



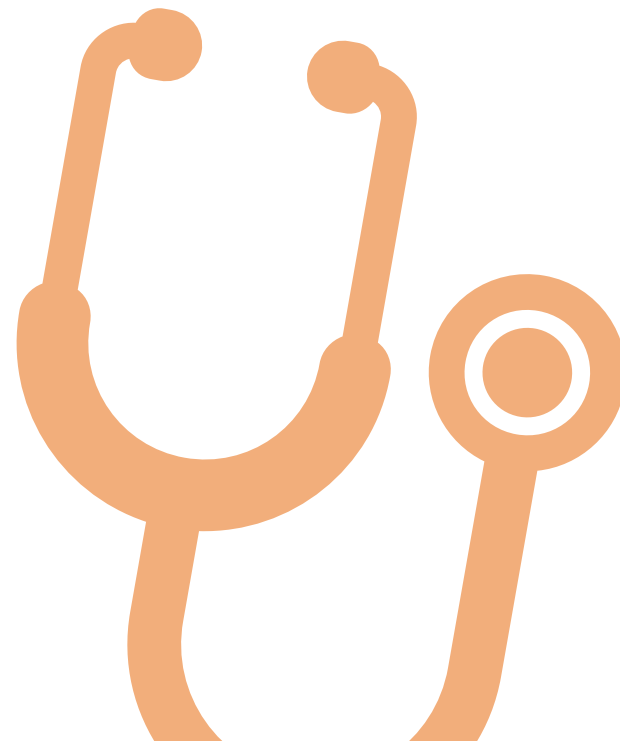
A GP's perspective...

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Part of:

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



Why does this matter?

Breaking the vicious circle of poor housing and poor health

People in bad housing are at greater risk of illness, which in turn limits their ability to afford a decent home, say **Greg Fell and Matt Ashton** of the Association of Directors of Public Health



THE HOME FRONT: CONNECTING HOUSING AND MENTAL HEALTH

11 MARCH 2024
By Andy Bell

Housing is associated with disadvantaged members

Your Living Hell set highlighted the significant work can have on outcomes for the people living in poverty which then increases themselves barrier stable homes will health inequalities. Turn this situation people will be in services, including vicious cycle bet

The importance of housing to people's mental health is widely recognised, yet remarkably poorly understood. We all know that having a home that is safe, warm, secure and affordable is a basic need for life, let alone good mental health. Links between housing, homelessness and mental health services have been difficult, often tenuous, and sometimes poor and insecure housing and homelessness are both significant causes of mental ill health and triggers for a poor mental health. Homeless people have very high rates of mental ill health. And for people with poor mental health, homelessness is often a consequence of being institutionalised.

Some NHS mental health trusts are taking steps to address these interconnections between housing, homelessness and mental health. Sheffield's mental health trust has, since the 1970s, worked alongside the city's Citizens Advice Bureau to provide access to welfare advice for people using its inpatient and community services.

More recently, two mental health trusts in the south of England have employed housing directors: Jon Pritchard in Hampshire, and Chris Harris at Sussex Partnership. Both have begun work that could herald a sea change in health support works.

Millions in poor housing in England suffer ill-health due to legal delays, says Shelter

Exclusive: Campaigners concerned that opposition from Tory MPs is delaying legal protections for renters



Death of two-year-old from mould in flat a 'defining moment', says coroner

Awabab Ishak died in 2020, eight days after his second birthday, following 'chronic exposure' in Rochdale



A number of things were wrong in the case, some of them contributing to the boy's death, the coroner said. Photograph: Family handout file

A coroner has said the death of an "engaging, lively, endearing" two-year-old from prolonged exposure to mould in his family's flat should be a "defining moment" for the UK's housing sector.

Awabab Ishak died in 2020, eight days after his second birthday, as a direct result of black mould in the flat he lived in.

About 450,000 homes in England have problems with condensation and mould and the verdict triggered calls from paediatric doctors for better reporting of air quality problems in homes. And England's housing ombudsman, Richard Blakeway, said landlords must make plans to tackle the "real risk of worsening damp and mould issues" as energy bills soar.

Michael Gove, the levelling up, housing and communities secretary, said the death was "an unacceptable tragedy" and that "it beggars belief" that the chief executive of the social housing provider was still in office. But he also said the government had been too slow to toughen regulation of social housing.

Poor housing shreds people's mental health warns expert as thousands still living in temporary accommodation

By Julia Gregory, Local Democracy Reporter | Thursday 30 November 2023 at 09:44



Housing ombudsman in England calls to re-establish link between housing and health

Exclusive: Richard Blakeway says parts of social housing sector have reached breaking point



5,000 households in social housing in England are believed to be living with serious mould problems. Photograph: Nikolay Malshakov/Alamy

Housing ombudsman in England is calling for an independent royal commission to "reimagine the future of social housing" and re-establish the link between housing and health.

Richard Blakeway, who handles thousands of tenants' complaints about poor housing, repair, discrimination and squalor, said that parts of the social housing sector had reached breaking point, with residents desperate for help.



How housing affects my patients – their stories......



Fred's story...

An 80 year old man with Raynaud's

Cold caused a flare in his disease, as he can't afford the heating, so was admitted to hospital last year. He came to see me for medical options this year to avoid admission. A neighbour lent him an electric heater, we gave food parcels and asked our social prescriber to support him.

Impact of hospital admission for an elderly patient:

- Physical pain from the flare
- Risk of hospital-acquired infections, DVT, falls, delirium
- Deconditioning from being in bed - 30% of muscle mass lost within the first 10 days of critical illness
- Non-elective NHS bed unit cost per day £492* - 14 days = £6,883

*ICB 2023/24 SUS data, costed at nationally published tariff



But imagine if:

- Homes were properly insulated with efficient heating systems?
- Or if his housing officer was aware of his problem and able to provide proactive support?



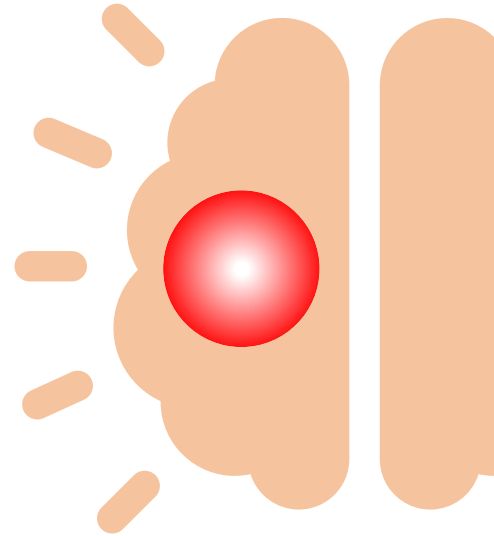
Gillian's story...

A 40 year old lady with previous stroke

She has limited mobility so spends a lot of time in house, struggling to get control of her hypertension, also has anxiety and depression. Asked for letter to support rehousing due to noisy, unpleasant neighbours.

Impact:

- Vulnerable lady living alone. Poor mental health, post-stroke anxiety and depression are common – exacerbated by her housing setup
- Poor blood pressure control – increased risk of further stroke. Stress related to her home situation likely to have an impact on this



But imagine if:

- There was an opportunity for social prescribing input
- Pathways for appropriate housing with acknowledgement of underlying medical conditions - GP training and awareness and vice versa



John's story...

An 85 year old man with dementia

Impact:

- Family concerned about wandering and the risk of him wandering alone and getting lost. Always needs a family member around – this led to carer stress/ burnout leading to care home respite admission. Became aggressive and violent during this admission due to change in his environment, the home was unable to manage this. He was admitted to hospital over the weekend leading to a long stay
- This led to deconditioning in hospital and further upset from another new environment
- Discharged to another care home



But imagine if:

- His family knew how they could use technology to keep him in his own home, this could have avoided hospitalisation and prolonged his time in his own home
- When he was first diagnosed, we proactively looked into the best suitable housing options



In summary...

- Choosing between a care home and home care isn't just a financial decision – finding the best care solution is personal and unique.
- Interaction needed between health and housing - **but** we don't have the same connections with our housing counterparts as we do with other parts of the system
- Clear benefits to the individuals – personalising their care

Potential benefits to the system:

- Reduces hospital stays
- Reduces care packages
- Reduces rent arrears e.g. maximising allowances and benefits for those unable to work
- Reduce duplication e.g. joint social prescribers / key workers
- Healthy happy communities

