

Working with vulnerable people whose home living conditions have the potential to impact detrimentally on their health.

Housing & Health

Because vulnerable people typically spend a large proportion of their time at home; their homes are a particularly important factor in:

- Maintaining physical and mental health;
- Addressing health inequalities

So, by helping achieve safer, more suitable housing conditions, the Hub can help to:

- Reduce home accidents, falls and general health risks;
- Reduce demand on health, social care and emergency services;
- Maintain independent living within own home
- Facilitate hospital discharge and reduce readmissions;
- Make the home environment suitable for care services delivered in the home;
- Increase client wellbeing;
- Enhance childhood development.

“ I’ve not fallen since... it’s given me my independence back.

Service user.

How the Hub can help

Utilising a range of low-cost health-focussed interventions, including:

- Advice and support
- ‘Prescribed works’ and ‘Healthy Housing Assistance’ (means tested)
- Our ‘Handy-person Service’
- Partnership links

The Hub works to facilitate or deliver housing solutions. For example:

- Repair boiler/gas fires, or install central heating in cold homes;
- Removing trip hazards;
- Making electrical installations safe;
- Help with fuel poverty.

“ It was all sorted whilst the patient was in hospital.

Frontline worker.

What the professionals say:

A GP recently wrote in to say, “You have certainly made a difference... it was squalid at best and the risk to their health enormous [and] a very high fire risk...the client would probably not have survived. So, well done. Also, it endears in them a feeling of well-being and I have noticed they are now complying better with medical input.”

An Adult Social Care Worker said, “Thank you... you were able to work holistically with her... accessing so many other teams; always involving the client in decision making; and building up a rapport with her. This has been a brilliant piece of joint working.”

“Without you it would have been impossible to consider living there again...your help & support has been invaluable in helping maintain her independence” Occupational Therapist

“ Treating medical conditions associated with poor housing is assessed at £2.5billion per annum

(Friedman, 2010)

NATIONAL HOUSING FEDERATION

ECORYS

Local Government Association

Evaluation

Use of A&E	Acute Hospital	Admissions
39.5% reduction	53.8% reduction in stays	20% fewer hospital admissions
EMAS ↓ reduction in contact and conveyance to hospital	91% of clients still in own homes at 12 months	86.3% felt benefit in health, wellbeing, anxiety, confidence

A study in 2013/14 found that clients with a history of falls who received services from the Hub, saw a reduction of **39.5%** in their use of A&E and **53.8%** in acute hospital stays; and **86.3%** felt their health and wellbeing, levels of anxiety, peace of mind, security and confidence at home had benefited.

A study in 2015-16 found that, at one year post intervention, proportionally fewer Hub clients were in need of health and care services. In the case of inpatient emergency care, **20%** fewer Hub clients were admitted to hospital when compared to those originally admitted as a result of a fall 12 months earlier. And, **91%** of Hub clients were still in their own homes at 12 months, at less cost. There was a marked difference in contact with East Midlands Ambulance Service not requiring conveyance to hospital and in 111 and out-of-hours services in which there was an average **51%** and **74%** greater use respectively in control groups.

Service Evaluation–Public Health Directorate.

“ If it wasn’t for your help... I would be dead by now.

Service user.



“Housing interventions to keep people warm, safe and free from cold and damp are an efficient use of resources. Every £1 spent on improving homes saves the NHS £70 over 10 years.”

Contact us

healthyhousing@derby.gov.uk
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<http://www.derby.gov.uk/healthyhousing>

Case study 1

- An elderly couple's boiler broke down in the Autumn.
- They had a gas fire in the living room.
- No other form of heating was available, nor was their hot water.
- They were using electric blankets for warmth in the bedroom, but they had faulted through over-use.

Unfortunately the husband suffered serious winter illness and sadly passed away. It was sometime after this loss, that the lady was referred to the Hub.

We were able to:

- Promptly provide temporary heating.
- Quickly install a replacement boiler to provide effective heat and hot water again.
- Maximise income via Derby Advice.

© 12 MINUTES AGO HELP FOR VULNERABLE IN WINTER

Son: "council campaign has helped my mother"



Thank you for giving me my life back.

Service user.

Case study 2

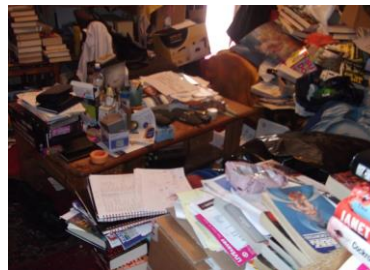
A 57 year old man had a severe Stroke. He wished to live independently, but could not be discharged from hospital because:

- He needed to be able to live downstairs
- He was a hoarder
- Unhygienic kitchen, uneven floor coverings and broken boiler.

Without intervention there was a strong likelihood of cold-related ill health, personal injury due to uneven floor coverings and clutter, and further high cost to health and social care services.

We were able to:

- Install a new boiler, new kitchen units, floor coverings and move his bedroom downstairs.
- De-clutter the property.
- Maximise his financial benefits.



Without your help... he would have gone into residential care

Frontline worker.

Case study 3

Paul, a 65 year old man with mental health issues, was 'Sectioned' as he was living in very poor, unsafe conditions:

- No heating
- Poor electrics
- Poor washing and cooking facilities
- Uneven floors

Paul had the finances to pay for the necessary interventions, but needed our support to achieve them.

We were able to:

- Install full gas central heating.
- Renewed kitchen and bathroom.
- Rewired the property.
- Renewed the floors.

Before



After



Brilliant joint-working.

Frontline worker.

Case study 4

A young family, living in unhealthy housing conditions:

- Damp and mould growth on the upper floor due to no central heating.
- Low income.
- Children suffering from asthma and eczema, and both missing days at school.
- Mum suffering depression and family stressed.

Without intervention there was a strong likelihood of cold, damp and mould-related ill health, continued absence from school, and on-going cost to health and care services.

We were able to:

- Service the boiler.
- Extend the heating system upstairs.
- Review benefit entitlements, maximise income and change energy tariffs.

Better heating had a positive impact on child health & improved school attendance.



Case study 5

A young family including mum and three teenage children, one with a baby:

- Mum diagnosed with depression and anxiety issues.
- One child diagnosed as having ADHD, and another with post-traumatic stress disorder and agoraphobia.
- Low income, poor home environment including no stair handrail on steep stairs, and no bedroom doors contributing to cold, draughts, and exacerbating agoraphobia issues.

Without intervention there was a strong likelihood of cold-related ill health, trip or fall incident, and continued worsening of existing conditions.

We were able to:

- Work closely with the Intensive Family Support Worker.
- Fit a new stair handrail.
- Fit new doors to bedrooms.
- Review benefit entitlements and maximise income.