

# Healthy Housing Hub – Adults Health and Housing Directorate, Derby City Council

*“Housing is a key determinant of health...Poor housing conditions:*

- ⊕ *cause preventable deaths;*
- ⊕ *cause illness and accidents;*
- ⊕ *contribute to health inequalities;*
- ⊕ *impact on peoples’ life expectancy and quality of life.”*

Derby City JSNA 2011.

- Vulnerable and older people are main users of both health and social care services...and typically spend a large proportion of their time at home; their homes are therefore a particularly important factor in:
  - maintaining physical and mental health;
  - addressing health inequalities.
- The principle underpinning the Healthy Housing Hub is that:  
Delivering generally low cost preventative housing solutions to vulnerable residents leads to:
  - ✓ Improved health and wellbeing outcomes;
  - ✓ Reduced longer-term demand on health and social care.
- The Hub targets those most vulnerable to housing-related poor health outcomes:
  - By harnessing the much wider ‘virtual team’ of staff and volunteers already working in the health, housing and social care professions, including OTs, mental health workers, GPs, community nurses, etc.; the Hub receives referrals where they identify a vulnerable client:
    - whose medical condition or vulnerability may be affected by their housing conditions; or
    - whose housing conditions may be detrimental to their health and well-being.
  - Proactively, with Public Health colleagues, linking vulnerability and housing condition data.
  - Working with community groups across the city.
- The Hub defines ‘vulnerable’ as:
  - People living with a chronic or severe health difficulty/illness/frailty or disability
  - Older people or pre-school children – defined as those over 60 and under 5 years of age.
- ‘Intelligent’ targeting significantly increases the likelihood that intervention will be instrumental in:
  - preventing □ reducing □ delaying or □ lessening the occurrence or severity of an undesirable health event and will therefore have the greatest impact on health, well-being and cost efficiencies.
- Utilising a range of interventions, including ‘Prescribed Works’ (*means tested*), ‘Healthy Housing Assistance’ (*means tested*), advice & support, partnership links and our ‘Handy-person Service’, the Hub is able to facilitate or directly deliver preventative housing solutions, such as: repair boilers, gas fires & install central heating in cold homes; remove trip hazards, fit grab rails; help with maintenance, relocation, fuel poverty, hoarding...
- Safer, suitable housing can:
  - ✓ reduce home accidents, falls and general health risks;
  - ✓ reduce demand on GP, hospital and other health and emergency services;
  - ✓ reduce reliance on social care;
  - ✓ maintain independent living within own home;
  - ✓ facilitate return home from hospital;
  - ✓ enhance childhood development.
  - ✓ increase client well-being.
- Consequently, where the Hub can help prevent, delay, or lessen the seriousness of a health occurrence, its intervention has the potential to help significantly reduce rising costs to the health and social care sectors; where the interventions’ effect is on-going and as client numbers grow the potential reduction in longer term growth in health and social care costs continues to increase.

## Healthy Housing Hub

### Customer feedback 2013-14

*"...you saved my life"*

*"...stopped me from falling"*

*"...big benefit on my health"*

*"...it's given me...independence back"*

*"It's like the sun came out...a lovely feeling!"*

*"I live alone, been ill and had to remain cold"*

*"If it wasn't for your help...I would be dead by now"*

*"...given incredible peace of mind...I'm less anxious now"*

**But** - whilst the responses from those we help is clearly very pleasing, the following case example explains in stark terms why we must do more – and why the Healthy Housing Hub is now an integral part of the City's Better Care Fund programme of work:

<p>An elderly couple's boiler broke down in the autumn of 2013.</p> <ul style="list-style-type: none"><li>➤ They had a gas fire in the living room.</li><li>➤ No other form of heating, and no hot water.</li><li>➤ They had been using electric blankets to try to provide at least some warmth for bedtime, but the electric blankets faulted through over use.</li></ul>	<p>Unfortunately, the husband contracted pneumonia and sadly passed away in January 2014.</p> <p>It was still sometime after this loss before the wife was referred to us. Only then could we:</p> <ul style="list-style-type: none"><li>✓ Arrange for temporary heating to be provided;</li><li>✓ Replace the boiler, to provide effective heat &amp; hot water again.</li></ul> <p>A great help to the wife, but unfortunately far too late for her husband.</p>
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# Healthy Housing Hub – Photographs and Case Studies

## Case study 1:

- An older lady with severe dementia & heart condition.
- No heating or hot water since boiler broke down and gas fire was condemned by British Gas.
- Communication difficulties due to dementia, but we were able to work closely with the lady's son.

Multiple health hazards for this lady included:

- Further cold related illnesses due to lack of heating;
- Personal hygiene difficulties with no hot water.

We were able to:

- ✓ Provide temporary form of heating promptly.
- ✓ Install a new boiler.
- ✓ Install replacement fire.

Without these interventions this lady could not have continued to live in her home.

## Case study 2:

A blind elderly gentleman, otherwise in reasonable health and who wished to continue living independently

- Due to fuel poverty, he was failing to keep warm.
- He had resorted to chopping wood to burn on an open fire in the living room.
- His gas cooker was in poor repair – so he was lighting the gas with a match.

Without intervention, there was a strong likelihood of:

- cold-related ill health;
- personal injury whilst chopping wood;
- fire damage caused by unsighted use of open fire;
- explosion involving the defective gas cooker;
- high costs to care, health and emergency services.

We were able to:

- ✓ Line the open fire flue and install a gas fire;
- ✓ Access Community Care Grant for a new cooker;
- ✓ Establish best value energy tariff;
- ✓ Maximise his benefits income.



**Trips and falls risk posed by holed and rotting floor directly in door entrance.**



**Excess cold risk of open fire being the only heating. Fire risk through absence of a fire guard.**



**Carbon Monoxide risk from blocked flue found on testing of gas fire.**



**An old, unsafe gas fire that we disconnected from live gas supply.**

### Case study 3.

- Mum – diagnosed with depression and anxiety issues and on low income.
- 3 teenage children and a 7 year old.
- The 17 year old daughter has just had a baby who will continue to live with mum.
- The 14 year old has been diagnosed with post-traumatic stress disorder and agoraphobia.
- ✗ The property has no bedroom doors and no covering on the stairs and hallway.
- ✓ Working with Priority Families team, we have obtained quotes and overseen works to supply and fit new doors to bedrooms and fit carpet on stairs and in hallway.

### Case Study 4.

- An older lady and adult son in a terraced house.
- The only form of heating is an open coal fire in the living room.
- There is a serious hoarding issue.
- The son has physical and mental health issues.

Multiple health hazards include:

- excess cold;
- fire;
- escape from fire;
- trips & falls.

So far we have been able to:

- ✓ work closely with the mental health worker and establish the client's trust;
- ✓ involve a range of partner services in trying to improve the living conditions.

Negotiating solutions is difficult & time-consuming though, for example:

- ❖ In order to enable installation of central heating, we need to negotiate substantial clearance of the hoarded materials. This case remains on-going.



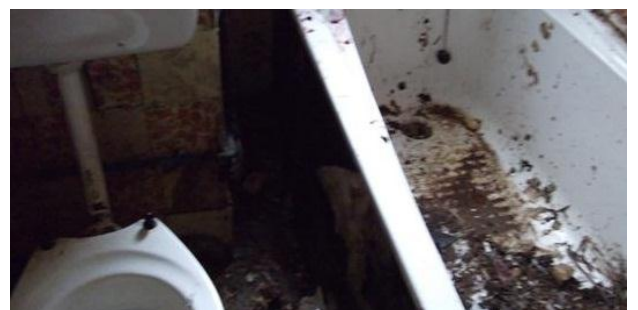
**Hoarding issues pose risk of trips, falls, scalds and fires for clients with restricted mobility.**



**Health risk from cold, damp living conditions & electrical shock and fire risk from unsafe electricals.**



**Personal and food hygiene health risk from filthy conditions in kitchen area.**



**Personal hygiene health risk from unhygienic bathroom conditions.**