

HEALTH AND WELL-BEING BOARD

10 October 2017

HOUSING TASK AND FINISH GROUP

Board Sponsor

Dr Frances Howie
Director of Public Health

Author

Tim Rice
Senior Public Health Practitioner

Priorities

Older people & long term conditions
Mental health & well-being
Being Active
Alcohol
Other (specify below)

(Please click below
then on down arrow)

Yes
Yes
No
No

Groups of particular interest

Children & young people
Communities & groups with poor health outcomes
People with learning disabilities

Yes
Yes
Yes

Safeguarding

Impact on Safeguarding Children
If yes please give details

Yes

Impact on Safeguarding Adults
If yes please give details

Yes

Item for Decision, Consideration or Information

Consideration

Recommendation

1. The Health and Well-being Board is asked to:
 - a) Note this first interim report and to make any observations on the progress and next steps and
 - b) Strengthen the governance arrangements and support the implementation of the MoU through extending Associate membership of the Board to a single senior officer representative of the Local Housing Authorities.

Background

2. The Health and Wellbeing Board has requested a housing Task and Finish (T&FG) group to be established, in part, to consider the use of the Better Care Fund (BCF) and Disabled Facilities Grant (DFG). Subsequent consideration by the Director of Adult Services, the Director of Public Health, the Chairman of the Worcestershire Strategic Housing Partnership and the Head of Strategic Housing at Worcester City Council, concluded that a wider ranging focus would be more helpful, albeit the use of the BCF being part of the scope. It was therefore agreed that the approach would be to develop and embed the principles of the national *"Memorandum of Understanding (MoU) to support joint action on improving health through the home"* (see Appendix 1) within Worcestershire. The focus will therefore initially be to consider how to improve cross systems working and although this does not involve specific service reviews or transformation projects, proposals for such actions can be recommended as the work progresses.
3. The HWB has already agreed to support the principles of the MoU and it has also been adopted by the Worcestershire Strategic Housing Partnership. But the general view amongst practitioners is that there hasn't been a strong focus and joining up across the partnership on the implementation of the MoU and this piece of work should provide the impetus to do so.
4. The MoU requires closer co-operation between health, social care and housing sectors to improve the delivery of health and wellbeing outcomes and reduce health inequalities. It sets out some key objectives including: "enabling improved collaboration and integration of healthcare and housing in planning, commissioning and delivery of homes and services" and "developing the workforce across sectors so that they are confident and skilled in understanding the relationship between where people live and their health and well-being and are able to identify suitable solutions to improve outcomes". The Care Act 2014 also highlights the need for a shared vision and culture of co-operation across the sector to focus on improved health and wellbeing, with housing being an important element of this approach.
5. The recently published Worcestershire Housing Partnership Plan 2107, specifically highlights the priority, "create a partnership approach to enable people to live as independently as possible", with a high level action to "improve collaboration, co-ordination and integration of healthcare and housing in the planning, commissioning and delivery of homes and also services that focus on early intervention". The MoU work will be assisting in meeting those objectives.
6. The newly published Herefordshire and Worcestershire Sustainability and Transformation Plan (July 2017) further develops this approach under its Priority area 2: "Our approach to prevention, self-care and promoting independence", requiring systems improvement and closer working with front line services to deliver the prevention agenda. The Partnership Board and Prevention Board have noted the need to work closely with housing agencies to enable a systems approach to prevention and independence.
7. Defining the main scope of the work is important as this is a very complex system and housing itself is a generic function that can incorporate strategy and policy, homelessness, housing allocation, new, existing and specialist homes, adaptations,

housing conditions and housing support. Appendix 2 illustrates the main linkages to person centred housing.

8. The initial focus is to try and understand how the system currently operates and interfaces and in particular where housing can support key objectives of preventing hospital admissions, effective hospital discharge and enabling people to remain independent at home. DoH, PHE and NHS England guidance on health and housing highlight these are key areas for co-operation and Table 1 below expands this further with some examples.

Table 1

Preventing Hospital Admissions	Effective Hospital Discharge	Remaining Independent at Home
<p>Home Interventions e.g. - Social Prescribing, Falls prevention</p> <p>Improving Affordable Warm Homes e.g. - Warmer homes strategy, Boilers on prescription</p> <p>Improving Suitability and Accessibility e.g. - Adaptations, DFGs, handyperson service, OTs,</p> <p>Housing Support e.g. - Extra care/sheltered housing, Safe and Well scheme, DC housing needs services</p>	<p>Co-ordination of Services e.g. - Hospital discharge schemes Step Down Services/ Reablement</p> <p>Accessible Housing Design e.g. - DC planning policies</p>	<p>Informed Decisions About Housing Options eg - Home improvement Agency/DC housing options. Assisted Technology & Community Equipment</p> <p>Social Inclusion eg - PH and prevention services -Healthy lifestyles, MECC, loneliness and isolation, Housing Association support for tenants.</p> <p>Supported Housing. eg - Housing Associations/DC /private sector - sheltered housing/extra care,</p> <p>Promoting Healthy Lifestyles eg – RSL/DC/VCS events;</p>

9. Regarding progress to date, there has been an initial meeting with key statutory agencies (WCC - Public Health and Adult Social Care, District Councils, CCG and Worcestershire Health and Care Trust) on 28 April to consider the background and scope of the work and a subsequent half day workshop on 23 June to begin the conversation about the current landscape and assist partners understand the various statutory responsibilities and key services, in what is a very large and complex system. Follow up work to map commissioned services and spend, best practise, what is commissioned, what the data tells us and system blocks has begun, although gathering and interpretation of the information is challenging. There is a wide range of data across the different services and sectors and this requires further analysis in

understanding the effectiveness of the system. Consideration will be given as to where support, such as Public Health analysis can be brought in.

10. What is clear from initial discussions and information gathering is that there is a lack of consistent understanding amongst agencies as to how housing, health and social care operate across the wider system, albeit there are certainly areas of very good practice. Some early issues and ideas for further consideration include hospital discharge systems, the volume and nature of work for Occupational Therapists, upskilling staff as Trusted Assessors, (for minor aids and house adaptations), effective use of funding, bureaucracy across the system, variable communications between partners and providing support and information for GP's on housing.

11. One issue, that it is proposed requires immediate consideration by the Board, is how the current strategic governance arrangements, support, (or otherwise), the effective implementation of the MoU and the current work stream. In order to properly effect improved strategic co-operation and commissioning, it is suggested that the Housing Authorities need to be represented on the key Boards, so that they are aware of and can influence and support policy and strategic developments. If these do not exist, the foundations of effective working on housing and related matters will be restricted and it will be difficult to make effective progress with the MoU. Housing Authorities, (District Councils), have not always been formally included, thus leaving them remote from effective partnership working. It is recommended that this is now considered by the Board.

12. The main Boards where these strategic MoU interfaces will take place are the HWB, the Worcestershire Strategic Housing Partnership and potentially Alliance Boards, which will oversee the shaping of local joint delivery and specifically in South Worcestershire, the new local neighbourhood teams (consisting of social workers, GP's, promoting independence enhanced care team and district nurses). It is proposed that the HWB offers associate membership, (non-voting), to a single representative from the Housing Authorities' and that the Alliance Boards' consider a similar arrangement. The CCGs have a representative membership place on the Strategic Housing Partnership, but attendance has lapsed and discussions are taking place to resolve this.

13. Current progress on this work stream is as follows:

- Review of governance arrangements: for HWB agreement
- Mapping of key services and funding: in progress
- Assessment of options for service collaboration and improvement: October 2107 – February 2018.
- Final report and recommendations: HWB 27 February 2018.

14. A further workshop meeting is taking place on 4 October and will consider in more detail the issues that agencies have identified as challenges and how these could be addressed and also where there are current system changes, including recommissioning, that require further consideration or present opportunities for collaboration. A verbal update to this report will be provided at the current Board meeting.

Legal, Financial and HR Implications

15. N/A

Privacy Impact Assessment

16. N/A

Equality and Diversity Implications

N/A at present.

Contact Points

County Council Contact Points

County Council: 01905 763763

Worcestershire Hub: 01905 765765

Specific Contact Points for this report

Tim Rice, Senior Public Health Practitioner

Tel: 01905 843107

Email: Trice@Worcestershire.gov.uk