Workshop 3: Health, Social Care & Housing

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The context

• Over reliance on residential care
• Out of date shared housing
• Escalating care costs
• Greater emphasis on prevention and wellbeing
Opportunities

- More collaborative working
- Better data – housing need
- ‘specialist’ housing – HAPPI principles
- Assistive technology
- Housing Adaptations
- Remodel/Redesign existing properties
- Housing register
2020 plan

It is envisage that:

- approximately **3,000** units of housing with support for people with age related needs are required in Cornwall
- approximately **550** units of housing with support for people with learning disabilities and/or autism are required in Cornwall
Demand

EC – Penzance, Camborne, Falmouth, Truro, Newquay, St Austell, Bodmin, Liskeard and Saltash

HwS – Redruth, Camborne, Penzance, Truro, St Austell, Bodmin and Liskeard
Key Facts

- 23% social renters
- 6% private renters
- 72% owner occupiers

- 95% of homes lack even basic accessibility features
- 96% of older households live in mainstream homes
- 47% of women & 39% of men over 65 years report difficulty walking a moderate distance
- Home adaptations improved quality of life for 90% of recipients, as well as for carers
Disability arises from the barriers presented by society and the *built environment*

- Can we work together to remove those barriers?
- Can we work together to ensure disabled people live as independently as possible?
- Can we work together to ensure that disabled people remain safe and healthy within a suitable home?
Most adaptations are relatively minor cost & simple to install (EHS 2014-15)

Figure 1.3: Adaptations most commonly needed by the household, 2011-12 and 2014-15
Despite relatively minor cost many go without much needed adaptations (EHS 2014-15)

Figure 1.5: Adaptations most commonly needed by the household but not installed, 2011-12 and 2014-15

- ramp outside the house/block
- stair lift
- grab/hand rail inside
- specialist or adapted furniture
- needs redesign of bathroom
- bath/shower seat or other bathing aids
- grab/hand rail outside
- adjustable bed

Percentage:

- 2011-12
- 2014-15
People under 55 and those living in the rented sector are more likely to be lacking adaptations (EHS 2014-15)

Figure 1.4: Proportion of households that required one or more adaptation to be installed, by age and tenure, 2011-12 and 2014-15
Lack of funding prevents many from having their needs met (EHS 2014-15)

Figure 1.6: Reasons why households did not have their required adaptations, 2011-12 and 2014-15
Many people are unaware of the assistance available

“I was wondering can they do adjustments in the house, like look at the toilet, look at providing a Stannah chair?
(Female, 40-50, London)

“A downstairs loo would be very nice, but I don’t know if you can get grants or anything like that to rebuild outside. I don’t know if the DWP would be able to tell me? I could ask.
(Female, 60+, Wales)
Inaccessible homes are detrimental to health, a barrier to independence, dignity and employment

- Unmet needs have a major impact on independence and dignity
- Disabled working age people with unmet need for accessible housing are 4 x more likely to be unemployed than those whose needs are met or who do not need accessible housing (LSE 2016)
- Wheelchair users living in an inaccessible home find it difficult to get back to work or education (Leonard Cheshire Disability, 2014)
Failure to fit adaptations costs NHS millions

- Failure to fit preventative adaptations is estimated to cost the NHS £414 million annually (BRE 2016)
- Adaptations that reduce falls pay back to the NHS in five to six years (BRE 2016)
- “GPs treat the whole person, so we are only too aware that inaccessible or inadequate housing can have a negative impact on our patients’ physical and mental health” Dr Maureen Baker Chair of the Royal College of GPs (Leonard Cheshire Disability 2014)
Adaptations improve quality of life, independence, reduce accidents & prevent admissions to hospital

• “The alterations have literally changed my life - I didn't know how much I was struggling to function”.

• “makes all the difference in terms of feeling in control, safer, having a social life, and health & wellbeing” LSE 2016

• Reduces costs of residential and home care

• Prevents accidents, admission to hospital, residential care, other medical treatments & avoidable health care costs for carers
Fact - a significant number of disabled households in Cornwall are not having their housing needs met

The ‘majority of homes in England (84%) do not allow someone using a wheelchair to get to and through the front door without difficulty’ (Habinteg Housing Association 2010)

Rachel’s story

https://vimeo.com/171417242
60% of all homes & 70% of wheelchair user homes could comply with visitability standard through minor/moderate work (EHS 2014-15)
Fact – It only costs £1,100 extra to build a new home to LHS

- Good accessible design, such as building to standard M4 (2), can cost just an extra £1,101 for a two bed terrace, in build costs compared with current industry practice (Housing Standards Review 2014 DCLG)
Fact – many accessible homes aren’t always allocated to those most in need

- 70% of wheelchair accessible homes went to households with no wheelchair user & only 46% of wheelchair users were allocated a wheelchair accessible property (Greater London Assembly 2010)

- One in five wheelchair accessible homes are let to non-wheelchair users (Habinteg 2011)
Fact – there are limited options for households with an accessible housing need

1. Coping as best they can
2. Seeking grants/assistance to meet needs
3. Seeking to change tenure
4. Buying a new accessible property
5. Wheelchair users accept tenancies that are not entirely suitable to their needs because of the lack of alternative options available to them

Source: Aspire Housing 2014
How can we work together to make a difference?

• What can we do to ensure new homes are accessible?
• How can we ensure funding for adaptations meets need?
• How can we increase options and improve choice for disabled people?
• How can we improve the allocation of accessible housing?
References

- LSE 2016, No Place Like an Accessible Home, Quality of life and opportunity for disabled people with accessible housing needs
- EHS 2014–15, English Housing Survey Adaptations & Accessibility report
- Aspire Housing Wheelchair accessible housing, waiting for appropriate housing in England 2014
- The health and wellbeing of spinal cord injured adults and the family: examining lives in adapted and unadapted homes by Loughborough university
- Leonard Cheshire Disability, 2014. The hidden housing crisis
- Leonard Cheshire Disability 2014 The financial cost of inaccessible homes to the NHS and care services
- Housing Standards Review Cost Impacts EC Harris 2014 DCLG
- Habinteg 2011, Space to move: Making efficient use of homes for wheelchair users
- Centre for ageing better http://laterlife.ageing-better.org.uk
The Physical Environment

Fuel poverty is a major barrier to good health.

From a health and well-being perspective: living at low temperatures as a result of fuel poverty is likely to be a significant contributor not just to the excess winter deaths that occur each year (a total of 27,000 each year over the last decade in England and Wales), but to a much larger number of incidents of ill-health and demands on the National Health Service and a wider range of problems of social isolation and poor outcomes for young people.

The Hills Fuel Poverty Review published in 2012 commissioned by the Department of Energy & Climate Change
Decent Homes

Poor housing costs NHS England £1.4 - £2 billion p/a.

Housing providers help by:
- building warm and energy efficient homes
- Improving standards of older stock
- promoting energy efficiency and managing fuel costs.
Safe Homes

- Tackle the basics
- Think ahead

Home adaptations improve people’s quality of life

Home adaptations have been shown to improve the quality of life for 90% of recipients*

Over 85s spend 80% of their time at home

- **Health** – good accommodation with appropriate adaptations
- **Financial** – LHA will affect sheltered housing in 2019-20
- **Social** – who is keeping an eye on low level needs and loneliness?
Mental Health

- Mental health issues affect 1/4 of the population annually.
- Social housing residents are more likely to be affected.
- Poorest 1/5 of adults at double the risk of mental health problems as those on average incomes.
- Financial problems can be both a cause and consequences of mental health problems.
- Those with mental health problems are three times as likely to be in debt and more than twice as likely to have problems managing money.
Mental Health – how we help

- Financial inclusion
  - preventative
  - proactive
  - responsive

- Support into work
  - WorkHub
  - apprenticeships
  - job clubs.
Mental Health - Tenancy Sustainment

- Neighbourhood managers trained with mental health awareness
- Other customer facing teams offered awareness training
- Specialist team provides support
  - Signposting
  - Liaison
  - Casework
- Practical level support to reduce hoarding.
Over to You....

• What solutions are already available?
• What does work in Cornwall?
• What other solutions might we try?
• Who is doing what?
• Who needs to be involved?
• Are there any lessons to learn from elsewhere?