

**Sheffield Health Action Zone
Year-end report 2003-04**

In the context of 'what works, for whom, in what circumstances and why', please answer the questions below.

**Project title: Healthy Housing I
2001**

Start Date: Jan

Purpose of project. To develop new housing initiatives which lead to mainstream changes to tackle the underlying causes of ill health, and contribute to the health inequalities agenda.

1. Looking at your original plan, how much progress has been made towards achieving the stated purpose?

- In general progress has been made where Housing agendas can be taken forward without the need for intervention from health professionals, or where there has been a Government down requirement for a piece of joint work. These are detailed in the section2 below.
- Less progress has been made towards the formation of a health and housing team this year. In part this has reflected the fact that the Housing Service has undergone a large and fundamental organisational change which has made this aspect of work difficult to prioritise until the Service has reached a steadier state. The decision to develop such a team needs to be taken when the restructured Service is more settled and new directions in service development can be decided. However a number of themes have begun to emerge through the varies pieces of project work undertaken and this will feed into future considerations around structure.
- Despite these difficulties much progress has been made on bedding in previously developed services to ensure mainstream commitments have not been lost in restructuring. In addition other projects have been developed over the year.

2. What were your key successes for 2003-04?

- The Smart Technology pilot has been taken forward this year, with the Healthy Housing initiative taking a lead. Funding has been identified, decisions made on the type of technology to pilot, criteria, referral, assessment and installation processes have been developed. Consideration has been given to the best 'home' for the service, and it is agreed that the City Wide Alarm team in Social Services will take the lead in the future. Further funding has been agreed for 2004/5. Although actual installations have been minimal this year the ground work has been done, and Sheffield is now in a position to take advantage of

future funding and development opportunities for new technologies to assist people to live independently in their homes.

- Repairs On Prescription has been fully evaluated. Areas for improvement have been identified. Changes to improve the delivery of services have been made within Housing and a programme of work to continue to raise awareness and increase referrals within Health Services has been planned. The Service is supported by the Director of Public Health in the West PCT and his support has been critical in enabling health workers to take full advantage of this service to target patients in bad or inappropriate housing to gain improvements to their home and heating.
- Single Assessment process has been developed in Housing and this has enabled a broad Housing Pathway to be developed to give health and Social Care professionals a guaranteed easy route into the myriad of housing interventions regardless of tenure.
- Housing Services has developed a disability Housing Strategy, which the HAZ team has contributed to, though not led on.
- A large achievement this year has been the continued development of the Housing Support Service for families evicted for anti social behaviour, which will bring gains in terms of services for challenging homeless families, and for communities suffering stress as a result of anti social behaviour.
- The Healthy Housing team have continued to support the supported housing services developed in the voluntary sector by this team last year. These services are now mainstream funded and running independently.

4. What was not achieved and why?

- The formation of a health and housing team has not been achieved. The main reason for this has been the very large structural change within Housing Services, which has seen the operational housing management services form into an independent company separated from the Local Authorities' strategic housing function. However work has been undertaken to gain a better insight into the relationship between equipment and adaptations services and medical rehousing services which will impact on the consideration of service needs in the future.
- Work with health staff in the regeneration areas has not been achieved due to the large programme already being carried out.

5. What difference has your initiative made to

(a) People's health?

- Showing a direct impact on changes to health as a result of housing interventions is not possible. What we can show is that improvements have been undertaken for Council tenants aimed at improving heating and preventing accidents as a result of referrals from health workers.
- Health workers are now more able to consider housing issues when assessing patients needs and have a single route into Housing Services.
- Vulnerable tenants have been assisted to sustain tenancies to prevent repeat experiences of homelessness.

(b) Changing mainstream services?

- The Healthy Housing initiative developed over 20 housing support services including services for refugees, homeless families, rough sleepers, people with mental health and learning disabilities, older people, young people, women and children leaving abusive relationships and neighbourhood based generic services have been mainstreamed through the Supporting People Programme.
- Priority repairs and improvement services targeted at older people and people with heart and respiratory disease has been mainstreamed. Additional resources have been put into place to improve services for patients living in the private sector.
- Pathways into Housing and common assessment procedures have been mainstreamed.
- Significant developments are underway to ensure the future mainstreaming of the assistive technology provision for older people with dementia and at risks of falls.
- The Handy Person Service has been funded for a further two years jointly by Health, Housing and Social Services.

6. What have you learned from your initiative, in relation to what worked as well as what did not work?

- Having a dedicated resource to focus on these developments and partnerships has led to the improved profile of health needs, health structures and national health priorities being taken forward in Housing Services. It has enabled the development of a range of new projects.
- As stated above movement is still required on the health side to consider the wider implications of environmental factors on health. This has improved over the period of the Healthy Housing initiative, however it still fails to have a major impact given the number of national health targets that need to be met.
- Where national government has identified targets for joint working partnership working locally has been more effective.
- Champions at senior levels in Health and the Local Authority assist in ensuring the success of initiatives and joint working.

Signed:
Organisation:
Date: