

Health Improvement Partnership Board, September 2017

1. Briefing on Fuel Poverty, Health and a suggested strategic direction

- 1.1 The Health Improvement Board requested a workshop to encourage greater collaboration and joint working between organisations tackling fuel poverty and to identify areas for further targeted work. This would help set the strategic direction for Oxfordshire fuel poverty work. Recommendations from the workshop have been incorporated into this report.
- 1.2 The Health Improvement Board is asked to approve the work laid out in this report. It is requested that yearly reports are received on this topic.

2. Background

- 2.1 Low household income, poor energy efficiency of home (higher energy bills) and high energy prices (which also mean energy bills are higher) all have an impact on fuel poverty. If someone has to spend a lot of time in their home, this makes it more likely that they may struggle with energy bills and heating their home to a healthy temperature. Oxfordshire residents living in off gas areas are likely to pay more to heat their homes as alternatives are more expensive.
- 2.2 The government's *Low Income High Cost (LIHC)* indicator models where residents have fuel costs above average (i.e. energy inefficient home) and were they to spend that amount, they would be left with a residual income below the official poverty line.
- 2.3 According to the 2015 LIHC indicator, England has an average of 11.0% of households in fuel poverty, the South East 9.4% and Oxfordshire's average is 9.6%. The rate varies across the county: Cherwell is 9.3%, and South Oxfordshire is 8.5%, Vale of White Horse is 8.4%, West Oxfordshire 8.7% and Oxford 12.8%. The rate often varies considerably in smaller areas within the districts too. All of the modelled rates have increased in 2015 from the previous year.
- 2.4 In their [Fuel Poverty Strategy](#)¹, the government showed the importance of energy efficient homes in addressing fuel poverty with a target to **“Ensure that as many fuel poor homes as is reasonably practicable achieve a minimum energy efficiency standard of Band C in their Energy Performance Certificate, by 2030.”** Energy Performance Certificates rate properties that are being rented out or sold on their energy efficiency. Energy Company Obligation (ECO) funding, an obligation put on energy companies by the government to finance the energy efficiency of properties, is therefore now targeted at residents considered to be in fuel poverty.

¹ <https://www.gov.uk/government/publications/cutting-the-cost-of-keeping-warm>

3. Links with health

- 3.1 [The National Institute for Health and Care Excellence \(NICE\) guidance on cold homes](#)² includes people with the following as particularly vulnerable to cold homes. This includes cardiovascular conditions, respiratory conditions (COPD, childhood asthma), mental health conditions, disabilities, older people (65+), households with children under 5, pregnant women and people on a low income.
- 3.2 NICE guidelines recommend that in addition to setting a strategy, **Health and Wellbeing Boards should ensure or commission a local single point of contact for vulnerable people living in cold homes** which should be used by those in contact with vulnerable groups and be linked in with local referral services.

4. What good practice can we look to?

- 4.1 The workshop included a presentation on [SHINE \(Seasonal Health Intervention Network\)](#)³, an Islington based, one-stop referral system for affordable warmth and seasonal health interventions. A single referral to SHINE leads to an assessment for around thirty potential interventions which include health and social care related ones. Included are energy advice, support and grants, benefits checks, energy doctor home visit, falls assessments, telecare applications, befriending services, fire safety checks and a handyman service. A quick video of the services can be found at <https://www.ashden.org/winners/shine>

5. Current work in Oxfordshire

- 5.1 The Affordable Warmth Network (AWN) partnership comprises the County, City and District councils, who all contribute to the network's annual running costs of £39,740 including VAT as well as non-paying partners including Age UK, Citizens Advice and the Oxford Diocese.
- 5.2 The charity National Energy Foundation (NEF), the provider from whom services are commissioned) provide administration support for the AWN partnership, compile reports to the Health Improvement Board (HIB) on the Fuel Poverty indicator, provide the free telephone and email single point of contact advice service and associated back-office functions, undertake bid writing, pulling in other partners and funds. They are now referring Oxfordshire clients to the LEAP project which incorporates home visits, small energy repairs and income maximisation advice. To maintain this single point of contact and service carried out by NEF, an annual commitment of £39,740 is required from Oxfordshire local authorities. This will continue to be needed, but recommended changes in this report will noticeably improve the value for money from this service.
- 5.3 Across Oxfordshire and Buckinghamshire, the Better Housing Better Health scheme offered grants for energy efficiency measures, home energy visits and assistance with energy, benefits and financial support. NEF, on behalf of

² <https://www.nice.org.uk/guidance/ng6>

³ <https://www.islington.gov.uk/environment/energy-services/shine>

the AWN, applied for this funding as part of their role to lever in external funding for Oxfordshire. This resulted in 216 energy efficiency measures being installed, 71% of recipients reporting an improvement in health and wellbeing, estimated savings of £107,990 to the NHS, £53,840 of fuel debt being cleared and 131 people switching energy tariff or supplier (amongst other benefits). For more information check the video at <https://youtu.be/gTpitJYiso8>.

6. Principles for moving forward

- 6.1 The workshop highlighted a need to minimise duplication and therefore increase strong partnership working across Oxfordshire local authorities, health and social care professionals and advice providers. This will support the further roll out of fuel poverty related work across Oxfordshire. In the shorter term (i.e. immediate future), residents with health issues should be prioritised. In the longer term, every energy inefficient home in Oxfordshire should be addressed as they represent potential cold damp homes and therefore future health problems.
- 6.2 The current AWN advice service offers a consistent single point of contact for both residents and professionals to refer into – as recommended by the NICE guidelines. It now also refers directly to the LEAP project. This service offers a good starting point for a more holistic Oxfordshire service, and now offers an improved website. It needs to continue to offer value for money.
- 6.3 However, to move towards the provision of an integrated, multi-referral service (such as the SHINE service), the following changes are suggested **for the Board's approval**:
 - a. A new service incorporating the helpline and all onward referrals called 'Better Housing Better Health '(BHBH) will be established and rebranded. This will be promoted as a single point of contact service referring out to all relevant services and funding streams available at the time, including those currently under the banner of 'BHBH'. This will minimise confusion and duplication, and maximise engagement.
 - b. The service will offer direct referrals only rather than signposting thereby consistently linking in with all other services, reducing the number of people dropping out and producing more measurable outputs.
 - c. The AWN will aspire to increase the number of health and social care services that BHBH refers each year. In the first year, the target will be to incorporate the falls service, fire service, befriending service and Oxfordshire advice services.
 - d. In order to enable more referrals from health, social care and other frontline staff, the AWN partnership will clarify and clearly lay out the 'offer' from the service. This will be publicised to appropriate frontline professionals, partly via training packages (online and face to face) and can be aligned with the recent update of the [AWN website](#) ⁴.
 - e. Health and social care practitioners will be take up offers of education and training to increase awareness of fuel poverty related resources provided via the single point of contact and how to refer in. They will therefore refer all appropriate clients in to take advantage of the service.

⁴ <http://affordablewarmthnetwork.org/>

- f. All services engaged with the new Better Housing Better Health service (including the single point of contact) will utilise existing Live Well and Family Integration Services databases to register their own services and seek other appropriate referrals where necessary. This further encourages integration within health and social care.

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