wyre Clinical Commissioning Group

Using Population Health Management to Support Residents in Houses in Multiple Occupation

Pete Smith

Fylde Coast CCGs

Population Health Management and Houses of Multiple Occupancy

- Population Health Management (PHM)
  - PHM is how we use historical and current data about people's health and how they are using health and care services to design new proactive models of care which will improve health and wellbeing today as well as in 20 years' time (NHSE Feb 2020).
- Houses in Multiple Occupation (HMO)
  - Your home is a house in multiple occupation (HMO) if both of the following apply:
    - at least 3 tenants live there, forming more than 1 household
    - you share toilet, bathroom or kitchen facilities with other tenants
  - A household is either a single person or members of the same family who live together.

What we did

- Identified what we knew
- Identified what we didn’t know
- Identified partners to collaborate with
- Met regularly
- Kept asking questions
- Worked iteratively to build knowledge and skills
- Communicated in different ways to engage everyone in the process
- Tried not to be limited by our experiences – this one is tough!
- Put new things in place

What was the outcome?

- Health and housing data was combined to identify people living in HMOs and understand what their health risks were
- Based on this information local services were redesigned to:
  - Undertake holistic and proactive health and care assessments
  - Assign a health and wellbeing worker (non-clinical) to work with people to support directly (e.g. navigating health systems, accessing housing support) and signpost to signpost to other support services (e.g. local voluntary and community groups)
- Using the Patient Activation Measure as the core measure we saw an improvement in personal activation – wider studies have shown that this equates to increased personal confidence, better health outcomes and increased reliance on self-care

Lessons Learnt

- Information Governance is complicated
- Data comes in lots of shapes and sizes
- Relationships and communication are the key to success
- People want to get involved when helping people is the focus
- It isn’t easy but with determination and a little fun thrown in it doesn’t have to be difficult
- There’s often a lot more going on than you realise
- This was only a small pilot and scaling up will require a significant shift in healthcare approaches

Thank You!

Any questions?

Centre for Ageing Better

Homes, health and COVID-19

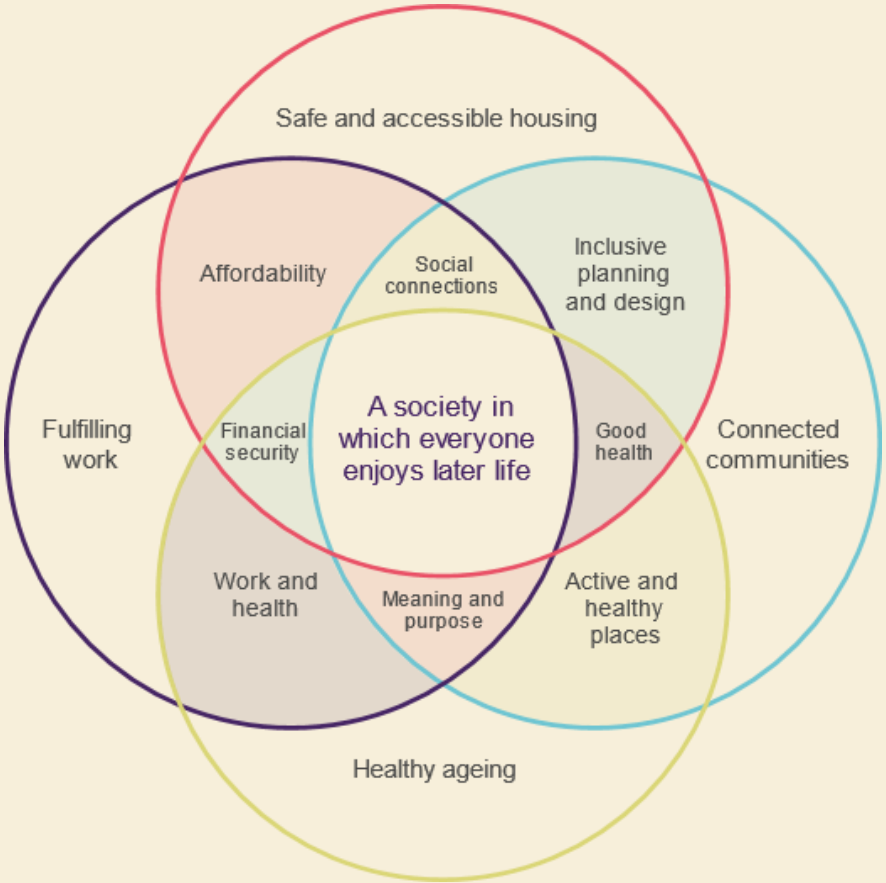
Henry Smith
Senior Programme Manager
Centre for Ageing Better
25 November 2020

About us

Our vision is a society where everybody enjoys a good later life

- We create change in policy and practice informed by evidence.
- We are a charitable foundation, funded by The National Lottery Community Fund, and part of the Government's What Works Network.
- To achieve real and significant impact, we focus on those approaching later life (50-70 year olds).

Our priorities



The Good Home Inquiry

An evidence-based analysis of England's housing policies to determine the causes of, and solutions to, the poor quality of much of our housing

- Sponsored by The Centre for Ageing Better, led by an independent panel, chaired by David Orr CBE
- Analysis of past and present housing policies, wide-ranging consultations with experts, research with people with lived experience of living in a poor-quality home
- Moving beyond the current definition of a 'non-decent' home to a 'good' home
- Final conclusions for new and amended housing policies that would make it easier to upgrade, maintain and improve our homes; with change throughout the Inquiry
- The Inquiry will run until mid 2021

Homes, health and COVID-19 – Ageing Better & The King's Fund

Housing is a significant social determinant of health

- It is vital that homes provide a safe, warm and stable environment
- Particularly during lockdown, shielding and winter
- The King's Fund were commissioned – literature review of the association between housing and health

COVID-19 exacerbates existing concerns about the impact of homes our health in two ways

1. Increased exposure
   - Association with negative health outcomes including cardiovascular and respiratory conditions, and general decline in physical and mental health
   - Conditions that result in higher susceptibility to adverse COVID-19 outcomes
2. Conditions of poor quality housing, such as overcrowding, have led to increased transmission

Nearly a third of adults in Britain (31%) reported having physical or mental health problems because of the condition of their homes during lockdown.

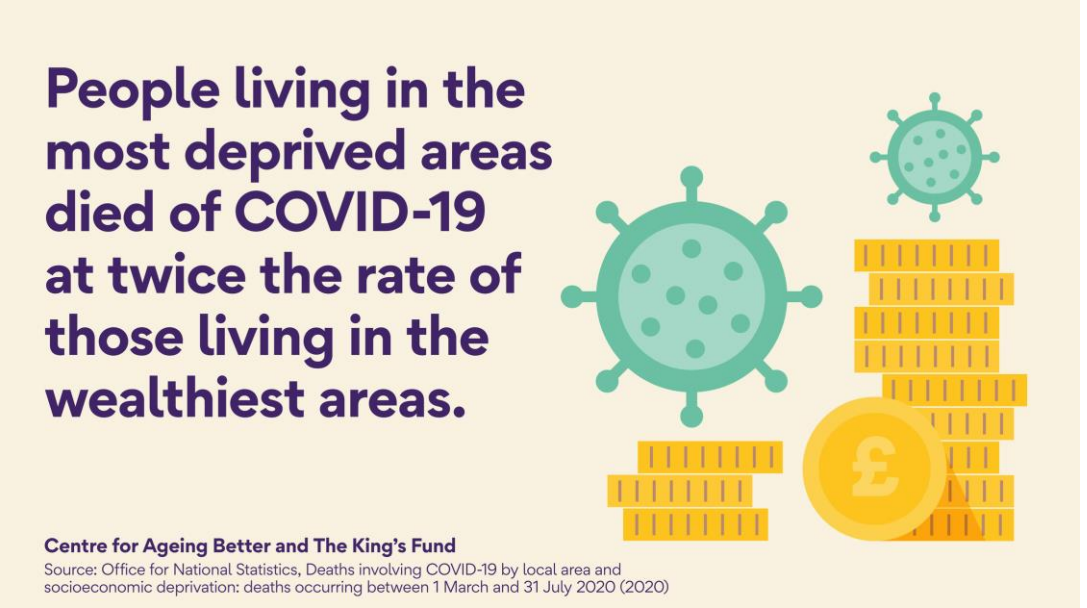
Centre for Ageing Better and The King's Fund

Source: National Housing Federation, Housing issues during lockdown: health, space and overcrowding (2020)

There are overlaps between those most likely to be living in poor-quality housing and those vulnerable to COVID-19

Prioritisation of certain groups

- The people most vulnerable to COVID-19 are also the most likely to be living in poor quality housing: older people, those with existing health conditions, people on lower incomes and those from ethnic minority groups
- Ahead of winter and with a second lockdown, what does this mean for rates of fuel poverty? What has been the impact of increased financial insecurity?



Overcrowded homes pose a significant health risk by increasing likelihood of spreading COVID-19

- Overcrowding more likely to be found in BAME groups
- Of the 20 local authorities with the highest COVID-19 mortality rates, 14 also have the highest percentage of households living with fewer bedrooms than needed
- People who live in homes where multiple generations are living together gave been found to have poorer outcomes during the pandemic

Beyond the physical condition of the home…

Related physical and mental health concerns

– Digital exclusion may also be impacting on mental and physical health. Online access is increasingly important for accessing health care and other types of support

– Increasing levels of financial insecurity (and insecurity of tenure?)

– Green space linked to reduced mortality from cardiovascular conditions

Improvements to our homes can be both beneficial to individuals and highly cost-effective

The current situation is not inevitable

– Some low-cost adaptation to the home can result in a 26% reduction in falls

– £1 spent on home improvement services to reduce falls is estimated to lead to savings of £7.50 to the health and care sector

Priorities for action in the current context

- Increase levels of collaboration between health and housing at the local level. HWBs, STPs, and ICSs should include housing as a focus.
- National and local government should protect people from the effects of damp and mould, trip and falls hazards, and fuel poverty on their physical and mental health during the second wave and the national lockdown in winter months.
- Focus support on those with the greatest risk of housing-related health inequalities. Older people, people with existing health conditions, those with lower incomes and people from ethnic minority groups are also often more vulnerable to COVID-19.
- Local and national government should consider the broader impact of shielding and lockdown on people's wellbeing. Access to green space, face-to-face and digital social connections and local amenities varies significantly between communities and has an impact on people's physical and mental health.

Next steps

- Please keep in touch!
  - Henry.smith@ageing-better.org.uk / info@ageing-better.org.uk
- Particular areas of interest:
  - Environment
  - Digital
  - Finance
  - Repairs
- Sign up to our newsletters and information about the Inquiry https://www.ageing-better.org.uk/enews

Centre for Ageing Better

Thank you

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Integrated Care Webinar series 2020/21

A recording of the webinar, slides and resources will be shared on the **Integrated Care Learning Network**.

To join the network email integratedcare-manager@future.nhs.uk.

25 November 2020

NHS England and NHS Improvement