A review of how pioneer and whole-person care councils are considering housing in the planning of local health and care services – April 2014

Summary

MHP Health, the specialist health policy and communications consultancy, has undertaken research to identify the extent to which housing is being considered in the context of locally integrated NHS and social care services. MHP Health has analysed the commissioning plans and decisions of those areas of the country tasked with piloting the Government’s and the Opposition’s visions for integrated care – the ‘integration pioneers’ and the ‘whole-person care innovation councils’. Analysis of their joint strategic needs assessments (JSNAs) indicates that housing is often overlooked in the integration process and in the planning of social care services. This research reveals the decisions being made by councils in charge of leading the integration agenda, and makes recommendations to ensure that housing interventions are taken into account in the drive towards integrated care.

Background

Amid a crowded and vivid integration debate, calls for the recognition of housing policy as integral to the move towards an integrated health and care system have become increasingly prominent. In 2012, the House of Commons’ Health Select Committee highlighted the benefits of including housing in the integration mix, noting that “a well-funded, fully integrated system of care, support, health, housing and other services is essential, not just to provide high quality support for individuals, carers and families, but also to provide good value to the exchequer and the tax payer”1.

In September 2013, Paul Burstow MP, the former Minister for Care Services, told the annual conference of the National Housing Federation that “we need to see this alignment between health, housing, care and welfare to deliver a wellbeing and wellness agenda”. Soon after, at the Labour Party Conference, the then Shadow Housing Minister, Jack Dromey MP, also admitted that the decoupling of housing and health in public policy had been a “mistake”.

The publication of Sir John Oldham’s report earlier this year (2014), One Person, One Team, One System, recommended that a future Labour government should place housing at the core of its ‘whole-person care’ system, involving all relevant services in the commissioning of integrated, patient-centred care. However, beyond national ambitions across the political spectrum, it remains to be seen whether housing will be viewed at the local level as a key factor in the drive towards integrated care. As the Oldham report points out, only 31% of existing health and wellbeing boards (HWBs) currently include a housing lead2.

New policies offer opportunities to take the fully integrated vision forward. In 2013, the Coalition Government announced the creation of ‘integration pioneers’ to act as exemplars in tackling the local barriers to delivering integrated care. These pioneers are intended to promote, with support from NHS Improving Quality (NHS IQ), the dissemination and uptake of guidance on how to integrate NHS and social care services across the country. To support this work, the June 2013 Spending Review established the £3.8 billion Better Care Fund to further incentivise the local integration of services.
Meanwhile, the Shadow Health Secretary, Andy Burnham MP, also announced the appointment of ‘whole-person care innovation councils’, tasked with finding innovative ways of joining up local services.

More than six months on from being announced, are the integration pioneers and whole-person care councils at the forefront of the vision of an integrated NHS and care service? And to what extent are these councils recognising housing as a key element of the integration of health and social care services?

Approach

To address these questions, MHP Health has analysed the joint strategic needs assessments (JSNAs) of the local authorities that are taking part in or supporting the 14 ‘integration pioneers’ announced by the Health Minister, Norman Lamb MP, in November 2013, and of the 26 councils designated as ‘whole-person care innovation councils’ by the Shadow Health Secretary, Andy Burnham MP.

JSNAs are a key tool for local commissioners in developing local plans and informing the areas where funding will be allocated. They must also inform the development of joint health and wellbeing strategies, which set out a health and wellbeing boards priorities and actions for specific areas.

This research has evaluated the extent to which these ‘pioneers’ are identifying housing as a key element of health and social care planning and of the integration of services through their JSNAs. This includes whether the JSNAs:

- Had a section on housing needs
- Recognised housing as a wider determinant of health, having an impact on people’s health and safety, and as a source of potential health inequalities
- Considered housing interventions to be a component of social care policy
- Interpreted housing as a key facet of the integration of health and social care, bringing care closer to home and patients’ individual needs

Findings

Most of the JSNAs analysed include a section on housing needs, although with varying levels of detail, and in different formats. The vast majority (94%) of the JSNAs recognise the impact of housing as a wider determinant of health and, in particular, of excess cold, fuel poverty, damp issues and overcrowding on people’s cardiovascular and respiratory health. Two thirds (66%) of the JSNAs also acknowledge the impact of poor housing on mental health.

“One in five (21%) still do not recognise housing as a key element of social care to support older people and others with complex health and social care needs to live independently for as long as possible.”

However, worryingly, one in five (21%) do not recognise housing as a key element in the planning and provision of social care; for instance, elderly people with complex needs. Among the JSNAs that do consider housing within the context of social care, there is little consideration of the needs of people with specific long-term conditions, such as dementia or diabetes. Nevertheless, there is recognition of the need for improved understanding of the housing needs related to particular long-term conditions. As the JSNA for Birmingham notes, “Further research is needed on how people with dementia can be better managed in their community, including their housing needs. This is particularly relevant as their condition deteriorates.”

Significantly, nearly three quarters (73%) of the JSNAs produced by the pioneer and whole-person care councils do not consider the role of housing as a key component of the integration of health and social care services.

![Percentage of councils that considered housing within the planning of integrated care services](image)

As these council areas continue to look at how to drive the integration of care services more...
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effectively, it is important that housing is considered within this process. There are already examples of where this is happening.

For instance, the JSNA for Devon recommends “mak[ing] explicit in both the Joint Strategic Needs Assessment and the Joint Health and Well Being strategy the contribution of housing to health outcomes (as a major social determinant of health) to inform joint commissioning approaches”\(^7\). The JSNA for Tower Hamlets also outlines the “rationale for stronger and broader joint working across health, social care and wider council services (eg employment agencies, housing)”\(^8\).

In addition, among those JSNAs that do recognise the role of housing in the integration of health and social care, less than a half (46%) have acknowledged or estimated the savings that housing interventions can bring to the NHS and social care services.

Conclusions and recommendations

At a time when the NHS and local authorities are facing increasing demand and a growing pressure on their finances, the integration of services has rightly been identified as a key way of both improving outcomes and achieving efficiencies. For patients, integration can do more than just provide good value for money; it can allow them to plan their care around their life, and remain healthy and independent for as long as possible. The role of housing in achieving this is paramount.

Evidence has already shown that integration and partnership working involving housing interventions can make a real difference to people’s lives, as well as NHS and social care budgets\(^9\). Currently, the vast majority of pioneer and whole-person care councils, which are deemed to be at the forefront of the integration of health and care services, have yet to recognise the key contribution that housing can bring to taking the integration agenda forward.

In order to begin addressing this, MHP Health recommends:

- All councils, including the integration pioneer and whole-person care innovation councils, should ensure that they take account of the role of housing in improving people’s health outcomes and general wellbeing
- NHS IQ should encourage the integration pioneers to undertake a thorough assessment of the local housing provision and quality of care services being provided in the home
- Better Care Fund allocations should, in part, be tied to initiatives that involve a variety of local partners, such as housing associations and providers
- Beyond the integration exemplars, all health and wellbeing boards should recognise in their JSNAs the contribution of housing to health and social care outcomes, and of housing as a key enabler of integrated, patient-centred care. This recognition should include the potential savings that housing interventions could bring to the NHS and social care services
- Health and wellbeing boards, housing providers and local authorities should work together to identify the need for specialist and accessible housing for people with long-term conditions or complex needs. This should then feed into local planning strategies and priorities
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About MHP Health

MHP Health is MHP Communications’ multi-award winning specialist health policy and communications consultancy. The world of health and social care is changing. Health budgets are tighter, but patient expectations are higher. The need to improve health outcomes more urgent, but competing priorities more challenging. Our clients – from multinational corporations to world class hospitals, professional bodies and healthcare charities – are all looking to shape the health and social care environment. We help them to develop policy and to communicate, delivering business-critical results and health outcomes which transform live.

About ‘health and…’

In the changing world of health and social care, traditional barriers and boundaries are being broken down. Preventative health is no longer confined just to the GP surgery or the community clinic, but into the home, the school and the wider community. The introduction of a dedicated and ring-fenced budget for public health gives councils power to commission new and innovative ways of improving people’s wellbeing.

To explore this further, MHP Health has commissioned a bespoke programme of activity exploring how different sectors – from housing to gang violence – impact on people’s health and wellbeing, and what needs to be done to address this. Projects include a review of the care for people with special educational needs and an analysis of how health and wellbeing boards are taking a public health approach to tackling gang and youth violence.

Contact us

In order to assess the extent to which these local authorities were including housing within their health and social care plans, we analysed each JSNA of the integration pioneers and whole-person care councils. If you would like to discuss the findings from this research and what its implications might be on your work, please do not hesitate to get in touch.

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References

1 Health Select Committee Report on Social Care, Fourteenth Report of Session 2012, Volume 1, 2012
www.publications.parliament.uk/pa/cm201012/cmselect/cmhealth/1583/1583.pdf
2 Independent Commission on Whole Person Care for the Labour Party, One Person, One Team, One System, February 2014
3 Further information on the integration pioneers can be accessed here, and the full list of the whole-person care innovation councils is available here. It is worth noting that two local councils, Islington and Brent, participate in both the integration pioneer and whole-person care schemes
4 Department of Health, Statutory Guidance on Joint Strategic Needs Assessments and Joint Health and Wellbeing Strategies, 22 March 2013
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8 London Borough of Tower Hamlets, Life and Health in Tower Hamlets - Joint Strategic Needs Assessment Summary 2011, February 2012
9 National Housing Federation, Providing an alternative pathway - The value of integrating housing, January 2013