

Response to developing the long-term plan for the NHS – (which has been cut and pasted into an online response system (200 words max per question discovered on trying to do it!))

Comments on the Core values that underpin the plan

Question – Core values

Where people live directly impacts on their health. The estimated annual cost to the NHS of poor housing is more than £1.4b. There is a causal, quantifiable relationship between housing characteristics/condition and the most common chronic and acute health conditions. (e.g. respiratory, stroke, arthritis, COPD)

These housing risk factors (homes in need of repair, cold, damp and inaccessible) impact across the life course but become increasingly influential in later life e.g. as people become more prone to trips and falls, or more susceptible to cold or damp conditions.

We urge the plan to recognise these risk factors and ensure that the health sector supports, and works closely with, housing bodies and voluntary agencies offering housing services to ensure that people who are both at risk of, and have, poor health and long terms health conditions can remain at home and, where appropriate, receive early treatment in the community and at home – a new impetus to offering health care ‘close to home.’

Personalisation/independence Enabling people to live their lives well, in the way they want **and where they want to live** should underlie the values.

Prevention Living in decent and appropriate (accessible/adaptable) housing can make a real contribution to prevention.

Question – Examples of good services working well that could be scaled up

Adaptations services The Centre for Ageing Better will have good practice guidance on home adaptations services in early October with case studies where services are integrating with health and care to help people to stay at home. An example of a service linked to health is [in Middlesbrough](#).

Falls prevention Age UK Warwickshire’s housing advice/information work and Preston Care and Repair’s handypersons service (see below) support falls prevention through home hazard work.

Handypersons Preston Care and Repair handypersons service provides a range of small repairs and minor adaptations in the homes of older and disabled people. They

offer everyone a 'healthy homes assessment' with remedial measures to reduce home hazards and alert caseworkers of older people with other housing issues. Services are particularly adept at reaching 'older old' more vulnerable groups, such as the rising number of older single women living alone, often with chronic long-term health conditions. [Summary full report](#)

Housing options Age UK Warwickshire's housing advice and information service worked with GPs pro-actively visiting older people identified by GPs as being at higher risk, undertaking holistic assessments, and offering interventions to reduce risk. Housing solutions emerged as particularly cost effective and highly valued by patients. [Summary full report](#)

Comments on the Life Stage programmes

Life stage programmes: Staying healthy

Question Top preventative activity

We consider one of the top preventative activities is to support people to manage their health and wellbeing at home and in the community. This can only be done with the support from all local health, care and housing systems built around that individual.

We urge consideration by the NHS of the range of home interventions that can support this goal including: -

- Fast track adaptations services to enable people to make their home more appropriate and accessible as they age.
- Falls prevention services that focus on home hazard assessments and act to reduce the risk of falls at home.
- Support for handyman services that can support vulnerable people with small repairs and adaptations that enable the home to be warm, well maintained, safe and comfortable.
- Help and advice to support older and disabled people to repair and adapt their homes and to make informed choices about their housing options.

Whilst not expecting the NHS to provide these services health care staff need to know what is available locally and help is also needed at a strategic level to support and maintain home interventions that help older and disabled people locally. Examples including evaluation have been sent to england.ltp@nhs.net.

Question Examples of innovative practice that can be scaled up

See above (page 1 – 2) in answer to the same question under Staying Healthy

Life stage programmes: Ageing well

Question What more can be done to encourage/enable people with long term health issues to play a fuller role in managing their health

In our response to Staying Healthy we identified a range of housing interventions around staying healthy which are repeated since these help older people with long term health issues take a fuller role in managing their conditions at home: -

- Fast track adaptations services to enable people to make their home more appropriate and accessible as they age.
- Falls prevention services that focus on home hazard assessments and act to reduce the risk of falls at home.
- Support for handyman services that can support vulnerable people with small repairs and adaptations that enable the home to be warm, well maintained, safe and comfortable and prevent risk of falls.
- Help and advice to support older and disabled people to repair and adapt their homes and to make informed choices about their housing options.

As well as supporting and working with local housing related services that enable people to manage their long-term conditions more effectively, we believe this would lead to a greater focus on enabling people to stay or return home from hospital as soon as practically possible.

Question Good crisis care

We have worked with NHS England to reduce delayed transfer of care and make hospital discharge more efficient by promoting how housing and health can work together to prevent and reduce hospital admissions, length of stay, delayed discharge, readmission rates and ultimately improve outcomes for people particularly those with frailty. [A Quick Guide to Health and Housing](#) has been published which identifies ways in which housing can improve health outcomes for people. Enabling people to stay in their own familiar home environment and get home quicker is crucial to ageing well and to preventing unnecessary hospital admissions in a crisis.

We ask that the NHS plan identifies the role of good housing to support care in a crisis and promotes ways to improve and adapt the homes for those who live in poor or inappropriate housing ensuring that older people have access to independent advice and information to support informed choice.

Question Post diagnostic support for people with dementia

We would emphasise the importance of advice, information and support around a person's housing circumstances. Many older people with dementia can stay at home with minor changes to make the home more manageable as memory fades. Many older people and their carers need help to know what the best option for them might be.

Older people with dementia and their carers should have access to this information and advice locally, especially after diagnosis. This would mean memory clinics working with, and referring people to, targeted support which helps them with their housing, health, care and other local community options to facilitate living well with dementia in the community.

One such example that could be scaled up nationally is [Homewise Memory Matters](#) which offers comprehensive, impartial help on all aspects of home improvement, adaptation, repairs and maintenance to enhance independent living for people with memory loss and their carers.

It makes the home safe and comfortable. It makes changes to support visual and orientation difficulties and other repairs and adaptations where appropriate. It supports carers by referring them to appropriate advice and support. This service focuses on keeping people out of hospital and residential care.

Enablers of Improvement: Primary Care

Question - How could GP services link to other services to identify and meet needs

GPs have a crucial role in enabling people to remain independent at home and ensure that people who approach them can access non - health community services which keep them well. We would like housing advice and information to be available in, or linked to, GP services and in hospitals. This would ensure that people had advice at the right time ensuring that where both urgent and long-term care needs are identified housing repairs and adaptations are considered and older people and their carers have access to the information and advice and support they need to stay comfortably at home.

Local partnerships of GPs with care and with other community services including housing must be the way forward to reduce stays in hospital and develop better health outcomes for people. The project identified under the Ageing Well section from Age UK Warwickshire highlights the importance of considering people's housing at the point of GP referral. The development of social prescribing needs to include housing – repairs on prescription, warm homes on prescription; just two initiatives worthy of more consideration.

Enablers of improvement: Research and Innovation

Question - How to increase research topics that have traditionally been underexamined?

Care & Repair England has set up its Catch 22 project to forge new partnerships and stimulate fresh research in the health/ housing/ ageing field by bringing together leading researchers and key stakeholders. There has been a lack of investment in high standard academic research into the housing, health and ageing connections, particularly using randomised control trials, and especially in mainstream ordinary housing.

This low level of research investment means that the housing sector has primarily used individual case studies to illustrate how their services can save money, which is often rejected as inadequate proof of savings. The providers of housing services for older people may find themselves in a Catch 22 situation i.e. unable to provide academic standard evidence, services may be decommissioned, further diminishing the opportunity to develop such an evidence base. Those services most at risk include the very services that older people value so highly – help with home adaptations and practical housing repair services, such as handyperson schemes and home improvement agencies - the housing interventions we have identified in this response.

We would welcome reference to the potential impact and role of housing research for the NHS plan. For further information see [summary flyer](#)

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