



Action for Warm Homes

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THE MANY FACES OF FUEL POVERTY

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Under One Roof: tackling fuel poverty and cold-related ill health together

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About the research...

- Commissioned by Liverpool City Council, funded by BEIS (Department for Business, Energy and Industrial Strategy)
- Evidence and practice where health and social care bodies have worked in partnership with fuel poverty alleviation schemes
- Identifies the types of evidence commissioners require
- Aimed at local programme delivery organisations as well as national policy and programme funding organisations

New toolkits

Complements new BEIS-funded toolkit produced by Cornwall Council and Citizens Advice

This can be accessed through the following link:

<https://www.citizensadvice.org.uk/cold-homes-toolkit/>

Under One Roof: scope of the report

- Current evidence and practice
- Health-based fuel poverty schemes that have been able to secure engagement from health and social care sector or public health to date
- Extent to which health and social care bodies have been involved in commissioning and funding decisions
- Type of evidence required and how this is collected in different areas
- Recommendations for scheme providers and national policymakers/commissioners

Embedding cross-sector action locally

Recommendation 1: Local delivery programmes should follow NICE (National Institute for Health and Care Excellence) NG6 guidelines on Excess Winter Deaths and illness and the health risks associated with cold homes)

Recommendation 2: Identify the outcomes, pathways and language necessary to link local identified health priorities with national strategic aims prior to engaging health professionals

Recommendation 3: Local public health practitioners should be persistent in making their local case for addressing cold-related ill health; to secure senior local public health buy-in and use local top and lower-level routes to engage health & social care

Integrating a focus on prevention

Recommendation 4: Health and social care commissioning bodies should review new ways of using existing mechanisms to ensure more consistent delivery in line with the NG6 and the NHS Five Year Forward View.

Recommendation 5: Health and social care sector bodies should review how they incorporate the requirements of the Social Value Act into their service delivery, and to support the wider roll-out of social prescribing ‘plus’ models that include initiatives to tackle cold-related ill health.

Building a case for support

Recommendation 6: Delivery programmes building and evidencing a case for support should compile the full set of data available to them

Recommendation 7: Local areas looking to replicate good practice evaluations of relevant schemes should consider use of existing and available toolkits

Monitoring and evaluation

Recommendation 8: Long-term monitoring and evaluation is recommended at a national scale

Recommendation 9: BEIS should continue work to fully monetise the health benefits of meeting fuel poverty commitments, and make the improved HIDEEM model available to local practitioners as soon as possible

Recommendation 10: Perceived constraints of the regulations surrounding data-sharing should be challenged to enable greater data-sharing in a standardised and regulated fashion between health and local delivery bodies.

Implementing NICE NG6

Recommendation 11: NICE, with support from Public Health England (PHE), NHS England and BEIS should continue to promote and encourage implementation of its NG6 guidance across the board and with a specific focus on embedding NG6 in Sustainability and Transformation Planning within the NHS.

Encouraging cross-departmental collaboration

Recommendation 12: A new ministerial position or Cabinet Office-led working group would support cross-departmental working, join up national frameworks and help co-ordinate national actions

Recommendation 13: In the short-term, consideration should be given to the re-establishment of government-funded grants to encourage the activities previously undertaken via DoH's Warm Homes Healthy People Fund (WHHP) or DECC's previous Health Booster Fund

Enabling prevention-oriented commissioning

Recommendation 14: Building on the learnings from Vanguard Sites, it should be considered how the NHS can further change the way it delivers its services to focus more on prevention and service integration, as set out in the NHS Five Year Forward View (2014).

Recommendation 15: It is recommended that Health and Wellbeing boards should be given limited executive powers to enforce the actions deemed necessary in the local Joint Strategic Needs Assessment (JSNA)

Thank you

Full report available at: www.nea.org.uk/research/under-one-roof

Executive summary available at NEA exhibition stand

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