

Invest in
housing
Invest in
health



How housing associations
have a role to play in reducing
the inequalities in health



Foreword

Health & Housing

are inextricably linked.



Having worked in the NHS for over 34 years, and as Chair of a housing association, it is obvious to me that housing associations have a role to play in reducing the inequalities in health outcomes faced by the poorest in society. Housing associations provide two million homes for five million people. They not only provide decent housing, but they invest in a range of community services, including health provision.

The value of housing-related services is demonstrated in this booklet. Reducing costs

and health inequalities at the same time, these projects benefit residents, reduce further demands on the health service and also reduce the cost of NHS spending. Housing associations are close to their residents, close to the neighbourhoods that they work in and are experienced in working in partnership with many different agencies to offer community-based services.

It is through continued dialogue, partnership working and finding innovative approaches to creating new services and reducing costs that we will ultimately achieve better health outcomes for all.



Dr Nigel Nice

Chair of
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Introduction

Saving money. Saving lives.

Investing in health services is as crucial as ever, but creating good health and preventing poor health has cost implications. Whilst health spending has been preserved, continued ways of making savings and efficiencies are being sought.



This booklet demonstrates the role housing associations play in creating healthy environments and providing health solutions to local communities.

In a changing environment where funding for housing-related support is facing significant cuts, we must not forget that health and housing are intrinsically linked. Housing conditions, housing-related support and other services provided by housing associations, can have an immense impact on the physical health and mental wellbeing of people. The National Housing Federation believes that housing associations have a key role to play in providing such

services, which can both improve the lives of residents and also reduce the demand for health and social care services.

This booklet calls for health commissioners to recognise the benefits of investing in housing-related support, how housing associations can provide real cost benefits to the NHS by funding such schemes, and to consider the risks of not doing so. At a time when the demand for health services is rising and new technologies are available but very expensive, finding interventions which reduce the cost to the public purse is vital. By providing case studies of work carried

out by housing associations, we can demonstrate why funding cheaper interventions can be a win/win situation for all involved, creating opportunities for health partners and associations, as well as for residents and patients.

Housing associations in England provide affordable housing to five million people in England. They can influence the lives of people by providing good quality, well-maintained housing and are also significant players in some of the most deprived neighbourhoods in the country. Housing associations also play a key role in the health agenda. The homes and services they provide tackle health inequalities, and work to

prevent readmissions, speed up discharge and provide community health services. They have direct access to the wider community through their residents. Over 700 housing associations in England provide care and support services for the most vulnerable in society, and many housing associations have sought to consider what services they can provide that will improve the health and wellbeing of all residents living in their properties.

The following case studies illustrate the role associations can play in providing services that improve health outcomes and also bring cost-savings to the NHS. Housing-related support has been shown to be effective and good value for money. Research by Cap Gemini for the Department for Communities and Local Government (CLG) found that £1.6bn of housing-related support services generated savings of £3.4bn to the public purse, including to health and social care by avoiding more costly acute services.

An estimated £315m is saved from health and social care budgets every year from investment in housing-related support services. The preventative services offered by housing care and support can mean people are less likely to need acute health services, or are enabled to return home from hospital sooner.

With a continuing shift to treating people in the community and at home, housing associations are well placed to play a vital role in providing services. Such

services may be simple and effective interventions, such as installing a handrail so that a person can return from hospital, to providing intensive support and accommodation for people with long-term mental health problems, or more complex interventions such as providing health equality workers.

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Housing associations can play a critical role in:

- Creating and developing healthy and sustainable places and communities
- Providing direct health prevention measures
- Maintaining people’s independence.

The health service and public health is currently subject to unprecedented change. GPs, who themselves are based in local

communities, are being tasked by the Government to make commissioning decisions about the services they buy. Housing associations, also placed in local communities, can be part of the change and have much to offer GPs. Together they can take an innovative partnership approach to tackling health inequalities and working on the preventative agenda together.

In England, people living in the poorest neighbourhoods will, on average, die seven years earlier than people living in the richest neighbourhoods. Housing associations work in some of the most deprived neighbourhoods in the country. They have a vested interest in seeing their residents thrive and prosper. They have also engaged residents in making decisions about their own lives, whether helping residents to live independently for the first time, achieve personal fulfilment by gaining skills to start working or assisting people to take responsibility for their own health by providing fitness trainers.

At a time when public spending is being dramatically cut back, it is worth considering how investing in housing-related care and support can bring real benefits to local people and improve local health outcomes. Housing associations can be valuable partners in delivering community-based health services and we encourage health commissioners, GPs and local authorities to consider the benefits to both local communities and to the public purse.

01

Improving people's overall health

In January 2009, Cross Keys Homes set up a dedicated community investment team to deliver £1m worth of projects aimed at reducing levels of deprivation and improving residents' quality of life over a five-year period. As part of the work, a Keys to Health project was set up to tackle inequalities among Peterborough's residents in two areas where people have a life expectancy of up to 10 years less than those living in more affluent areas.



The project centred on a partnership with Peterborough Primary Care Trust, which provides two health trainers to work with residents to help them tackle health issues, such as weight loss or gain, help with quitting smoking and making healthy lifestyle choices.

The 12-month £35,000 scheme was funded by Cross Keys Homes with the trainers directly employed by the NHS. This allowed the health trainers to receive specialised support and training from health professionals to fulfil their role working within the health profession's framework.

The project was launched in October 2009 with a series of community events to sign residents up to the scheme and the trainers were based in the community, one

at a local children's centre and one at a family centre.

Some of the results were:


- A client losing one stone in weight in just six weeks
- Another resident who weighed 23 stone lost four and half pounds in a week by writing a food diary and receiving advice and support to make gradual changes to his diet
- A third person who was smoking 40 cigarettes per day has now quit.

The impact of the project was measured and evaluated by the NHS performance management system and following the project, the partnership hopes to extend it for a further period.

Sarah Smith, programme lead at NHS Peterborough, said:

'NHS Peterborough worked very well with Cross Keys Homes, as Cross Keys Homes could identify people and areas that needed to be targeted, and the health trainers were able to address the issues the people wished to change around diet, physical activity, smoking and alcohol in the clinics they held.

'The referrals could come through from housing officers that were seeing people in their own environment and then referring to the health trainer based in the near community setting; hence, this led to less non-attendance and was much more successful.'

A close-up photograph of a woman with long blonde hair and a young girl with dark hair and freckles. Both are smiling warmly at the camera. The woman is holding a bright green plate filled with fresh blueberries. The girl is holding a light blue plate with several ripe strawberries. The background is softly blurred, suggesting an indoor setting like a kitchen or dining area.

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02

Improving outcomes for people with mental health problems

The county of Herefordshire houses the highest number of people with long-term mental health problems in the whole of the West Midlands. **Herefordshire Housing**, a housing association, has developed a number of alternative housing options for people with mental health problems.



'At last I am able to just get on with my life but with the added security of knowing help is there if I need it.'



'I am amazed to see that service users are making cards for each other and family members. This is a great leap forward in their recovery.'

Working alongside Herefordshire Unitary Authority and the local PCT, the housing association has developed a number of housing option models which address clients' capacity and confidence to live independently.

In the past, people with mental health problems in Herefordshire were sometimes placed in accommodation outside the county, or placed in unsuitable accommodation such as care homes. Now Herefordshire Housing has offered a number of clients a tenancy which includes an element of support.

Mental health services procured a package of support including domiciliary care and nurse visits, whilst Herefordshire Housing secured the funding from integrated commissioning to directly deliver housing support and provide a co-ordinator at the foyer. All residents are tenants of Herefordshire Housing, which is funded through special arrangements with the council's housing benefits team.

Another model has been to create a shared house where two people can live in, which has on-site nursing care provided by the PCT. The two people concerned were invited, along with their relatives, to view the house, which had been done up as a show home. The package of care provided includes both clinical nursing care and also a housing support service provided by the housing association and funded by area-based grant.

Another housing option pathway is provided by a foyer, which will provide accommodation for four clients and will have care provided on site both day and night. Activities will be provided which reflect the residents' interests with the aim of improving mental wellbeing; currently, both an art and gardening project have been set up.

Such models of housing and support provide better health outcomes where residents have responded positively to a new environment, which gives them more independence and improved health outcomes.

An interim evaluation of the project has been undertaken, which included holding a focus group of residents and their families, and then one with all support staff including a clinical psychologist.

This feedback has informed qualitative outcomes which are as follows:

- Widening the choice of housing opportunities, other than adult placement in care and nursing homes
- Enabling individuals to develop independent living skills at their own pace
- Tailoring opportunities to individuals' aspirations and areas of interest
- Practically this project has delivered value for money whilst increasing service users' wellbeing.

Several members of the mental health recovery team and the clinical psychologist stated that they were initially unsure about the project but delighted to be proved wrong as it has been a great success. The care co-ordinator commented:

'It's great to see the service user move from a nursing home where there was no choice and a lack of personalisation, to her own home, with a choice of food, and the ability to prepare her own meals. Her family had previously thought she would never be able to live alone safely and securely but are completely reassured that this is the best place for her.'

The clinical psychologist was very impressed that service users were able to join in making cards for their families. This showed that they were able to focus beyond their own mental illnesses to consider the feelings of others.

'It is quite evident that service users' basic and emotional needs are being met as psychologically this is indicated by the fact that they are much more giving. I am amazed to see that service users are making cards for each other and family members. This is a great leap forward in their recovery.'

Service users said:

'At last I am able to just get on with my life but with the added security of knowing help is there if I need it.'

'There is just enough support without it being intrusive. I like the art sessions as we make cards and have cake when it's our birthday.'

03

Facilitating hospital discharge

The draft **NHS outcomes framework** states that hospitals should discharge patients within 28 days. Hospitals are going to be held to account and fined for delayed discharge.



‘In Sandwell and Dudley in one year, the Direct Labour Organisation helped over 4,500 people with small household repairs and minor adaptations.’

Housing associations are providing discharge services, which will assist hospitals in meeting these obligations. Black Country Housing Group’s home improvement service, delivered by Care and Repair, provides significant preventative cost savings for councils, the NHS and the state as a whole. National statistics show that making adaptations to enable a patient to come home delivers savings of £120 a day – the amount charged to a council when a patient is unable to return home from hospital.

In Sandwell and Dudley in one year, the Direct Labour Organisation helped over 4,500 people in with small household repairs and minor adaptations. In Sandwell, the Handyperson service helped 550 people with necessary household repairs, improving wellbeing, safety and security. Housing adaptations

reduce the need for daily visits and reduce or remove the cost of home care from £29,000 to £21,000 a year.

For example, Mr R is a 63-year-old in Sandwell with hearing impairments. He was unable to be released from hospital because he couldn’t hear the door ring when health visitors were due to visit to check on his welfare.

A referral was given to Care and Repair and a fitter visited the property the next day to mend the intercom. Social services were then advised that the intercom had been fixed. This resulted in Mr R being released from hospital and the welfare visits were able to take place, reducing Mr R’s isolation as well as keeping him out of hospital.

This resulted in peace of mind for the client, reduced risk of isolation and reduced length of stay in hospital saving the NHS’s valuable resources.

04

Providing independent living



Gloucester Court opened in 2010 and provides the opportunity for independent living for five people with learning disabilities.

Funded by the Department of Health through its campus closure programme, via Bedfordshire Primary Care Trust and the local authority, Grand Union Housing Group refurbished a former retirement scheme in Ampthill, Bedfordshire, transforming it into individual accommodation for five people. The scheme is managed by MacIntyre Housing Association with support provided by Choice Support.

The scheme is the successful result of effective partnership working between health and housing and, at every stage of the project, residents' needs were taken into consideration.

This is real progress for residents who have previously lived only in residential care homes.

Residents have benefited from independent living and the benefits can be measured in the following terms:

- Improved communication skills, using wider vocabulary
- Improved interaction and improved use of day-to-day living skills
- Demonstrated the ability to use their initiative
- Decreased behavioural issues
- Demonstrated enjoyment of one's own space and exhibiting a sense of pride in their environment.

'The scheme is the successful result of effective partnership working between health and housing and, at every stage of the project, residents' needs were taken into consideration.'

Councillor Carole Hegley, portfolio holder for Social Care and Health, Central Bedfordshire Council said the opening of the scheme 'is a real joy and everyone involved has played a huge part in the success of this scheme. The building itself is brilliant and the restoration is of the highest quality, but the icing on the cake is to see people living here.'

05

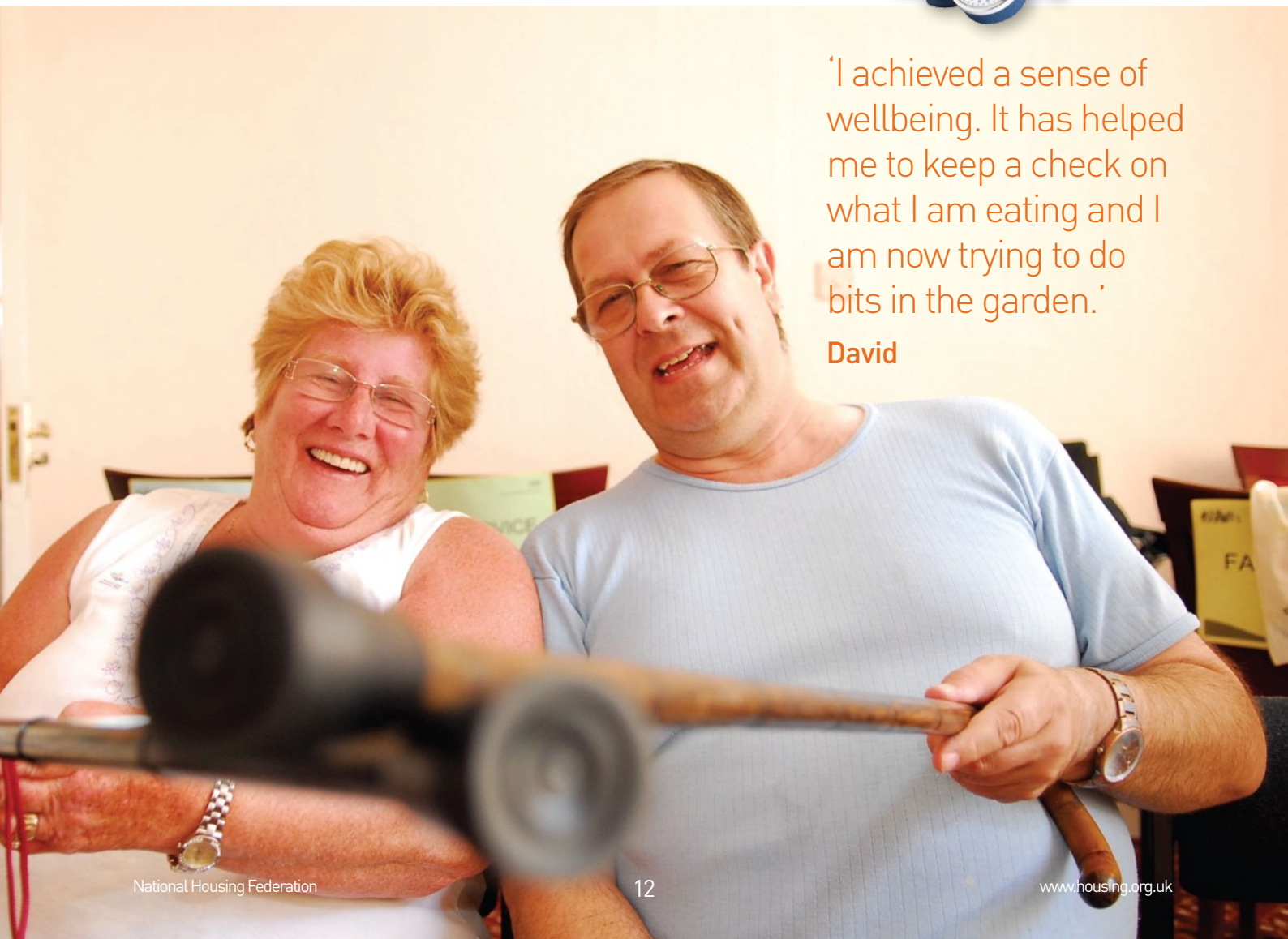
Health matters to older people

The Marmot review highlighted the fact that services that promote the health, wellbeing and independence of older people prevent or delay the need for more intensive or institutional care, making a significant contribution to tackling health inequalities.



'I achieved a sense of wellbeing. It has helped me to keep a check on what I am eating and I am now trying to do bits in the garden.'

David



Research from Derbyshire County NHS showed that the Amber Valley and Erewash boroughs had the highest rate of falls in the county – and a significantly worse number of hip fractures in older people compared to averages for Derbyshire and England.

To help tackle this, Amber Valley Housing (part of Futures Housing Group) launched a Health Trainer Programme. In partnership with Derbyshire County NHS and Three Valleys Housing, nine Neighbourhood Support Co-ordinators were trained to signpost residents to specialist health agencies. Amber Valley Housing also employed two level three health trainers to take on the referrals and provide one-to-one support.

The programme directly fits with the Department of Health’s Choosing health: making healthy choices easier initiative, which aims to encourage and enable people from disadvantaged communities to make healthier choices.

To reduce the number of falls and related injuries, the Health Trainer Programme offers older residents the following:

- Chair-based exercise classes to improve flexibility and reduce isolation
- Otago – an exercise programme involving monitoring of progress across a year
- Falls clinics to reduce the risk of falls
- The Be Active and WaistWise programmes combining exercise with dietary advice
- Smoking cessation support and advice.

The programme is focused on working with residents living within the housing association’s sheltered housing schemes, but is also



‘I feel more alive. I can put my bad arm up more than I could and I enjoy going because I can talk to people.’

Lily

offered and promoted more widely in the community.

Other benefits reported from residents include increased confidence, better mobility and an improved diet.

Since launch in September 2008, the programme has referred 350 people for additional support. Within their first year, the Level 3 health trainers saw 156 people for one-to-one goal setting and behavioural change.

Other objectives met include:

- The referral of more than 30 people a month to further support
- The provision of exercise classes at 12 sheltered housing scheme community rooms (ongoing) – all venues are owned by Amber Valley Housing and, therefore, provided at no extra cost
- The completion of 156 one-to-ones with clients for goal setting and behavioural change since July 2009. This equates to 14.8 per month which is double the target set out in the SLA
- The promotion of the service among GPs, district nursing teams and voluntary agencies through a series of appointments and scheduled presentations – 16 to date.

06

GP creates services for vulnerable people



Michael Varnam House, a residential unit for people who misuse substances, was re-named after GP Michael Varnam who, during his life, specialised in the treatment of people with drug and alcohol problems and in particular homeless people and rough sleepers.



Michael pioneered new ways for treating the most disadvantaged people, taking services to them and enabling them to register at his practice long before they were able to elsewhere.

At the same time, Michael Varnam House provides a detox programme, 24-hour support and accommodation in Sneinton, Nottingham. The services provided are funded through the Supporting People programme for housing-related support and by the Nottingham City PCT for health services. The unit now also forms an integral part of the newly formed Nottingham City Alcohol Pathway.

Caroline Thompson, Framework's operations manager for Substance Misuse Services says: 'the people that are referred to this unit will usually have had very chaotic

lifestyles and will be a huge drain on health services and others. When accommodated here, ambulances are no longer called for alcohol-related incidents; there is no inappropriate use of the local emergency department or blocking of acute hospital beds and alcohol-related injuries are no longer an issue. This is a huge saving to the NHS. In addition to this, people no longer enter the criminal justice system, illicit drug use stops, people moderate or stop drinking, their health status improves, they regain contact with family and enter into some sort of meaningful occupation, pre-employment training or education.'

This can be evidenced through monitoring that is collated on admission, after three months and again after six months. During 2009/10, 65 people moved through

Michael Varnam House. Most people will be resettled in the nearby satellite houses before moving on to independent living.

It is estimated that it costs an average of £3000 every time an ambulance is called and people move through the emergency department to an acute ward. Most people who are intoxicated do not need this service and the cost benefit of a unit like Michael Varnam House is, therefore, realised by Nottingham City PCT, hence the continued funding for 2010/11.

'It is estimated that it costs an average of £3000 every time an ambulance is called...'

07

Providing life opportunities

Framework opened the Music Exchange to offer vulnerable people the opportunity to gain experience in retail work. One lead volunteer, Andy, 46, has enjoyed a remarkable turnaround since starting at the shop.



In the past 18 months, Andy has kicked alcohol addiction – a problem which spiralled out of control in 2001, causing him to declare bankruptcy and lose his home.

He had previously been a chef and a logistics manager but had to leave work in 2003 for fear of getting sacked for alcoholism. He spent almost six years with no income, sofa-surfing and struggling to make ends meet.

'I had to declare bankruptcy in 2001 and that was the domino that pushed everything into oblivion,' Andy explains.

'I lost my job and my home. I was sleeping on sofas and drinking more and more. At my lowest, I ended up in Brighton sleeping rough. I don't even know how I got there or what I did there – the police found me and

I still have no recollection at all what happened. I must've been sleeping rough in doorways but I don't know.

'I know I had a big problem. But it wasn't until 2008 that my journey started.'

Andy got specialist help to beat his alcohol dependency at the Priory in Nottingham and just a few months later was helped with accommodation by Framework.

Andy moved into Framework's Michael Varnam House detox and supported accommodation service in Sneinton in July last year and, within a few weeks, started volunteering at The Music Exchange.

He now enjoys regular visits from his son during the week and couldn't be happier.

'I'd been out of work for six years, so this was a big step up for me. The

last year has gone so quickly – I'm in my own property and things are looking rosy,' Andy said.

'It is great here: I never saw myself working or dealing with the general public directly but it's been absolutely fantastic. I come here two days a week, I'm a key holder, I have responsibility, and I can be trusted to open up, lock up.

'It has given me so much confidence and helped rebuild my life skills. I'm really content.'

Andy

Housing associations make a positive contribution to the health agenda, by improving the quality of residents' lives and saving acute services money. By investing in housing-related support, home improvement agencies and many other services housing associations provide, you can improve discharge rates, improve early access intervention and prevent ill health. Housing associations work in those communities that suffer greater ill health and, in partnership with commissioners and GPs, the health outcomes of these communities can be greatly improved.

Further resources/tools:

- *Health & housing: worlds apart?* National Housing Federation 2010
This publication seeks to inspire collaboration between key sectors, and to find creative ways for the health and housing care and support needs of vulnerable people to be met.
- *Housing for health: worlds aligned* National Housing Federation 2010
This provides a tool for local influencing.

The National Housing Federation represents 1,200 independent, not-for-profit housing associations in England and is the voice of affordable housing. Our members provide two and a half million affordable homes for more than five million people.

National Housing Federation

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