



**EELGA Roundtable Discussion:
Housing and it's impacts on Health Inequality
8th February 2024**













Norfolk and Waveney's Integrated Care System

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Context

Healthy housing supports a state of complete physical, mental and social well-being and provides a feeling of home, including a sense of belonging, security and privacy. When people experience issues with housing this can lead to poor health.

Housing Issue	Associated Health Problem
 Structural Deficiencies	More slips and falls, increasing risks of injuries 
 Poor Accessibility	Disabled and elderly people at risk of injury, stress and isolation 
 Housing insecurity e.g. due to affordability or weak tenure	Increased stress and anxiety 
 Housing that is difficult or expensive to heat	Poor respiratory and cardiovascular outcomes 
 Indoor air pollution	Poor respiratory and cardiovascular health and allergic/irritant reactions e.g. asthma 
 Overcrowded houses	Risk of exposure to infectious diseases 

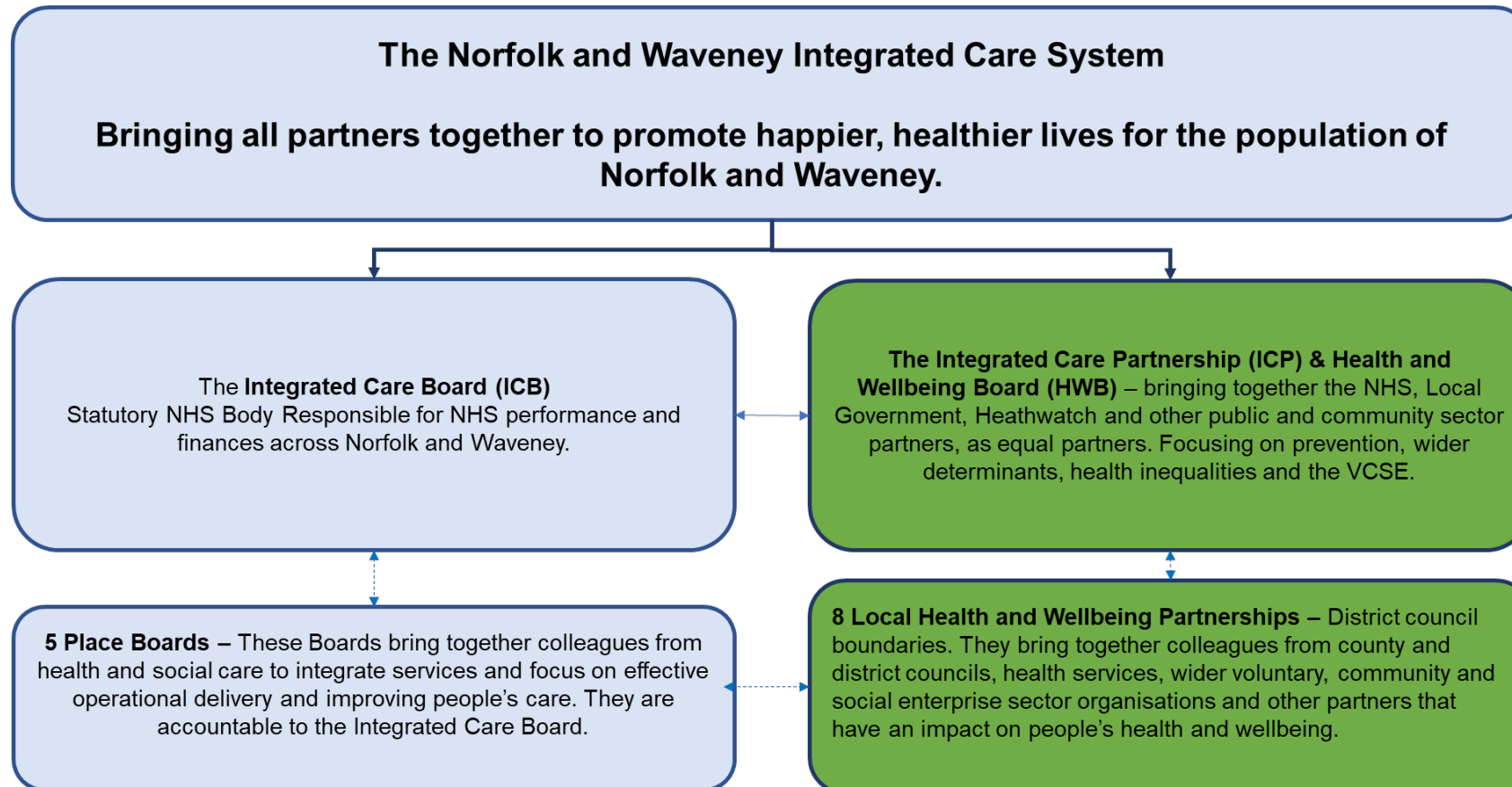
Summary of housing issues and possible associated health problems.

Source: Public Health Intelligence, Norfolk County Council

A system wide response

Housing is now being discussed in health forums and acknowledgement that this is a system problem to address. Examples:

- Norfolk Joint Needs Assessment on Healthy Homes and Housing
- Health Inequalities Strategic Plan
- Health and Wellbeing Partnerships Strategies





Improving lives **together**

Norfolk and Waveney Integrated Care System

INTERACT

Integrated Anticipatory Care Team

*“Working together to keep you
healthy, happy and at home”*

Background to the need for the service



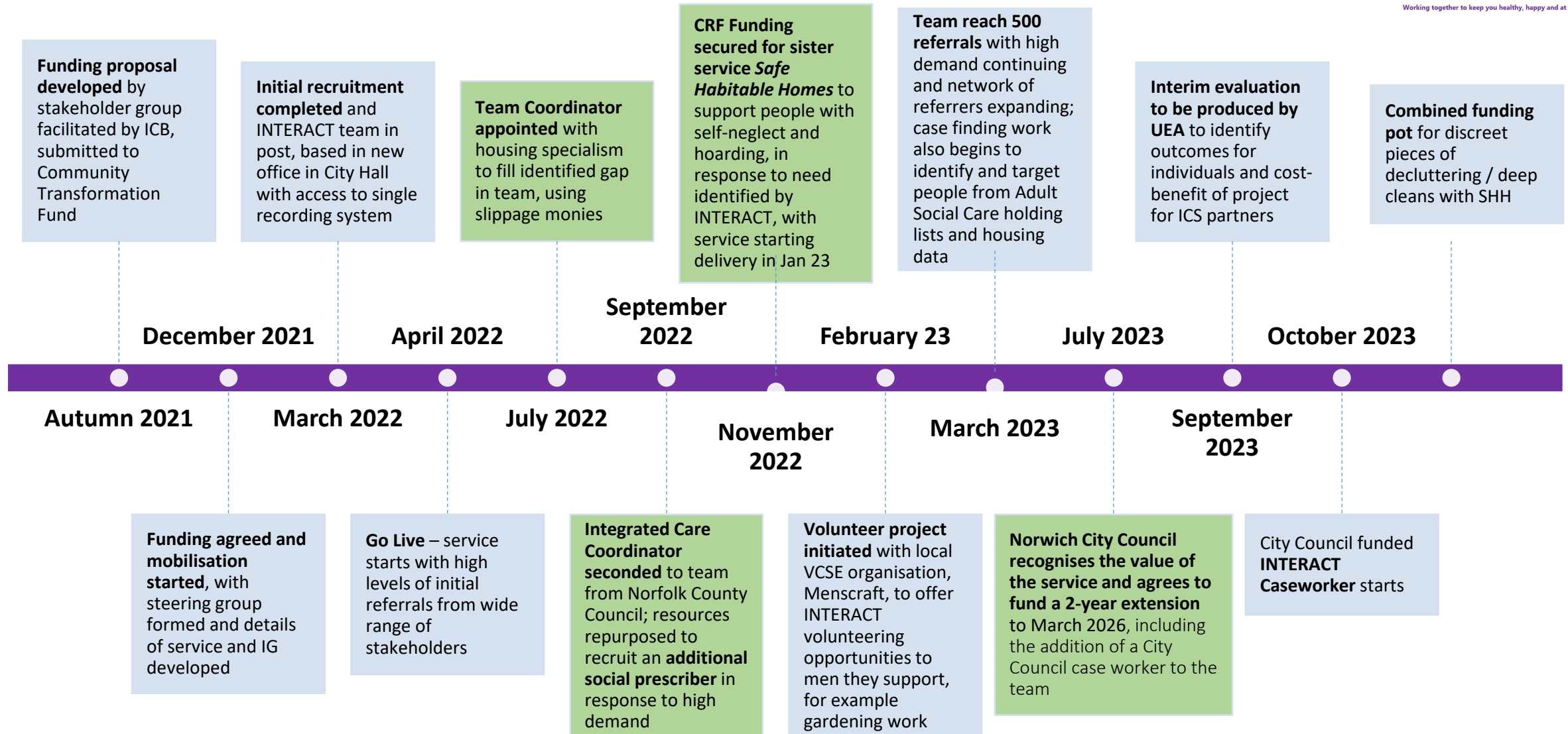
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Working together to keep you healthy, happy and at home

*‘Ensuring there is holistic care that fits around people’s needs includes ensuring that people receive the right care and support, and can maintain healthy independent living, beginning with where they live, and the people they live with. Getting these housing arrangements right for individuals and communities is one example that requires the joining up of not just health and care partners, but a wider set of local government functions and housing providers. Today, too many people with care and support needs live in homes that do not provide a safe or stable environment. **People's homes should allow effective care and support to be delivered regardless of their age, condition or health status.** We want people to have choice over their housing arrangements, and we also want to ensure places ‘think housing and community’ when they develop local partnerships and plan and deliver health and care services.’*



INTERACT – The journey so far



Meet the Team

- 1 x NHS Care Coordinator
- 3 x Social Prescribers from VSCE
- Volunteer Development Worker from VCSE
- 1 x Team Coordinator/Resettlement Specialist from Norwich City Council
- 1 x Integrated Care Coordinator from Norfolk County Council
- 1 x Caseworker from Norwich City Council to support with proactive case finding from Housing and Social Care
- A 'Making it happen' pot



Working together to keep you healthy, happy and at home



How can INTERACT help?



Create an action plan from Dialog+ to help the person achieve their goals



Adapt their home and environment so it is suitable for their needs



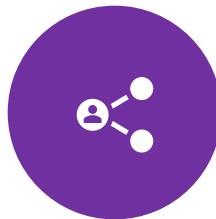
Provide help moving to more suitable accommodation



Provide assistance with benefits entitlement and claims



Give guidance and support to get involved with their local community



Provide practical help, e.g. with decluttering and organizing

Who is INTERACT supporting?



- Over **587 people referred** in 20 months since service launched, with **Adult Social Care being the biggest referrer (41% of referrals) followed by housing teams**
 - Everyone supported by INTERACT has one or more **long-term health issues**, with over half on long-term sickness or disability benefits
 - 25% of people have a **carer**
 - 71% of people referred are **social housing tenants**
 - Average satisfaction with **ability to remain independent at home** is 4/7 (based on Dialog+ scores)
 - Case finding from a number of City Council teams with our current emphasis on **affordability and suitability of housing**

Why are people being referred?



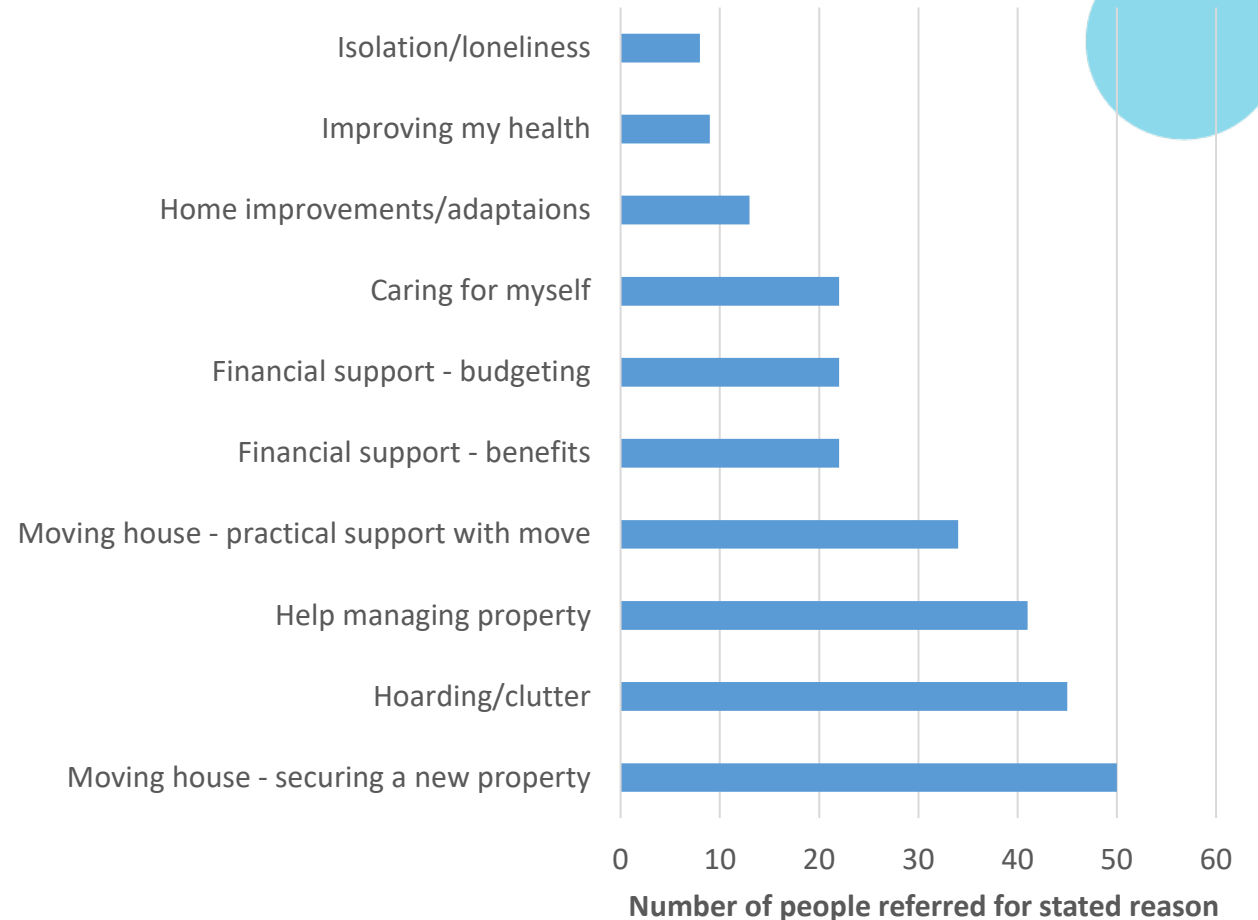
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Top issues for referral all relate to people's ability to remain independent at home:

- Help **moving to a more suitable property**
- Help with **managing or adapting a property** (including clutter or hoarding)
- Also related issues around **finance, self-care and social isolation**

Primary reason for referral to INTERACT





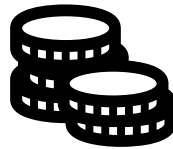
24 people to move home, including into specialist accommodation or 'rightsizing'



40 homes made more suitable including via adaptations



45 people provided with cleaning or decluttering



£20,500 of help with food and energy costs provided via Householder Support Fund



35 Client Hardship Service applications completed for financial assistance



10 Blue Badge applications submitted



9 bus pass/driving licence secured



12 people supported with wheelchairs/mobility aids



60 people supported with information about community activities to reduce isolation

INTERACT secured a range of improvements, such as income and debt, mobility, housing and social connection.

Karolina – a case study

Karolina's situation

- Karolina is a 49-year-old woman living in a third floor, 2 bed City Council flat
- She has complex physical and mental health needs including diabetes, mobility issues and COPD
- Having previously worked full time, she was struggling to manage her property and told us that she was lonely, grieving her partner and unable to leave the flat.

Karolina's goals

- To improve her mental and physical health
- To declutter in preparation for a move
- To identify a suitable ground floor property
- To reduce her social isolation

Benefits

- Improving Karolina's health and wellbeing
- Increasing her ability to remain independent at home
- Building her resilience to future challenges
- Reducing the need for intervention by other services

Working with Karolina, INTERACT:

- Completed a medical assessment form and gained a disability rating on her Home Options application
- Moved from 3rd floor flat to adapted bungalow
- Successful Blue Badge application
- Helped her access the diabetes clinic, REST, a weight management service and linked in with an Age UK Health Coach
- Sought grant funding to carpet her new home
- Reviewed benefits and successfully applied for PIP
- Provided gardening advice and support via MensCraft who made waist height planters
- Linked with Voluntary Dev Worker to support volunteering opportunities – Age UK Befriending

Our sister service – Safe and Habitable Homes



- Significant numbers of people needing support with clutter, hoarding and/or self-neglect – often exceeding the offer from INTERACT
- Led to the development of a second service, closely linked to INTERACT called Safe and Habitable Homes
- A multi-agency team bringing together colleagues already working in this area such as social workers, housing colleagues, fire and rescue service - obtained a small amount of funding for two additional case workers from St Martins, a local charity
- Uncovering a hidden issue – working with or have supported around 60 people in Norwich, but now aware of over 130 more people who need our support
- Working long-term with clients as a wrap-around service to build rapport, declutter at their own pace, and provide support to approach the underlying causes of the client's SN&H behaviours

Safe and Habitable Homes: case study



Background:

- Mr and Mrs G (both in their 80's) have been living in their privately owned property since 1993.
- Over the years, there have been concerns around the property, but Mr G has been unwilling to engage with any services, distrusting the local authority after compulsory purchase of his uncle's properties in the 1960s.
- The property was discovered to be in state of disrepair, hoarded and dirty with a significant rodent infestation present.
- In November 2022, Mr G's wife was admitted to hospital with a long-term mental illness. She was discharged to a residential setting as care could not be delivered safely at home. She doesn't require or want residential care.

Safe and Habitable Homes: what we did



- Regular MDTs arranged by the Safe and Habitable Homes team including, Norwich City Council's Independent Living Manager, Environmental Protection and Home Improvement team, and Mr and Mrs G's allocated social workers from Norfolk County Council ASSD.
- ASSD built rapport with Mr and Mrs G enabling Mr G to agree to the work and temporarily move into the residential home with his wife whilst it is completed.
- Obtained quote from a local deep cleaning and decluttering provider on our shared provider framework.
- Environmental Protection arranged and completed treatment of the rat infestation and completed an HHSRS assessment identifying 6 x Category 1 hazards and 6 x Cat 2 hazards in the property.
- Home Improvement Team case worker clarifying works needed to improve the property, grants and charitable funding options.

Safe Habitable Homes: next steps and learning



- Work remains ongoing, some dissonance is present between statutory housing duties and wellbeing concerns.
- Need to secure funding for works and deep clean to be completed,
- Enforcement options to be clarified (We are trying to take a pragmatic and realistic approach re: the works)
- SHH have a pivotal role coordinating multi agency / team working
- Home Owners have previously slipped through the net for some support services
- We must continue to work together to maintain trust / manage expectations



Thank you



Thank you for your time today,
any questions?



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