

A healthy bridge to housing? Spanning the gap

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In recent years there has been a greater desire for housing colleagues to work closer with those in health. Over the past few months, the Housing LIN (Learning and Improvement Network) have highlighted a variety of creative practice and how best to make links to get housing accepted as an integral partner, player and key determinant of health.

There are many examples of great partnerships between the sectors that have established both accommodation (such as extra care housing) and community based initiatives (such as boiler prescriptions to fend off cold and damp), which have worked flexibly together to support people where they are to achieve good health and wellbeing outcomes. These include working with local hospitals, Clinical Commissioning Groups, and public health teams in local government. In some areas, housing organisations have also linked in with local Healthwatch teams, to advocate on specific health and patient issues.

I had not heard much about Healthwatch prior to this and have since been excited to find out about the many possibilities it can achieve. Healthwatch England was set up under the Health and Social Care Act 2012 to oversee the work of all 150 or so local Healthwatch teams in each local authority area across the country. There are 8 statutory objectives each team has to deliver on but there is specifically the mandate to be local and focus on the issues important to the communities where they are based. Teams involve local people to shape local health and social care services and can lobby on behalf of the public over specific issues, obtain feedback on user experiences (good and bad), support local involvement in commissioning, supporting people through complaints processes, as well as giving local perspectives to national campaigns. On the latter, Healthwatch England published an influential inquiry report last year on the experiences of older people and unsafe hospital discharge.¹

As an independent body, each local Healthwatch sets its own specific priorities - the projects and pieces of work it will get involved in so as to respond to priority issues in their localities. This is the part that really excites me. For example, Healthwatch Lambeth review of extra care housing explores residents' experience of living in extra care housing and seeks to find out whether extra care residents have a good quality of life; are able to maintain their independence at the same time as being safe; and feel they have a good social life and feel connected to their community. ²

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¹ Healthwatch England (2015) *Safely home: What happens when people leave hospital and care settings?* http://www.housinglin.org.uk/Topics/browse/HealthandHousing/HospitalCarePathways/?parent=8687&child=9671

² Healthwatch Lambeth (2015) Review of Extra Care Services http://www.housinglin.org.uk/HousingRegions/London/?parent=1027&child=9986).

There are great opportunities here for those working in housing, care and support to similarly work with local Healthwatch teams to find health and wellbeing solutions through housing related models (whether care & repair, tenancy support or help with hospital discharge to name but a few), along with supporting communities to identify their own strengths and assets and build on these to achieve their own dreams and aspirations (which more often than not includes a desire to have a healthy and happy lifestyle).

So why not take a few moments to look up your local Healthwatch team? Why not arrange to meet them and find out what their priorities are and share what your world of housing and care looks like? See if together you might build a bridge between local housing and local health and social care provision to find some very practical opportunities for improving health and wellbeing in your area.

To find out more about Healthwatch England and your local team, go to: www.healthwatch.co.uk)

Web: www.navig8consultancy.uk

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