





Homes and Health Making Housing Everyone's Business

Tackling Inequalities in Communities

Matthew Cross, Deputy Chief Executive, Broadland District Council Jamie Sutterby, Director of Communities & Wellbeing, South Norfolk Council









Health Behaviours 30%

- Smoking 10%
- Diet/Exercise 10%
- Alcohol use 5%
- Poor sexual health 5%



Socioeconomic Factors 40%

- Education 10%
- Employment 10%
- Income 5%
- Family/Social support 5%
- Community Safety 5%



Clinical Care 20%

- Access to Care 10%
- Quality of Care 10%



Built Environment 10%

- Environmental Quality 5%
- Built Environment 5%











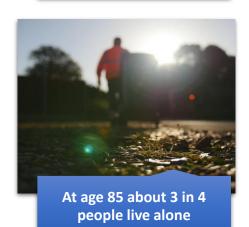




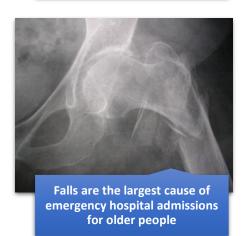


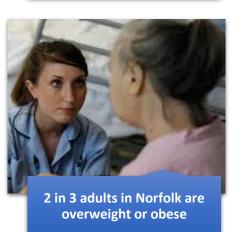














Core Services































Frailty & Falls

- Handyperson schemes
- Adaptations
- Supporting hospital discharge District Direct, hospital discharge packages
- Fit 4 Life



Employment & Aspirations

- Hardship funding
- Debt and welfare advice
- FIRST officers
- Job clubs and apprenticeships



Activity & Healthy Living

- Broadly Active
- HONOR programme
- Kids Clubs
- LILY (Living Longer in Later Years)



Mental Wellbeing

- Silver Social
- Dementia friendly communities
- Emotional resilience programmes

Warm and healthy homes: to work in partnership and build on existing initiatives such as promoting winter wellness, providing energy and money saving advice and installing central heating systems to fuel poor households



Programme Summary



Category 1 - Urban

- Private Sector 150 Gas boilers
- Social Housing 15 gas boilers
- Project Support/EPCs



Category 2 - Rural

- Private Sector 250 Oil/LPG boilers
- Social Housing 118 Air source heat pumps
- Project Support/EPCs

Discharge Hubs Local

Councils

Direct marketing

Agencies and self referrals

Triage Age, benefits, health, income, tenure, excess cold, heating system and fuel type,

1:1 Support

Further

advice

Emergency Funds

Insulation/ FTCH

Category 3 – Energy Efficiency and Health

- Emergency funds
- Training/evaluation
- •Direct 1:1 support
- •Marketing, admin and programme management
- Health and Housing data mapping





Delivery

Integration with MDTs: Integration with Multi-Disciplinary

Team activities in localities to identify need and any value added district offer £36,000 secured through Health Education network to be targeted in three district areas (King's Lynn, Broadland and South South Norfolk Develop process including Norfolk) to train individual health training plan and identification of MDTs Deliver projects in three pilot districts Improve understanding and

Health Education England

identification of the impact of homes and housing on health and wellbeing

Broadland King's Lynn Evaluation of pilot areas and share knowledge with other districts

Hold training conference for frontline professionals



Plan and roll out to other areas

Discharge from hospital: Coordinate and share learning on working with the three acute hospitals to help find a sustainable model and consider extending the district offer to acute patient flow to include discharge from mental health and community hospitals



Queen Elizabeth Hospital TrustKL&WN Council

are funding a 12month pilot using the District Direct model as a proof of concept

Community hospitals



Norfolk & Norwich University Hospital – 3

District Direct officers based within the integrated discharge until July 2019. Funding through 4 District Councils, ASC & 3 CCGs



James Paget Hospital

Healthy homes
 assistance undertaking
 works within a
 patient's property to
 facilitate safe
 discharge.



Hellesdon hospital

Aims:

- Alleviate winter pressures
- Reduction in delayed discharge
- > Fewer re-admissions
- Delayed need for formal health and social care packages

Opportunities

Norfolk-wide approach whilst remaining locally responsive e.g. Local delivery groups

Pilots of innovation at scale that are not wasteful and can be rolled out across the district

Shared learning through Countywide governance e.g. Health & Wellbeing Board; Early Help Improvement Board

Challenges

Disjointed environment, boundaries not always coterminous

Proving the case of prevention – identifying where the savings are found

Discussion

- What more do we need to do to better align Health & Wellbeing and Housing?
- What challenges will this present?
- What are the implications?