

A Warm Healthy Home for Everyone



Photo: Friends of the Earth

Jo Butcher
Independent Adviser and Consultant

Health and well-being

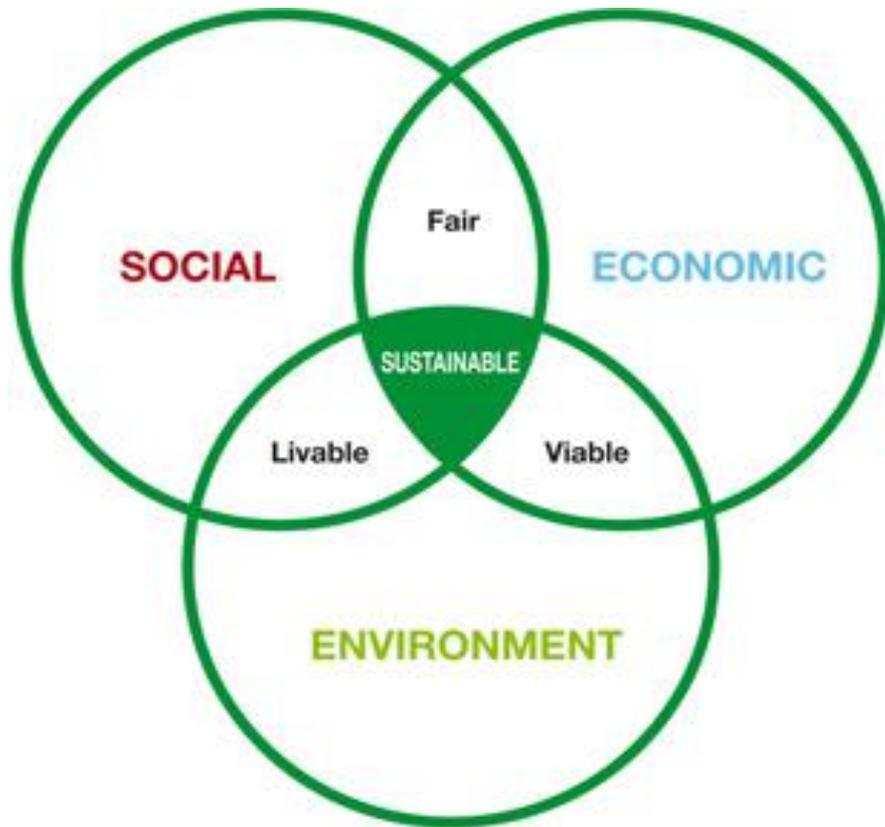
“the health and well-being of all citizens is shaped by social, economic and environmental determinants and the challenge of persistent health inequalities cannot be satisfactorily addressed by any single agency alone”

Source: NHS Confederation 2011, Briefing 221
The JSNA

“If we continue as we are – with CO2 outputs five times what is sustainable – we face a dangerously uncertain future for health and well-being. We need to implement strategies that will effect real and lasting change. The most widely accepted strategy is *sustainable development*”

Source: Faculty of Public Health , Sustaining a
Healthy Future 2008

Holistic approach



- Improved health and well-being for individuals and communities
- Reduced burden on services
- Cost and efficiency savings
- Increased energy efficiency action
- Reduced carbon emissions
- New jobs
- Community resilience
- Climate change adaptation

Proactive and systematic approach to partnership working

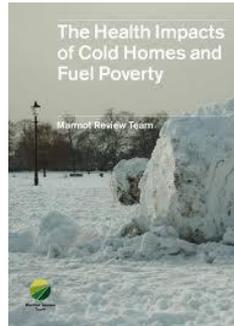


- Make the case
- Understand long term benefits of working together
- Understand the problem
- Understand added value
- Share data and intelligence

Building the evidence base



THE COCHRANE
COLLABORATION®



Association for the
Conservation of
Energy

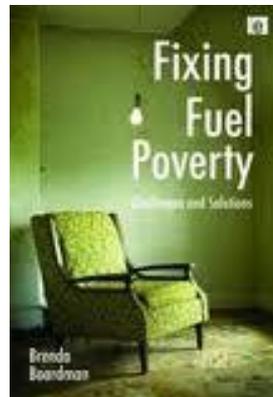


Public Health
England

Consumer
Futures



LONDON
SCHOOL of
HYGIENE
& TROPICAL
MEDICINE



Sheffield
Hallam
University



Direct health and well-being impacts

Older People

- 31,100 excess winter deaths – mainly over 75s
- Circulatory and respiratory illnesses
- Those with dementia and Alzheimer's Disease at risk
- Falls and accidents
- Worsening of existing health conditions or slow recovery from illness



Children and young people

Infants

- 30% more likely to visit hospitals or primary care services in the first three years of life, and are likely to be underweight (families not receiving fuel subsidies)

Children

- Twice as likely to develop asthma compared to those living in warm homes

Young people

- 1 in 4 at risk of multiple health problems compared to 1 in 20 who have always lived in a warm home



Photo: Energy Bill Revolution

Young adults

- Dearth of research
- Students - University of Birmingham study
- Others potentially affected:
 - ❖ 16-24 year olds living independently
 - ❖ Young parents



Indirect impacts on health and well-being

- Harsh choices for families
- “Heat or eat”
- Impact on education/study
- Reduced resilience
- Social
- Quality of life
- Lifelong impacts



The Health System

TheKingsFund >

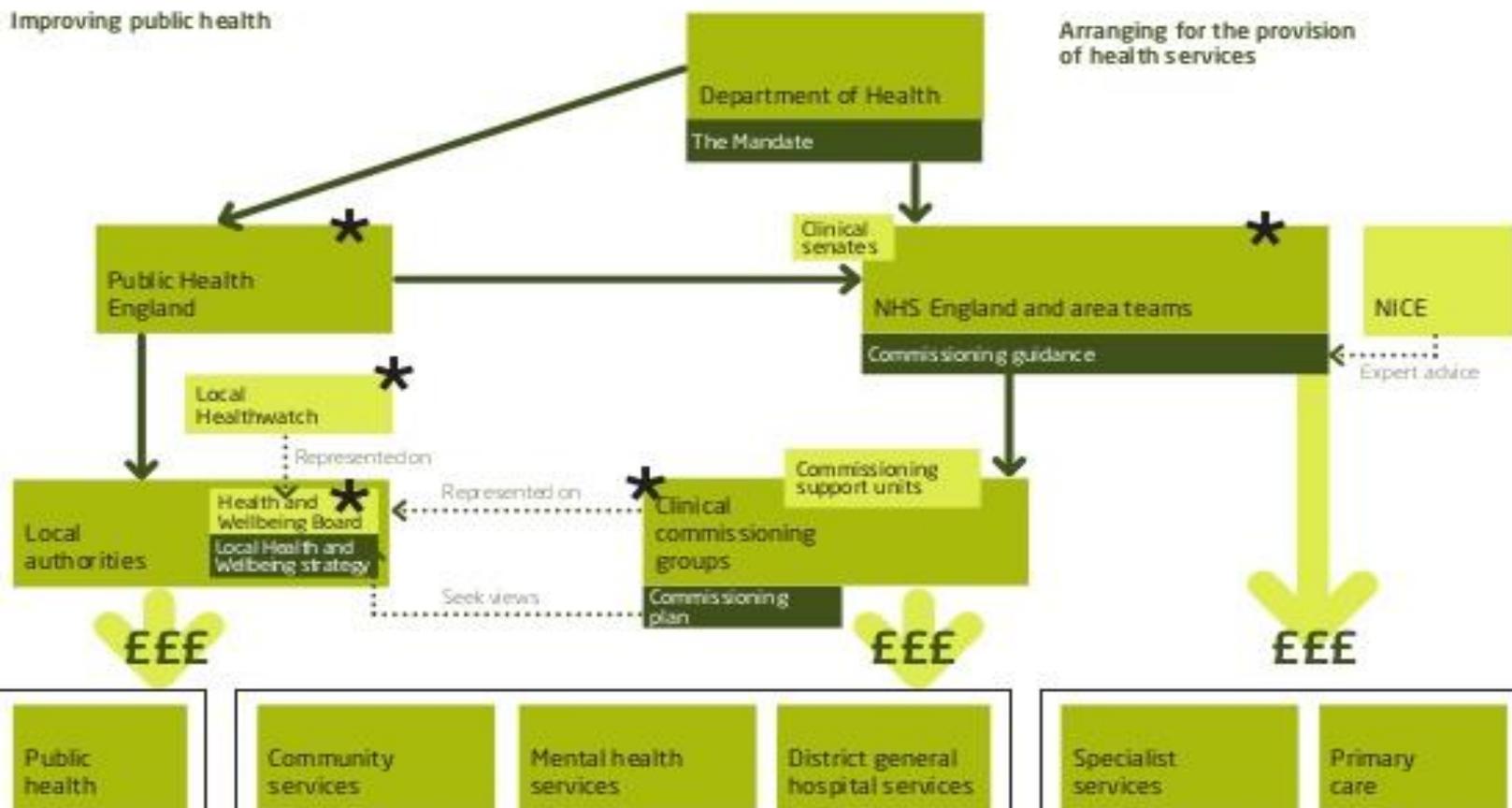
Ideas that change health care

The new NHS: Who can influence commissioning of services

key
 * new organisations from April 2013
 Commissioning plan

Improving public health

Arranging for the provision of health services



Source: The Kings Fund website 2013

Health and Well-being Boards

- Shared and compelling vision for health and well-being of their population
- Systematic and collaborative leadership and strategic influence
- Democratic accountability
- Integration and partnership
- Know and work with their community
- Joint Strategic Needs Assessment (JSNA) and health and well-being strategy

Clinical Commissioning Groups (CCGs)

- Commission local health and care services
- Hooks – social prescribing, Better Care Fund
- Outcomes – health and well-being, reduce emergency admissions/readmissions and GP consultations
- Local partnerships with CCGs on fuel poverty:
 - ❖ Energy Solutions, North West London
 - ❖ Gentoo, Sunderland

A good Joint Strategic Needs Assessment (JSNA)

Five principles behind a good JSNA:

- No need exists in isolation
- Partnership is part of the solution
- A clear picture of needs means stronger partnerships
- Demand is not the same as need
- Each JSNA requires local design

“We would encourage all partners involved in developing JSNAs to look at the broad determinants of health, such as housing, education and employment, as well as the physical and mental well-being of communities. If the JSNA remains focused on health services, public health and social care alone, it may require fewer resources but will provide a limited analysis of the needs and assets of the community and may not engage or inform key partners, which is surely one of the key benefits.”

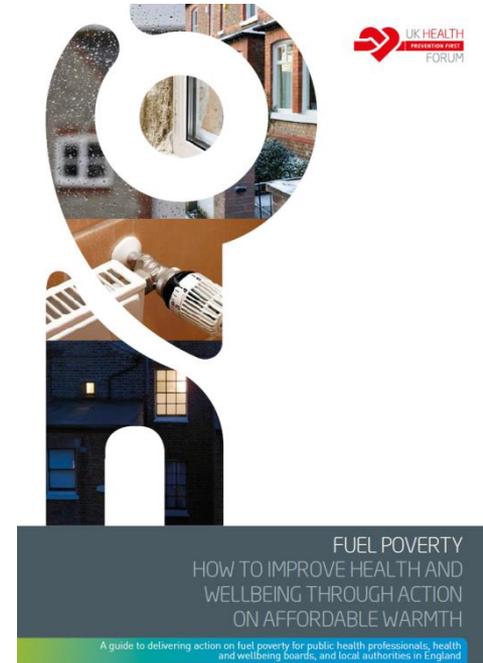
Influencing health decision-making and delivery

- Get to know H&WB Board and CCG members
- Champion carbon reduction and health links
- Understand strategy development and JSNA processes, timings etc.
- Share data to inform planning and delivery
- Support capacity building within health teams
- Community engagement
- Pool resources

Fuel Poverty & Health Toolkit “Bundle”

The toolkit “bundle” lives on the *Fuel Poverty* key issue page under the *Healthy Housing* theme:

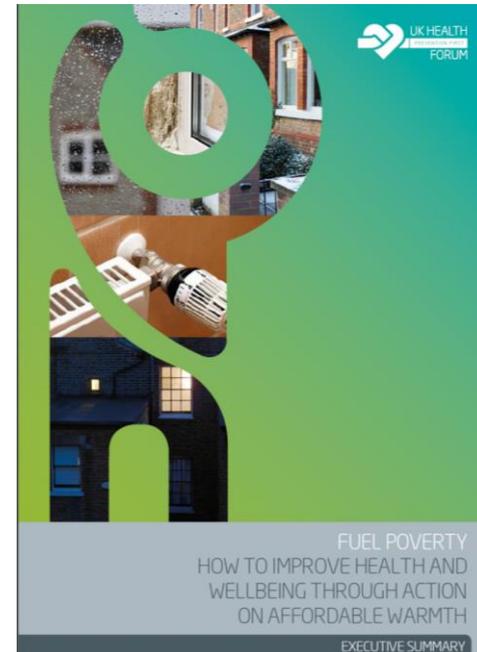
- GUIDE
- EXECUTIVE SUMMARY
- GP/primary care supplement – *COMING SOON*
- “Living” list of **resources & signposts** – with active links, easy to update
- **Case Studies** – fuel poverty specific within the Healthy Places directory
- Appropriate **regulatory options** – *in development*
- Fuel poverty specific **news** feed - members resources



Fuel Poverty & Health Guide

The **guide** highlights the latest evidence and current policy framework...

- An introduction to fuel poverty
- The effects of fuel poverty and cold homes on health and well-being
- The national and local policy framework for tackling and preventing fuel poverty and cold homes
- The role of Health & Well-being Boards, public health teams and health professionals in addressing fuel poverty and cold homes



How the toolkit “bundle” can help non-health professionals

- Make the case
- Opportunities to influence strategic health decision making and delivery
- Collaboration and partnership working

APPENDIX A

NATIONAL OUTCOME INDICATORS LINKED TO ACTION ON FUEL POVERTY AND COLD HOMES ACROSS THE ENTIRE HEALTH AND CARE SYSTEM

National Outcomes Frameworks	Public health	NHS	Social care
Domains Bold text denotes shared indicators.	<ul style="list-style-type: none"> • Improving the wider determinants of health • Health improvement • Health protection • Healthcare public health • Reducing premature mortality 	<ul style="list-style-type: none"> • Preventing people from dying prematurely • Enhancing quality of life for people with long term conditions • Helping people to recover from episodes of ill health • Ensuring that people have a positive experience of care • Treating and caring for people in a safe environment and protect them from avoidable harm 	<ul style="list-style-type: none"> • Enhancing quality of life for people with care and support needs • Delaying and reducing the need for care and support • Ensuring people have a positive experience of care and support • Safeguarding adults whose circumstances make them vulnerable and protecting them from avoidable harm
Indicators Numbering corresponds to indicators in the specific National Outcomes Frameworks.	<ul style="list-style-type: none"> 1.1 Children in poverty 1.2 School readiness 1.3 Pupil absence 1.9 Sickness absence rate 1.17 Fuel poverty 1.18 Social isolation 2.1 Low birth weight of term babies 2.11 Diet 2.22 Self-reported well-being 2.24 Falls and injuries in the over 65s 3.3 Population vaccination coverage 3.6 Public sector organisations with board-approved sustainable development management plan 3.7 Comprehensive, agreed inter-agency plans for responding to public health incidents 4.3 Mortality from causes considered preventable 4.4 Under 75 mortality from all cardiovascular diseases (including heart disease and stroke) 4.7 Under 75 mortality from respiratory diseases 4.8 Under 75 mortality from communicable diseases 4.11 Emergency readmissions 4.13 Health-related quality of life for older people 4.14 Hip fractures in people aged 65 and over 4.15 Excess winter deaths 	<ul style="list-style-type: none"> 1a Potential Years of Life Lost (PYLL) from causes amenable to healthcare (adults and children and young people) 1b Life expectancy at 75 (males and females) 2 Health related quality of life for people with long term conditions • Reducing time spent in hospital by people with long term conditions • Enhancing quality of life for people with mental illness • Enhancing quality of life for people with dementia 3a Emergency admissions for acute conditions that should not usually require hospital admissions 3b Emergency readmissions within 30 days of discharge from hospital • Preventing lower respiratory tract infections in children from becoming serious • Improving recovery from injuries and trauma • Helping older people to recover their independence after illness or injury 4a Patient experience of primary care 4b Patient experience of hospital care • Improving hospital responsiveness to personal needs • Improving children and young people's experience of healthcare • Improving people's experience of integrated care 	<ul style="list-style-type: none"> 1a Social care-related quality of life: <ul style="list-style-type: none"> • proportion of service users who have control over their daily life • proportion of service users and their carers who reported that they had as much social contact as they would like. 2 Permanent admissions to residential and nursing care homes, per 1,000 population <ul style="list-style-type: none"> • Everybody has the opportunity to have the best health and well-being throughout their life, and can access support and information to help them manage their care needs • Earlier diagnosis, intervention and rehabilitation means that people and their carers are less dependent on intensive services • Dementia – a measure of effectiveness of post-diagnosis care in sustaining independence and improving quality of life 3 People who use social care and their carers are satisfied with their experience of care and support services <ul style="list-style-type: none"> • Improving people's experience of integrated care • People know what choices are available to them locally, what they are entitled to and who to contact when they need help • People, including those involved in making decisions on social care, respect the dignity of the individual and ensure support is sensitive to the circumstances of the individual 4 People are protected as far as possible from avoidable harm, disease and injuries

Fuel Poverty and Health Toolkit

www.healthyplaces.org.uk



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Project Partners:



Public Health
England



Department
of Energy &
Climate Change



**friends of
the earth**



People's stories

“Oh my god, I can't believe somebody is going to help me financially with my heating costs, it will make all the difference with being able to buy food or just have sandwiches for tea. It was so simple and they might be able to help with my boiler too. They are sending somebody round to check the house to see if they can make it more energy efficient. I still just can't believe it, I feel shaky and like I'm going to cry any minute. Thank you all so much again.”

Single mother with three children aged under 6, privately owned property. Department of Health (2013) Annual Report of the Chief Medical Officer 2012 – Our Children Deserve Better: Prevention Pays.

Advocacy and participation

NCB Young Media Champions Polly, 13, Blackburn

“Two years ago, during Christmas time, our boiler broke and it was very, very cold. I thought it couldn't get any worse until I learned about the campaign and heard some of the experiences of other young people. It made me realise that it's not acceptable for people to be living in these conditions day in, day out”.

BECAUSE
EVERY CHILD
IN THE WORLD
HAS ONE THING
IN COMMON.
THEIR RIGHTS.



Photo: Energy Bill Revolution

Contact

Jo Butcher

Independent Adviser and Consultant

Health, Environment and Youth

E: jbutcher040@gmail.com

T. 07957 630893