







Housing, health and care programme

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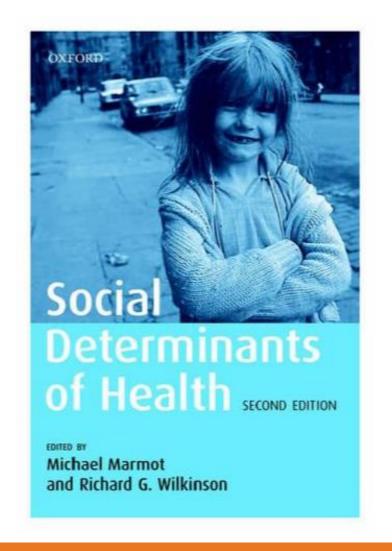
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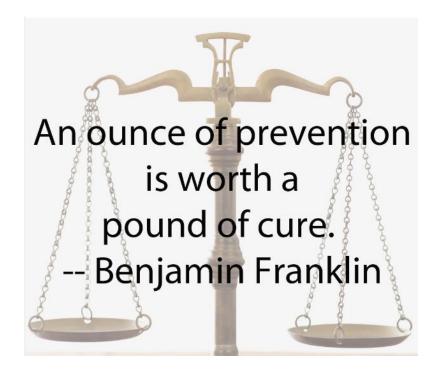
North East North Cumbria Health & Care Partnership





NHS big why





The Health and Social Care Act 2022 gave
Integrated Care Boards in England a
statutory duty to work with partner
organisations to address the wider
determinants of health

Our strategy

The links between housing and its impact on the health and wellbeing of our communities are well evidenced and is a key area for action in

- **Integrated Care Strategy** for the North East and North Cumbria which sets out a ten-year plan, developed and agreed by all partners across the region, to ensure better health and wellbeing for all
- People at the heart of care 10-year vision for adult social care
- Health strands of North East Housing Partnership - collaboration of social housing providers, local authorities and arms length management organisations
- ICB's Joint Forward Plan how the NHS will deliver with partners, the better health and wellbeing for all strategy

North East North Cumbria **Health & Care Partnership**

Better health & wellbeing for all

Our integrated care strategy for the North East and North Cumbria

Our four key goals...



healthier lives

Reducing the gap between how long people live in the North East and North Cumbria compared to the rest of England



Fairer outcomes for all

As not everyone has the same opportunities to be healthy because of where they live, their income



health & care services

Not just high-quality services but the same auglity no matter where



start in life

Enabling them to thrive, have great futures and improve lives for



Our health and wellbeing are influenced by many factors that are often beyond the control of the NHS. These include things like education, housing, employment and our income. We also know that many illnesses can be prevented in the first place. The NHS can't always change these things on its own, which is why work with others to help make things much better.

Housing, health and care programme

- The Housing, Health, and Care Programme is the Region's sector-led housing improvement activity.
- Four organisations working together to ensure and joined-up approach across the region on three key areas of action working across multiple networks and partners.

Complex needs: We will identify where we need integrated models of support to reduce the number of people in or at risk of long-term hospital care

Older people: We will identify and provide choices to live independently

Warm and dry: We will identify and reduce non-decent and/or cold and damp homes across both rented sectors









Programme success measures

More supported housing options, in the places where they're needed

Fewer homes in the social and private rented sector that have "Category 1" hazards

Fewer homes that are categorised as non-decent/More homes that are categorized as meeting the Decent Homes Standard

Fewer people in hospital when they don't need to be

Improvements in people's experience of housing, health, and care services

Improved experience of partnership/joint working across sectors

Value added by the Programme

Cross-sector leadership

Preventing duplication, creating economies of scale

Co-designing at regional, sub-regional, and local level

Providing learning and a framework for joint working in other priority areas

Governance –Integrated Partnership





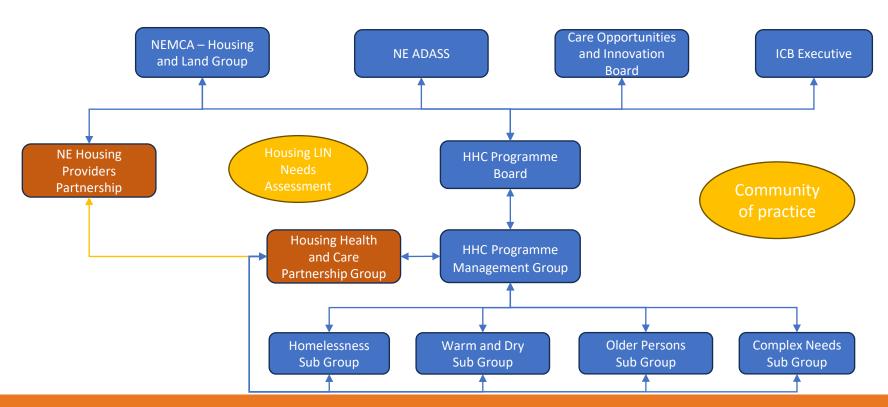




Add Homelessness into the health, housing and care programme

Engage Housing LIN to undertake a regional baseline needs assessment Align the two governance arrangements – create new supporting partnership and integrate housing reps on sub groups

Collaborate on joint commissioning framework & ways of working



Spotlight on the Community of Practice

- Purpose: Supporting local ownership and delivery, sharing good practice and building wider partnerships and voice.
- Key responsibilities: An open and inclusive forum, knowledge sharing, supporting delivery of the programme, self-sustaining collaboration
- Membership: A wider group of local authority housing and commissioning, ICB commissioning, housing providers, health partners, people with lived experience.



Complex Care

The challenge:

- Good quality homes with the right support can help people stay out of institutional care.
- However
 - Housing is the main barrier to a successful discharge across multiple health pathways, and can lead to unnecessary admissions
 - Children and young people who need specialist community support are too often placed in residential or unregulated services
 - A lack of accessible, adaptable, affordable homes is putting pressure on families and commissioned support
 - Housing providers report they are unable to bring forward the scale of development needed because of unclear/unsustainable funding sources, short-term contracting decisions, and the absence of a long-term strategy

Actions to address:

- A "Market Position Statement" by March 2024:
 - A clear understanding of supply, demand, need, workforce, and gaps,
 - Collation of best practice examples
- After that we will develop:
 - An integrated housing and care strategy for the region
 - A long-term, multi-level investment and development pipeline
- Broker cost sharing agreements to unlock subregional schemes in host local authorities
- Develop and implement a complex care commissioning framework and mechanism to facilitate sustainable provision
- Explore the use of technology in new and existing housing to enhance independence



Older People

The challenge:

- Aging population has grown, with people living with (multiple) long term conditions for significant portions of their life
- Expectations for and opportunities in relation to healthcare intervention have risen
- Family dynamics have shifted fewer two parent one worker families with capacity to support aging parents
- Heavy demand outstrips supply in the housing market meaning older peoples' housing is competing with more lucrative development opportunities for House Builders



Actions to address:

 A market 'position statement' by April 2024, outlining supply, demand, need & gaps.

After that during 2024/25:

- Promote the development of integrated urgent community response services for older people across our places
- Local strategic plans for older people's housing with improved support and engagement from health services – especially the developing integrated neighbourhood teams.
- Develop and test new homebased technologies that support independent living through TAPPI 2 principles.
- Gain agreement to implement minimum accessibility standards for building regulations.
- Roll out information, advice & guidance on housing options for older people.

Warm & Dry

The challenge:

- Top priority for Housing Teams across both sectors in wake of the tragic death of Awaab Ishak.
- Major challenge across the North and across NENC housing stock and additional burden on NHS as result of poor non decent housing.
- Capital availability is tight.
- Particular challenge in private rented sector – non-regulated, absent/difficult to track down landlords and tenants nervous to report issues.
- Cost of living pressures adding to the problem.



Actions to address:

- Overlaying data across health and housing to target interventions and investment.
- Develop approach to Making Every Contact Count across housing, health, care and other agencies, via adaption of the London toolkit
- Design and deliver a population health intervention for vulnerable health groups - learning from good practice – Durham, Warm Healthy Homes Project, Sheffield.
- Explore the role of technology monitoring of rooms and how heating is being used.
- Build the business case linking to the net zero and sustainability agenda to address cold and damp.
- Roll out information, advice & guidance for private landlords and tenants.

Supporting TEC adoption next steps

- We will make a commitment to 'think TEC' in working with partners to set out our strategic plans within our 3 priority workstreams and ensure we design solutions with TEC stitched in
- We will work with our NHS and local authority providers to adopt and optimise referral pathways from urgent community response services into commissioned 24-hour TEC responder services
- We will work to identify funding streams for provision of TEC as part of our models of care for long term conditions and frailty

