

BOROUGH OF KETTERING

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Report Originator	John Conway Head of Housing	<i>Fwd Plan Ref No:</i>	
Wards Affected	All	16 th February 2016	
Title	HEALTH AND HOUSING PROJECT		

1. PURPOSE OF REPORT

- 1.1 This report advises the Committee of a new project which is being set up by Kettering Borough Council, Kettering General Hospital and Northamptonshire Healthcare Foundation Trust to establish closer operational links between the Council and local health providers in order to produce better health outcomes for residents and achieve more cost effective services.
- 1.2 The Research and Development Committee is invited to comment on the content and future direction of the project.

2. INFORMATION

- 2.1 Poor housing, unsuitable housing and precarious housing circumstances affect our physical and mental health. Generally speaking, the health of older people, children, disabled people and people with long-term illnesses can be severely compromised by poor housing conditions. The home is a driver of health inequalities, and those living in poverty are more likely to live in poor or inadequate housing.
- 2.2 The essential features of the right home environment are:
- It is warm and affordable to heat
 - It is free from hazards, safe from harm and promotes a sense of security
 - It enables movement around the home and is accessible
 - There is support from others, if needed
- 2.3 The right home environment can:
- Protect and reduce the need for primary care and social care interventions, including admissions to long-term care
 - Prevent hospital admissions
 - Enable timely discharge from hospital and prevent re-admissions to hospital
 - Enable rapid recovery from periods of ill-health or planned admissions
- 2.4 In recognising the close links between housing and health, the Council and health service providers have been looking at how they may work more closely. The overall aim of this project is:

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To integrate health and housing locally to utilise resources effectively and ultimately improve the health and wellbeing of local residents.

2.5 A workshop, involving a range of NHS agencies as well as council officers and tenant representatives was held in December to look at how we may provide better services through collaborative working. Three work streams were identified:



2.6 These work streams focus on those areas where health and housing providers can work together to the best effect; namely to support residents in maintaining a healthy lifestyle, to provide support to households at risk and to facilitate safe discharges from hospital.

2.7 For each workstream, a number of potential projects have been identified. These are set out below:

Through the home and community, support residents to improve their health and well	
How we will do this :	Example projects:
<ul style="list-style-type: none"> Through education and community engagement build resilience within the community to enable residents to improve their own health and wellbeing Support vulnerable residents to remain at home Support residents to move to a home more suitable for their needs 	<ul style="list-style-type: none"> Deliver health and wellbeing messages through Making Every Contact Count All organisations to communicate winter health messages Support vulnerable Council tenants to downsize to accommodation suitable for their needs Place-based planning across health and housing to ensure supply continues to match demand

Identify and support residents at risk of poor health and wellbeing within our communities

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How we will do this :	Example projects:
<ul style="list-style-type: none"> • Identify residents at risk of adverse outcomes (such as emergency admission to hospital and premature admission to long-term care) through: <ul style="list-style-type: none"> ○ Population segmentation and risk stratification ○ shared assessments and information sharing • Target each population segment with appropriate interventions: <ul style="list-style-type: none"> ○ ‘at risk’ - Undertake timely, person-centred care planning and use a multi-disciplinary team approach to supporting residents ‘at risk’ to remain at home ○ ‘emerging risk’ - Undertake timely, person-centred care planning; offer advice and support on self-management and establish anticipatory care plans 	<ul style="list-style-type: none"> • Pilot a detailed health questionnaire with Council tenants and share findings with health partners • Share information between health and housing from risk assessments undertaken with sheltered housing residents • Explore how assistive technology, telecare and telehealth can be used to provide greater independence and dignity for residents while reducing the need for ‘hands on’ care, preventing unplanned hospital admissions and helping residents remain in their home for longer. • Explore links between The Council’s Lifeline community alarm service and telehealth/telecare solutions being introduced as part of the Integrated Care Closer to home programme • Involve housing professionals within the multi-disciplinary ‘collaborative care’ teams

Facilitate discharge from hospital, community and mental health services into safe and suitable home environments	
How we will do this :	Example projects:
<ul style="list-style-type: none"> • Ensure a safe and efficient transition from hospital and community or mental health services to the home or care environment • Ensure patients are discharged in a timely manner into suitable and safe accommodation • Involve housing professionals in discharge planning to ensure a smooth transition from hospital to home 	<ul style="list-style-type: none"> • Explore how housing issues are causing delayed discharge and mitigate their impact. For example, explore if there are barriers with the current Disabled Facilities Grant system which is causing delayed discharge (including impact of community occupational therapy assessment delays) • Explore how housing can offer solutions to KGH for patients experiencing delayed discharge, such as providing a temporary housing solution for patients unable to return home

2.8 During 2016 the health and housing project team will start developing five projects:

- Data sharing agreement; establish a data sharing agreement to enable us to lawfully share data between health and housing
- Facilitating timely discharge from hospital (acute, community, mental health) – exploring how housing can help

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- Through the planned 'Care Coordination Centre' explore how assistive technology, telecare and telehealth can be used to provide greater independence for residents
- Making Every Contact Count - Upskilling front-line housing professionals to deliver health messages to tenants and residents
- Social prescribing services: scoping the opportunity for delivery

2.9 These projects have been selected for a number of reasons; they will have the greatest impact on our residents, facilitate the delivery of other proposed projects, and can be delivered using existing resources.

2.10 The outcomes of these projects will include timely and coordinated discharge for residents leaving acute and community hospitals, thus reducing the time residents remain in hospital unnecessarily.

2.11 The health and housing partnership has launched at a time of significant change for local health providers. An ambitious transformational programme 'integrated care closer to home' will focus on improving personalised and coordinated health services in Kettering borough. Kettering Borough Council's involvement at this time will ensure housing is fully integrated into planned health services.

3. POLICY IMPLICATIONS

3.1 As the Health and Housing project develops there will be scope to develop closer operational links between the Council and the health sector locally. In addition, it is planned that learning from this project will be shared with neighbouring local authorities in North Northamptonshire.

4. CONSULTATION AND CUSTOMER IMPACT

4.1 A presentation was made to the Tenants Forum at its meeting in December. Tenant representatives strongly endorsed the aims of this project.

5. FINANCE and HR RESOURCE IMPLICATIONS

5.1 None at the present time.

6. LEGAL IMPLICATIONS

6.1 None at the present time.

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7. RECOMMENDATION

The Research and Development Committee is invited to comment on the content and future direction of the Health and Housing project.

Background Papers:

None

Previous Reports/Minutes:

Last work programme in 2014/15 year.