

**HEALTH AND WELL- BEING BOARD
27 FEBRUARY 2018****HOUSING MEMORANDUM OF UNDERSTANDING
TASK AND FINISH GROUP PROGRESS REPORT**

Board Sponsor

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Priorities

Older people & long term conditions	Yes
Mental health & well-being	Yes
Being Active	No
Alcohol	No
Other (specify below)	

Groups of particular interest

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

Safeguarding

Impact on Safeguarding Children	Yes
If yes please give details	

Impact on Safeguarding Adults	Yes
If yes please give details	

Item for Decision, Consideration or Information

Consideration

Recommendation

1. **The Health and Well-being Board is asked to:**
 - (a) **Note the contents of the report and the progress on joint agency work on the housing and health memorandum of understanding (MoU)**
 - (b) **Review current and future commissioning arrangements and opportunities to support the ambition of the MoU.**

- (c) **Formally incorporate Local Housing Authorities into relevant BCF planning.**
- (d) **Ensure that housing is embedded to the development work relating to the new Neighbourhood teams and the Three Conversation model.**
- (e) **To hold a Board development session on housing and embedding the MoU principles and practise, specifically relating to 3-5 above, following which the Board agrees the next steps for the MoU Task and Finish group and/or project managed groups to progress this work.**

Background

2. Further to the report to the Health and Wellbeing Board on 10/10/17, this report summarises progress across the partnership in embedding the principles of the MoU and proposes recommendations for the Board to consider and action as necessary.

3. The Board is reminded of the key objectives of the MoU, namely **"to enable 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 relationships between where people live and their health and well-being and are able to identify suitable outcomes to improve outcomes"**. The Government wishes to see enhanced co-operation with housing and is refreshing and relaunching the MoU nationally in 2018.

4. There have been three half day workshops in June and October 2017 with the most recent workshop in January 2018, which included a contribution from the national strategic lead for Foundations, a Government sponsored organisation that supports Care and Repair agencies. There has been attendance at these workshops by the key statutory agencies. Much of the focus has been on setting out and understanding the roles and responsibilities of housing and other agencies and how in the interim practical progress on joint working can be made.

5. What is apparent from the cross agency discussions on the MoU principles is that the system is more complex than had been anticipated, with variable understanding of the current systems and in particular the roles and responsibilities of District Local Housing Authorities (LHA's) and opportunities that closer co-operation would bring, particularly in supporting people's independence at home. It is clear that strategic planning and commissioning is historically fragmented and although there is some effective co-operation between agencies, this is not consistent and led strategically from the MoU perspective.

6. There are some specific developments taking place as a result of the work by the MoU T&F group. A review has been started by Public Health to map the whole system to better understand challenges and inefficiencies relating to adaptations and repairs to people's own homes. This has already started to identified some key themes which, if addressed can improve the cost effectiveness and quality of services in place to help keep people independent at home. Aligned to this work is the current review of community Occupational Therapy (OT) by the Health and Care Trust in conjunction with partners, including LHA's. This should ensure a more collaborative approach to improvement and innovation and assist the OT service which has been struggling with capacity and resulting in delays to parts of the housing system, notably around DFG's. A response to these problems has been for

the employment of additional OT capacity by the LHA's, which while resolving the immediate problem of delays, further fragments an already complex system.

7. A further positive example of progress now being through the MoU is Worcester City Council housing team working with the St John's multi-disciplinary Neighbourhood team and formalising the housing input as part of the single point of access for information, advice and support. It is clear that both health and housing have been supporting the same residents for different purposes and closer co-operation will support more targeted support going forward. Additionally housing is able to provide data on housing conditions, homelessness and affordable warmth, to enhance data that has been mapped in Neighbourhood Team areas.

8. The CCG will now be looking to progress this approach with the other LHA's through the Strategic Housing Officers Group, to consider how this can be developed across the other Neighbourhood Team areas in the County.

9. There is also scope to improve cross professional understanding, provide joint targeted briefings and training in multi-disciplinary teams.

10. Improved strategic governance is required to ensure the MoU principles are embedded and close co-operation with the Worcestershire Strategic Housing Partnership will be required. Positive developments have recently included the Board inviting the chair of the Housing Partnership to join the Board as the representative of the LHA's and a senior CCG representative now attends the Housing Partnership. A key priority for the Worcestershire Housing Partnership Plan is to "create a partnership approach to enable people to live as independently as possible (prevention/early intervention)". The MoU is a bridge to meeting that ambition and offers an opportunity to enhance the system to support Worcestershire residents live more independent and healthy lives. This improvement to governance is essential to cement strategic co-operation on housing matters.

11. The Better Care Fund guidance requires co-operation with the LHA's in the planning of the use of DFG's and the Government is requiring innovation and co-operation to support and relieve the pressures on health and social care. The statutory DFG programme significantly contributes to prevention of those pressures and keeping people independent and this is recognised by Government with significant increases in DFG budgets. The scope and impact of the DFG funding is highlighted in the BCF evaluation returns to the Board for 2016/17, with over 6,100 people estimated to have been supported to remain in their own homes. But there are, by agreement with LHA's, opportunities to be more flexible in the use of grants and join up systems and other services more effectively.

12. The LHA's are already innovating, with the use of DFG funding for dementia dwelling grants (the first such approach nationally and being evaluated by Worcester University), fast track hospital discharge grant funding and direct funding of additional Occupational Therapists for housing grant work to reduce delays in the system. But there is more potential to co-operate and jointly plan through the BCF.

13. The MoU T&F Group are also clear that there are opportunities to better join up commissioned services to further improve health and social care outcomes. It is suggested that the Board and its constituent members will need to consider a more

formal approach to strategic commissioning opportunities and to including the LHA's if the ambition of the MoU is to be met.

14. In scope for instance would be the recommissioning the Care and Repair agency which is about to commence. This is currently commissioned by the DC's and WCC and has a significant impact upon the prevention of hospital admissions and maintaining people in their own homes, through delivery of the DFG and minor works programmes and the provision of a range of advice and information. There is an opportunity to consider how this could be scoped in line with other commissioned services whose outcomes are related to preventing hospital admissions, effective hospital discharge and securing independent living. It is also an opportunity to review the current systems in light of the new Neighbourhood Teams and Three Conversation model.

15. Housing and its prevention focus will also a major consideration for the STP and moving to the Accountable Care system will require Worcestershire to be effective in its systems understanding and co-operation, as required by the MoU. Unlike Herefordshire there are six LHS's which inevitably adds to the complexity and makes it all the more important for strong and clear strategic leadership to provide a clear direction of travel.

Conclusion

16. The T&F group has focused upon the contribution that housing has and can increasingly make to improving health and social care outcomes. Some practical developments are taking place as a result and should enhance cross agency co-operation, thus demonstrating progress against the MoU objectives (see 8 above). But there is a need to embed a stronger strategic governance and commissioning approach to make full use of resources and assets that are available across the Worcestershire system. There is a strong commitment by agencies to build on the good partnership relationships and a history of collaboration across the County. With a commitment to incorporate housing in the STP, it would be timely for the Board members to consider how to embed MoU approaches at a senior leadership level. It is proposed that a Board development session on housing is held, to include a joint agency briefing and consideration of future working options, including what opportunities there are for closer commissioning arrangements, in particular with the LHA's.

Legal, Financial and HR Implications

17. N/A

Privacy Impact Assessment

18. N/A

Equality and Diversity Implications

N/A at present.

Background Papers

In the opinion of the proper officer (in this case the Director of Public Health) the following are the background papers relating to the subject matter of this report:

Report to Health and Wellbeing Board on Health and Housing, 10 October 2017
at minute no 460 available [here](#)

Contact Points

County Council Contact Points

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