

Why housing matters to health and care

This briefing provides an overview of the benefits of housing working with health and care and showcases examples where housing and health work collaboratively.

Key Points

- NHS, housing and social care working in partnership can help to maximise population health across the life course
- Good housing is critical to the wider determinants of health and wellbeing
- Housing Associations provide more than bricks and mortar. Their community and support functions align with the aims of health.



Why housing matters

A good home is a central part of people's lives and good housing can help to improve health and wellbeing. Poor housing on the other hand can damage health and its effects on children can last a lifetime.

In the Welsh Government's publication *A Healthier Wales*, the overall vision for health and social care is for services to move from hospitals to communities, and from communities to homes, with people being supported to remain active and independent in their own homes for as long as possible.

To achieve this aim, people need housing that:

- is affordable and provides a stable and secure base;
- is safe and comfortable;
- can provide for all the household's requirements; and
- connects to community, work and other local services such as transport and schools.

By taking a single whole system approach, with health, housing and social care working alongside each other, providing seamless services organised around the needs of the individual and their family we will be able to make the best use of the collective resources and skills we have in our communities.

Good Housing

Good housing helps us stay healthy. Warm, dry homes and access to green space have a big impact on people's wellbeing. Poor housing and construction:

- Is estimated to cost the NHS in the UK is £1.4 billion;
- Causes most home accidents; and
- Causes fuel poverty with circa 10% winter deaths attributed and homelessness having significant health impacts.

Research by the charity Shelter in 2017 found that one in 20 adults visited a GP during the past year with a mental health issue related to their housing. GPs said that housing issues were both a primary cause and an escalating factor in their patients' mental health problems.

High quality homes built and managed by housing associations, which are 99% compliant with the Welsh Housing Quality Standard, make an important contribution to healthy communities, preventing illness caused by damp, cold conditions and overcrowding. Housing associations also support the country's health and social care needs more broadly. People with physical and mental health needs benefit from their specialist adapted homes and additional services, which enable them to live independent, healthy lives.



Supporting the wider determinants of health

Good quality housing is critical to supporting wider determinants of health by:

- Promoting good wellbeing;
- Providing a secure and settled place to live which can aid the recovery of people with mental illness;
- Reducing the incidence of respiratory diseases and other conditions;
- Reducing and delaying demand for health services by enabling people to be independent for longer in their own home, meeting their changing needs;
- Allowing people to be discharged from hospital when they are fit to go home;
- Keeping people out of hospital or helping them to return home quicker with the right adaptations and support; and
- Helping to combat loneliness.

Partnerships

A clear view of the role housing plays in communities has to be based on good evidence, consistent with overall regional strategies and agreed with a wide range of local partners.

All partners working to gather and share information about population needs, housing needs and housing markets is important, and analysing this data will help identify trends in supply and demand. This evidence will then underpin the vision for health, housing and social care at a regional and local level.

As part of the analysis, public bodies need to review their estates along with independent partners. This will help to identify opportunities to release land for new markets or affordable housing and help to identify and work with owners of empty properties to bring more empty homes back into use.

New ways of working together will continue to grow as housing representation is set to be made statutory on Regional Partnership Boards (RPBs). RPBs are mandated by the Social Services and Wellbeing Act to make best use of resources to support person-centred, integrated models of care.

The Welsh Government has announced £105m in will be made available to the Integrated Care Fund (ICF) over the next three years. This is to be managed by the RPBs, in addition to pooled funding, to drive integrated working between health, housing and social care. A key focus of the fund is to enable older people to maintain their independence, remain at home, avoid unnecessary hospital admissions and delayed discharges.

With strong partnerships developing the NHS, housing and social care will be able to maximise population health and wellbeing across the life course.



Changing Demographics

By 2036, the number of people over the age of 65 will grow by 227,000 while the working age population will shrink.

The fact that people are living longer is a great testament to the work of the health and social care sectors. However it does bring future challenges with it: people will need good housing that they can live in safely and independently with all their care needs met. This will require a concerted effort between all those involved with health, housing and social care, along with the voluntary and independent sectors.

On the following pages are examples from Wales and overseas where housing services have been developed to tackle both health and housing needs simultaneously.

Multi-generational housing, Houten, The Netherlands

In Beekmos, Houten, Netherlands an innovative programme combined elderly woman and young women often who had children and social issues. The partnering agencies on this project were Stichting Timon a young adult welfare organisation and Habion a housing corporation specialised in affordable housing for seniors.

The programme is a project of housing for young mothers/young adolescents living with elderly residents in an “assisted living environment”. There are 17 units of housing in the project. 13 are dedicated to the young mothers or young girls who cannot live with their families. The other four units are reserved for coaches selected from the elderly population. The elderly residents serve as a coach for the young women. The elderly bring life experience and can offer useful advice which is of benefit for the young women. On the reverse end, the relationships are good for the elderly because it offers the opportunities to add a sense of meaning to their lives and builds relationships.

The design and location of the building are important. The building itself it located in the city centre. This makes it easier for both the seniors and the young women to access services and goods. The seniors live on the ground floor while the upper apartments are reserved for the young women. The rooftop terrace, collective meeting spaces and consulting rooms create spaces that encourage meeting and intermingling.

The innovative features of this program are as follows:

- It is an intergenerational project. Complementary needs of two social groups are combined in order to create synergies.
- It not only responds to housing problems, but also to the need to build social relationships.
- The project aims at creating an assisted living environment providing additional services to housing.
- The project was entirely designed and conducted through a partnership between third sector stakeholders (non profit providers and social housing companies).

Cariad Project, Blaenau Gwent

The CARIAD scheme was started in June 2014 using Integrated Care Funding from Welsh Government. CARIAD is a collaboration between Linc Cymru, United Welsh, Aneurin Bevan University Health Board and Blaenau Gwent Social Services to deliver several step up / step down intermediate care units within residential care, sheltered and Extra Care schemes throughout Blaenau Gwent. CARIAD stands for Collaborative Assessment Reducing Interventions, Admissions and Delayed transfers of care.

The CARIAD project significantly contributes to the prevention of hospital admissions and reducing the length of stays of patients in both acute and community hospitals. Its reablement and rehabilitative focus promotes both prevention and early intervention. The CARIAD project is aligned to the wider strategic priority of prevention, rather than intervention.



There are several locations within Blaenau Gwent which host a CARIAD facility, one of which is Llys Nant y Mynydd, a United Welsh Extra Care Scheme. Within the building, two rooms have been converted to fully accessible, adapted flats.

While in the CARIAD scheme, individuals are provided with support and input from the Blaenau Gwent Community Resource Team. The team is made up of Social Workers, Intermediate Care Consultant, Occupational Therapists, Physiotherapists, Rapid Response Nurses and Health and Wellbeing Support Workers. The average length of stay within the scheme is between four-six weeks.

Over the last 12 months, the flats at Llys Nant Y Mynydd have been occupied by 10 service users which represents a notional saving of £179,850 to the NHS in terms of available bed space. The majority of those who make use of the service end up moving back into their homes where they can live comfortably and independently.

Further ICF funding has now been sought to create an additional Cariad facility at a United Welsh sheltered housing scheme to convert an under-utilised guest bedroom facility into a fully accessible adapted flat. This will enable the CARIAD service to increase its capacity to support individuals during their period of intermediate care, within a sheltered housing setting as opposed to a residential care home.

The Lighthouse Project, Gwent

Initial development of the Delayed Transfer of Care (DTOC) project:

For the past 8 years, Taff Housing Association's Lighthouse Project has a Support Worker based alongside the Hospital Social Work Team in the Royal Gwent Hospital. This member of staff, funded by Newport City Council through their Supporting People programme, is there to tackle directly the obstacles preventing patients who are medically fit from returning home. These can vary from something as simple as making sure the home is warm and safe for their return, through to obtaining purpose-designed adapted property, or accessing a specialist care facility in the community.

Helen Lloyd the Service Manager of Community Care and Adult Services stated:

'This service's input to people with housing related problems gave them a safer discharge and helped them meet their desired outcomes. It also helped reduce the DTOC and the number of days that people were delayed in hospital. The Lighthouse Hospital Discharge Project is an excellent example of local authority, health and the third sector working together to produce a better service.'

Regional Hospital Housing Support Service – the extension of the DTOC project to Blaenau Gwent, Caerphilly, Monmouthshire and Torfaen

The above approach significantly reduced the time medically fit patients remained in hospital and its success led to about extending the service to patients from outside of Newport. A pilot project was established with the help of the Intermediate Care Fund. This was as a result of the In One Place Programme instigating the extension of the Lighthouse Project through discussions with Aneurin Beban University Health Board, Newport Supporting People and Taff Housing. Its original purpose was to support patient discharge from the Royal Gwent and St Woolos Hospitals in Newport. However, early on in the project it was decided to expand the service to all the hospitals in the four other local authority areas of Gwent area, Blaenau Gwent, Caerphilly, Monmouthshire and Torfaen.

The Support Officer worked in partnership to create strong links with Health, Social Services, Housing and the third sector to develop effective ways of working to enable a safe and prompt discharge from hospital.

Outcomes achieved:

In the 12 months during which the pilot operated, the following outcomes were achieved:

Number of patients supported	Number of patients discharged successfully to appropriate accommodation or on their way to successful discharge	% of patients successfully discharged to appropriate accommodation or on their way to successful discharge
47	38	80.85%

The extended Regional Housing Hospital Support Service demonstrated that the model used to reduce DTOC time in the Royal Gwent Hospital, in combination with the services used in Newport, could be rolled out effectively across the region with positive outcomes achieved even for complex cases.

The Lighthouse Project in action:

- Following a massive stroke, Patient A was left with near paralysis from the neck down.
- Patient A had become depressed and agitated whilst in rehab, and as a result his recovery had plateaued. At this point, our support started.
- A decision had been made to discharge him to his existing property although it was no longer suitable for his needs. The Support Worker began the process of finding a suitable property.
- A housing decision to place him on band D was successfully challenged and he was restored to the banding required to move into a level access, adapted property close to family and support networks.
- The Support Worker ensured maximisation of income through successful ESA and PIP applications.
- Support Worker liaised with Social Worker and OT to ensure adjustments made to care package to meet his needs and a rehabilitation plan was put in place by the receiving Local Authority.
- A suitable property was obtained and Housing Benefit was paid for both the existing and new properties while adaptations were made.
- The Support Worker liaised with Social Services in both boroughs, ensuring care package, transport, OT provision, District Nurse and adaptations all arranged and in place on day of move.

Permanent supportive housing, Los Angeles, USA

Housing for Health (HFH), a division within the Los Angeles County Department of Health Services (DHS), was established to provide permanent supportive housing to patients with complex medical and behavioral issues who were experiencing homelessness. HFH goals were to improve patients' health, reduce costs to the public health system, and demonstrate DHS's commitment to addressing homelessness within Los Angeles County.

Thousands of individuals who formerly experienced homelessness, many with complex chronic physical and mental health conditions, have been stably housed through this programme. Research data demonstrates a dramatic reduction in service use, especially for medical and mental health services. Overall, the cost reductions more than covered the year's worth of supportive housing costs, and an observed net cost savings of 20 per cent.

Key findings include:

- Clients' use of public services, especially medical and mental health services dropped substantially, including emergency room visits and inpatient care. Costs also decreased.
- Across all the services examined, the associated costs to public services declined by almost 60 percent.
- Participants' self-reported mental health improved after receiving housing, though self-reported physical health was largely unchanged; and
- Although the number of individuals arrested and the number of jailed arrests decreased during the year after receiving housing, the number of jail days increased following Permanent Supportive Housing entry by an average of 2.76 days.

Adapted bungalows, Bron Afon, Torfaen

Three adapted bungalows have been built in Cwmbran for residents with complex care and support needs. The homes were built using £377,000 funding from the Welsh Government's Integrated Care Fund. The project was planned by the In One Place Health, Social Care and Housing partnership. This Gwent-wide project ensures landlords work closely with councils and health services to provide housing that meets the needs of patients.

Paul Scriven, 41, was the first resident to move in to one of the homes in Coed Cae, Pontnewydd. Paul was a geography teacher at Croesyceiliog School but in January 2009 he collapsed and suffered a double stroke, which left him unable to move. He communicates through a voice computer or an alphabet card system with a relative or carer. He was living in Llanhennock Lodge care home in Caerleon but now he is back in his hometown.

He said: "The move back to Cwmbran has been strangely surreal. It's been a combination of wanting it for so long and it being very familiar, yet little things are different. All of my friends and family are so glad that I am in Cwmbran. Although it was very nice in Llanhennock, it was a little out of the way. I am already seeing the benefit, with people just popping in!"

Alan Brunt, Bron Afon's chief executive, said: "It was lovely to meet Paul and hear how happy he is living in Cwmbran. We love hearing how the homes we build make such a difference to people's lives. This project involved working closely with our partners to build three high-quality homes and we hope to do more of this work in the future."

Councillor David Daniels, executive member for communities, housing and anti-poverty, said: "It's fantastic to see the tenants of the bungalows settling into their new homes where they can live close to their family networks. The design and adaptations of the bungalows allows each individual the opportunity of living independently within the community."



Gareth Lane, senior nurse for continuing healthcare and safeguarding, said: "This project required a high degree of collaborative working between Aneurin Bevan University Health Board, Torfaen County Borough Council, Torfaen Housing and Bron Afon. It is now very satisfying to see Paul in his new home and being able to access the community on a daily basis. This move has clearly had a positive effect on both Paul's physical and mental wellbeing."

The 2025 movement, North Wales

The 2025 Movement is a place based partnership in North Wales with a mission to end avoidable health inequalities in the region by 2025. It was formed in 2015 in response to figures which showed that people living in areas of higher deprivation in North Wales are likely to live 11 years less than those in other areas.

It is made up of senior leaders and practitioners from North Wales local authorities, four housing providers; (Cartrefi Conwy, North Wales Housing Association, Cartrefi Cymunedol Gwynedd Cyf, Canllaw (Eryri) Cyf), Betsi Cadwallader University Health Board, Public Health Wales, Wrexham Glyndwr University, North Wales Police, and North Wales Fire & Rescue Service.

Since its launch in 2015 its membership has grown to over 500 people and organisations, which all joined together because they share a belief that most health and housing inequalities experienced by people in North Wales are avoidable, and that, by organisations taking a new approach to working together to address shared challenges, much more can be delivered to transform health and wellbeing for communities across the region.

The management group meet bi-monthly and oversee the seven work areas, or “Just Do” teams:

1. Flint Regeneration (currently focusing on youth physical inactivity and food poverty);
2. Healthy Homes – Healthy People;
3. Mental Health & Hoarding;
4. ‘Made in North Wales’ Social Prescribing Network;
5. Public Services Leadership Programme supporting the aims of 2025 in conjunction with Wrexham Glyndwr University;
6. Tackling Health Inequalities for Homeless Rough Sleepers; and
7. Facilitating Improvements in Hospital Discharge



Community renewal, Winnipeg, Canada

In the 1990s and into the early 2000s, Lord Selkirk Park, Winnipeg’s largest public housing complex was half-empty—people didn’t want to live there. It was regularly referred to by residents as a “war zone,” because of the high level of street gang activity and related violence. In 2005 the North End Community Renewal Corporation began a community development initiative in Lord Selkirk Park, funded by a federal government Comprehensive Community Initiative grant. The aim of the initiative was to improve safety, and revitalise the community.

This work evolved over an eight-year period. The result is a dramatically transformed community. Every housing unit was renovated and is now occupied; and there is now a wait list of people wanting to live in the neighbourhood. A new resource centre is a hub of community activity and is having a profound impact on the lives of community residents. A new adult learning centre, adult literacy centre, and childcare centre were introduced, and there are waiting lists for both. Sixty newcomer families, mostly African and many Muslim, have moved into the largely indigenous community and have integrated smoothly and happily.

At a time when low-income Canadians are facing a severe rental housing crisis, Lord Selkirk Park represents a beacon of hope and an excellent example of how to rebuild a troubled community.

Wellbeing 4 U, United Welsh, Cardiff and Vale

United Welsh delivers a community wellbeing service on behalf of NHS Wales in Cardiff and the Vale of Glamorgan. The service was first launched on behalf of Cardiff and Vale University Health Board in May 2016.



Delivered by Thrive, the team that manage specialist accommodation and support services for United Welsh, Wellbeing 4U uses a social prescribing model to deliver public health priorities through social intervention. With the team based across 10 GP surgery hubs in Cardiff and Barry and taking referrals from 21 other surgeries across the capital and the Vale of Glamorgan, the service has already supported almost 2,400 patients and reduced unnecessary GP appointments and pressure on GPs' time.

Karen Tipple, Specialist Housing and Wellbeing Lead for United Welsh said: "As our team doesn't have the same time constraints as GPs, we are able to offer a mixture of outreach, one-to-one work and signposting to community activities and the third sector while freeing up medical appointment time.

"The programmes of intervention which we establish alongside the patients can last as long as they are needed, from signposting people to wellbeing and community activities such as parenting courses and exercise options through to helping people with issues such as substance misuse or depression. Through the provision of specialist housing and support services, social landlords such as United Welsh have long provided opportunities to improve people's health and capacity for self-care. Our partnership with the NHS is really important to us and we are delighted to have been re-awarded this contract to continue building the success of the service."

The main areas of focus for the Wellbeing 4U service are increasing physical activity; improving diet; improving immunisation and screening uptake and helping to reduce harmful habits such as substance misuse, heavy alcohol consumption and smoking.

38-year-old Helen Worgan from Grangetown used the Wellbeing 4U service after her anxiety and depression were compounded by a seizure. Helen said: "When the GP referred me to Wellbeing 4U I thought it would offer a few sessions and they would listen to me working through my issues. I never imagined how much more there was on offer.

"The connections the team made for me in my local community have been really beneficial, such as the mindfulness groups which have helped me to manage my day-to-day anxiety better.

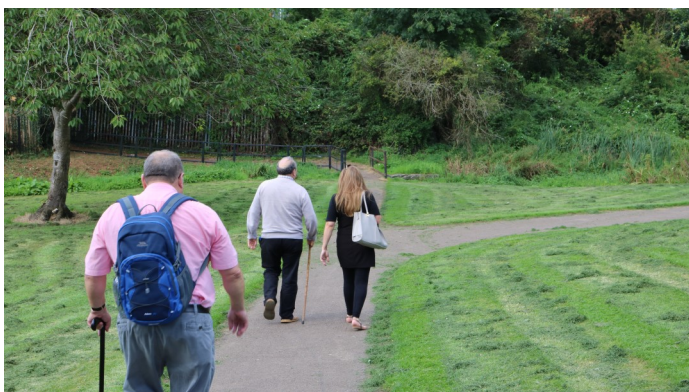
"To build my confidence, the team helped to involve me in local activities like a book club and yoga classes at my community centre and a local foundation. As a result, I'm attending a retreat in the next few weeks – something I would never have done before.

"I wasn't aware of all of these groups and activities and with the help of Wellbeing 4U to access them, I have broken the cycle of isolation and started a phased return to work."

Wellbeing 4 U in action:

Karen Pardy, GP and Community Director for South West Cardiff Cluster and Social Prescribing Lead for Cardiff and Vale UHB said: "As a Health Board we are committed to caring for people and keeping them well and enabling patients to access help, advice and support within their local community can help with this.

"It is estimated that 20% of patients who present to their GP have underlying social problems and we want to do our best to help our patients in all aspects of their lives which impact on their health and wellbeing.



Wellbeing 4U has helped us to support health and wellbeing through activities which promote physical exercise, healthy eating, and mental health as well as giving advice in social issues such as housing, benefits, employment and debt advice. This helps the individual achieve their goals and build community links and relationships to improve their mental and physical health." Wellbeing 4U is available to anyone registered at the designated GP surgeries.

Foyer Oxford, Perth, Australia

Foyer Oxford is a housing and support service for at-risk young people. The 98-unit complex in Leederville, an inner suburb of Perth, provides secure accommodation and services to transition young people into independent and productive lives. The facility was designed and developed in accordance with the National Partnership Agreement on Homelessness and the implementation of the "A Place to Call Home" initiative. It is run by a consortium of Anglicare WA, Foundation Housing Ltd and North Metropolitan TAFE. Major supporters are: Housing Authority WA; Lotterywest; Department of Child Protection and Family Support; Australian Government and BHP Billiton Iron Ore. Foyer Oxford is part of an international movement aiming to address the root causes of youth homelessness and applies a proven model for helping young people transition into independence.

Residents enter into a 'deal' setting out rights and responsibilities for both sides including a requirement for residents to participate in education, training and/ or employment. The 'deal' is based on a spirit of reciprocity – residents must help their supporters to help them – and rewards, such as better rooms, can be earned by those who meet their end of the deal.

Since opening in March 2014, Foyer Oxford has consistently exceeded its target key performance indicators. For instance, 85% of residents engaged in employment, education and training from July to December 2016. Over the same period 95% exited into positive long-term accommodation. In the annual survey, 95% of existing residents and 83% of exiting residents reported positive satisfaction with their experience. Behind these statistics are many stories of young people whose lives have been transformed for the better.

Conclusion

Population health and wellbeing is a complex issue with many contributors to poor outcomes and many motivators for positive self-care. We all have a role to play in prevention, health and care – from the NHS and local government to the housing and education sectors, and the third and independent sectors.

Where housing services integrate and co-locate with health services, they can have an even more tangible impact on health outcomes.

The ten national design principles to drive change and transformation as outlined in *A Healthier Wales* provide the framework which we can all work together on.

The Welsh NHS Confederation and Community Housing Cymru have signed a Memorandum of Understanding to support; good practice, inform policy and delivery, the coordination and dissemination of research, and collaboration between health and housing organisations to help deliver positive changes to individuals health and well being.

We want to work with social care, government and others to be able to make the most of funding opportunities which will help deliver positive outcomes for people and their communities.



Community Housing Cymru (CHC) is the representative body for housing associations and community mutuels in Wales, which are all not-for profit organisations. Our members provide over 158,000 homes and related housing services across Wales.

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The **Welsh NHS Confederation** is the only national membership body which represents all the organisations that make up the NHS in Wales: the seven Local Health Boards, three NHS Trusts, and Health Education and Improvement Wales (HEIW).



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