



Co-operation

Between Social Housing and Health Care Providers: A New Future Partnership Opportunity

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Context

- Spiralling demand for health care services - growth in demand is 7% per year.
- Primary driver is an aging population, with baby boomers (the post war bulge in the population) beginning to work their way through demographic and demand projections
(Office for National Statistics, 2012
Age breakdown of England population by national population projections (2012 & 2032).)
- Health care accounts for less than 50% a population's health status (for example *McGinnis et al, 2002* and *Kuznetsova, et al 2012*).



Context

- The wider determinants of health therefore have an important role to play.
- Rising education attainment, improved working and living conditions, and greater access to green space, all have a positive impact on population health (Marmot, Fair Society, Health Lives 2010)
- As do a reduction of unhealthy behaviours: smoking, drinking, low consumption of fruit and vegetables, low levels of physical activity.
- More disadvantaged groups are more likely to have a cluster of unhealthy behaviours (Buck & Frosini, 2012, *Clustering of unhealthy behaviours Over Time: Implications for Policy and Practice*).

“Our health is determined by a complex interaction between our individual characteristics, our lifestyle and the physical, social and economic environment”
(The King’s Fund, Future Trends, November 2012).

Social Housing and Deprivation

Of the four million social housing properties in England more than half are in the top 20% most deprived neighbourhoods (S Greenhalgh and J Moss, *Principles for Social Housing Reform*, 2009, Localis).

“In many disease areas, such as heart disease, there are also distinct social gradients in the prevalence and incidence of disease, with people more deprived populations experiencing more disease and multiple diseases... if anything, these health inequalities are likely to worsen rather than improve over the next 20 years”
(The Kings Fund, *Future Trends*, November 2012).



A Moment of Partnership Opportunity

- New NHS architecture.
- Relationships with:
 - Clinical Commissioning Groups
 - National Commissioning Group and its local variants
 - Health and Wellbeing Boards
 - Public health within local authorities and addressing wider determinants in partnership to tackle health inequalities.
- Key danger and barrier is that this transformation landscape means leaders in the short term may be too busy to fully engage.



Areas of Partnership Opportunity



- Take an individual, community and neighbourhood approach.
- Design helping physical activities, fuel poverty, locality heat
- Work to encourage/nudge healthy behaviours working with tenants and residents groups.
- Encourage within the UK Housing Co-operatives boosting belonging and a sense of place and importance, evidence of better health outcomes (see CCMH, *Bringing Democracy Home*, 2009).
- Health promotion settings approach – social housing neighbourhood setting.

Areas of Partnership Opportunity



- Supporting work and enterprise creations, people in work have generally better health outcomes.
- Social housing providers need to be more entrepreneurial around the health care agenda addressing health outcomes and better at working at working in partnership.
- Dementia initiatives such as the Eden Alternative and dementia cafes
- New landscape is an opportunity for co-operation, the danger is the new players will not have capacity to engage.
- Experience in Freiburg, Sweden and Norway – healthy design, co-operatives, collective design, communities in control, fuel poverty, community ownership of energy infrastructure.

Four Examples

Health for Living



- Partnership with three voluntary sector organisations
- Involvement with commissioners
- Co-production and co-design
- Already successful with two projects, confidence and well being and children's centres, created turnover of £12m over three years.

Direct Health

- Acquisition of substantial private sector company by the Group providing Domiciliary care, Residential care and Specialist care
- Substantial profit making company, gift aiding profit to charity (accord) to reinvest in core purpose
- Platform for continues private sector growth

Four Examples

AddVentures

- Employment and enterprise creation
- Health and wellbeing outcomes better for those in employment and having more control over their lives
- Two strands:
 - Projects within the Group – *“Tides” Model*
 - Projects with tenants – *Rise and the A Fund*



Four Examples

Affordable Warmth

- Energy Services Company providing low cost energy for tenants in partnership with local authorities and other housing providers.
- SHAP - joint procurement, research and promotion partners include housing associations, local authorities and contractors.
- Fit For The Future – training residents on climate change and installation of green technology in partnership with higher education partners and LA and contractors.



- Green Homes, Green Skills – joint project to reduce carbon emissions in around 2500 homes and create 'green jobs'
- ERDF programme to retrofit existing properties in partnership with other agencies worth £3m

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