# HOUSING & NEW HOMES COMMITTEE

# Agenda Item 28

Brighton & Hove City Council

Subject: Fuel Poverty and Affordable Warmth Strategy for

**Brighton & Hove** 

Date of Meeting: 23 September 2015

Report of: Executive Director Environment Development &

Housing

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Ward(s) affected: All

#### FOR GENERAL RELEASE

## 1. PURPOSE OF REPORT AND POLICY CONTEXT

- 1.1 The National Institute for Health and Care Excellence (NICE) released guidance in March 2015 entitled 'Excess winter deaths and morbidity and the health risks associated with cold homes'. The guidance provides evidence based recommendations on how to reduce the risk of death and ill health associated with living in a cold home. The health problems associated with cold homes are experienced during 'normal' winter temperatures, not just during extremely cold weather. The guidelines propose that year-round planning and action by multiple sectors is needed to reduce these risks. Accordingly the guidelines are aimed at commissioners, managers, housing providers and health, social care and voluntary sector practitioners who deal with vulnerable people who may have health problems caused, or exacerbated, by living in a cold home.
- 1.2 In response to the NICE guidelines and the recent national fuel poverty strategy for England, 'Cutting the cost of keeping warm', a Fuel Poverty and Affordable Warmth Strategy for Brighton & Hove is being developed with an associated action plan. The Housing and Public Health departments, working with key partners in the city, will develop this over the coming months. The action plan builds on existing good practice and partnership working between the Housing and Public Health departments, with local NHS and community and voluntary sector organisations, such as the Citizen's Advice Bureau and Age UK, and identifies where this activity needs to be scaled up and accelerated to address the issues.
- 1.3 A draft action plan in response to the NICE guidelines is attached as Appendix 1. This will also be presented to the Health & Wellbeing Board in October, as the body that is recommended in the guidelines, to develop a 'strategy to address the health consequences of cold homes'.

#### 2. RECOMMENDATIONS:

- 2.1 That committee note the contents of this report and the NICE guidelines and recommendations.
- 2.2 That committee notes the ongoing work to develop a wider Fuel Poverty and Affordable Warmth Strategy, a draft of which will be brought to a future meeting for approval.

#### 3. CONTEXT / BACKGROUND INFORMATION

- 3.1 Public Health England's 2014 Cold Weather Plan states that winter weather has a direct effect on the incidence of: heart attack, stroke, respiratory disease, flu, falls and injuries and hypothermia. Indirect effects include mental health problems such as depression, and the risk of carbon monoxide poisoning if boilers, cooking and heating appliances are poorly maintained or poorly ventilated.
- 3.2 A wide range of people are vulnerable to the cold, including:
  - people with cardiovascular conditions
  - people with respiratory conditions (in particular, chronic obstructive pulmonary disease and childhood asthma)
  - people with mental health conditions
  - · people with disabilities
  - older people (65 and older)
  - households with young children (from new-born to school age)
  - pregnant women
  - people on a low income.
- 3.3 The UK has a relatively high rate of Excess Winter Deaths (EWD), based on international comparisons that use this definition. The EWD Index expresses excess winter deaths as a percentage increase of the expected deaths based on non-winter deaths. The number of EWD varies between years with an average of 25,000 in England each winter. The Brighton & Hove Joint Strategic Needs Assessment (JSNA) 2015 identifies the health risks of cold homes including winter deaths. For 2012-13 the EWD Index in Brighton & Hove was 19%, equivalent to 130 Excess Winter Deaths.
- 3.4 EWD are almost three times higher in the coldest quarter of housing than in the warmest quarter, with an estimated 40% of all EWD being attributable to inadequate housing. The majority of EWD occur in those aged 65+ with 93% of EWD in England occurring in this age group during 2012-2013.
- 3.5 The NICE guidelines make recommendations, with the aim to:
  - Reduce preventable excess winter death rates
  - Improve health and wellbeing among vulnerable groups
  - Reduce pressure on health and social care services

- Reduce fuel poverty and the risk of fuel debt or being disconnected from gas and electricity supplies
- Improve the energy efficiency of homes.
- 3.6 A household is defined as being in fuel poverty if it;
  - has an income below the poverty line (including if meeting its required energy bill would push it below the poverty line); and
  - has higher than average energy costs.
- 3.7 In Brighton & Hove the 2015 Housing Strategy aims to create 'Decent Warm & Healthy Homes' under the priority of improving housing quality; however the housing stock in Brighton & Hove presents a number of challenges to improving it's energy efficiency. The 2008 House Condition Survey showed that the age profile of the total private housing stock differs from the average for England in that there is a substantially higher proportion of pre 1919 stock at 40% compared to the national average of 25%. Overall the stock profile is older than the national picture with 66% built before 1945 compared to 43% in England as a whole. Many private sector properties are labelled 'hard to treat' (e.g. those with solid walls) in relation to standard energy efficiency measures.
- 3.8 The 2011 census showed that the size of the private rented sector in Brighton & Hove has increased by 37% since 2001 with an extra 10,691 homes. Two out of every seven households in the city are now renting from a private landlord, with the city having the 9<sup>th</sup> largest private rented sector in England & Wales with a total of 34,081 private rented homes.
- 3.9 The factors outlined above can consequently impact on the ability of homeowners, landlords and tenants to improve the energy efficiency of properties and therefore on occupiers to live in warm and healthy homes. The most recent annual fuel poverty statistics report estimated that nearly 15,000 (11.9%) of the city households were estimated to be living in fuel poverty in 2013, higher than the average for the south east region (8.1%). The report also estimated that across England as a whole the level of fuel poverty is considerably higher in the private rented sector (19% of all households in this tenure are fuel poor). This tenure is associated with relatively poor energy efficiency ratings and relatively low incomes which are key drivers of fuel poverty.
- 3.10 Led by the Council's Housing and Public Health departments, a steering group will be established over the coming months, to include representatives from relevant NHS partners, housing, social care and community and voluntary sector organisations to oversee the development of an over-arching Fuel Poverty and Affordable Warmth Strategy for the city. The aim will be to 'embed' the recommendations contained in the NICE guidelines into relevant organisation systems, processes and service delivery where possible. This strategy will also reflect the objectives within the national Fuel Poverty Strategy released in March 2015 at a local level for Brighton & Hove.
- 3.11 It is proposed that a draft of the new Fuel Poverty and Affordable Warmth Strategy will be presented to the Housing & New Homes Committee on the 13<sup>th</sup> January 2016 and to the Health & Wellbeing Board on the 2<sup>nd</sup> February 2016.

- 3.12 To support the recommendations within the NICE guidelines and subsequent actions in the Council's own action plan, along with partners across the city, we continue to look for possible funding streams to support and escalate work to support vulnerable householders across the city. A current bid, co-ordinated by Brighton & Hove Citizens Advice Bureau, has been submitted to the British Gas Energy Trust Warm Homes Fund 2015-16. The Council has supported this bid to ensure it fits with the strategic challenges and approach outlined above. The outcome of the bid will be known in September 2015 and update can be provided at committee.
- 3.13 Further to the NICE recommendations outlined in the attached action plan addressing energy inefficient housing and bringing homes up to a minimum standard of thermal efficiency would have the greatest impact on the most vulnerable households. The Council continues to explore options and different models for the delivery of investment into the city's housing, across all tenures. This includes the work we have carried out with partners in Your Energy Sussex and emerging models that enable the Council to lever in new investment outside of the both the general fund and HRA capital investment programmes. Further work will be carried out to explore these options and different models of delivery and reported back to committee as appropriate. Many private sector landlords in the city are keen to work with the council to increase investment in the local housing stock to improve quality; we will work closely with this group to explore the most effective way to achieve this with the aim of increasing levels of energy efficiency.

#### 4. ANALYSIS & CONSIDERATION OF ANY ALTERNATIVE OPTIONS

- 4.1 The Council can choose to not adopt a strategy and wider action plan; support will continue on a small ad-hoc basis. The Public Health funded Warm Homes Healthy People Programme currently operates annually on a limited budget, addressing risks to the most vulnerable groups. Future continuation of the programme will be subject to budget pressures.
- 4.2 The Council can continue to apply for funding streams on an ad hoc basis for specific projects to address the issues outlined above. This is something that can continue regardless, however through engaging with city partners a strategy and corporate/city-wide approach to the issues will ensure a more coordinated approach that would prove to be more effective.

#### 5. COMMUNITY ENGAGEMENT & CONSULTATION

- 5.1 Consultation and feedback from residents and partners from previous projects and programmes will be used to inform the development of the strategy and action plan.
- 5.2 Working with partners across the city, including community and voluntary sector organisations in the development of the strategy and delivery of action plan will ensure a good representation of community views.

## 6. CONCLUSION

- 6.1 Cold homes pose a significant risk to vulnerable residents' health; this has an impact on people's lives, contributes to preventable winter deaths and creates significant pressure on a variety of services, including the NHS, which is estimated to spend £1.36bn every year treating illnesses caused by cold homes.
- 6.2 Fuel poverty is estimated to affect nearly 15,000 (11.9%) of the city's households, meaning many people in the city are struggling to pay their energy bills and keep their homes warm in the colder months. This has an impact, not only on older people and those with existing health conditions, but also the attainment of children in school and the mental wellbeing of many adults and children.

## 7. FINANCIAL & OTHER IMPLICATIONS:

## Financial Implications:

7.1 There are no direct financial implications of this report. The Fuel Poverty and Affordable Warmth Strategy, once drafted, will be assessed for financial implications prior to implementation and reported as part of the budget monitoring process or separate report to Committee as necessary.

Finance Officer Consulted: Name Monica Brooks Date: 17/08/15

**Legal Implications:** 

7.2 As this report is for noting, there are no significant legal implications to draw to the Committee's attention at this time.

Lawyer Consulted: Name Liz Woodley Date: 14/08/15

## Equalities Implications:

- 7.3 A full Equalities Impact Assessment will be carried out alongside the development of the Fuel Poverty & Affordable Warmth Strategy.
- 7.4 The vast majority of EWD in England occur among those aged 65 or over. As in previous years in England and Wales, there were more excess winter deaths in females than in males in 2012-13.
- 7.5 In 2013, households in England where the oldest person in the household was aged 16-24 were more likely to be fuel poor. However people aged 75+ experienced the deepest levels of fuel poverty.
- 7.6 Fuel poverty is a contributor to social and health inequalities. In 2013, all fuel poor households in England came from the bottom four income decile groups. Unemployed households in England have the highest rates of fuel poverty across all economic activity groups and lone parent households have consistently been more likely to be in fuel poverty. People who have a long term illness or disability are also more likely to be fuel poor than those who do not.

- 7.7 For Gypsies and Travellers living on site accommodation or travelling, trailers with little insulation combined with the expense of Calor gas can cause higher than average heating costs and fuel poverty. Fuel poverty strategy and interventions may need to be tailored to reach Gypsy Traveller communities.
- 7.8 Some groups at risk of fuel poverty lack awareness and/or understanding of existing sources of support and programmes to help improve home energy efficiency. Lack of understanding can restrict those that are aware to adopt such interventions. This is likely to vary across different groups, for example for people with language barriers (such as minority ethnic communities), and those who have limited social networks and connections with their local community, such as isolated older people and people with learning disabilities.

# **Sustainability Implications:**

- 7.9 The most effective way to tackle fuel poverty and address the issue of cold homes and impacts on health for the long term is to improve the energy efficiency of the city's homes. This also has the potential to reduce CO2 emissions from the city's housing, which currently makes up the largest proportion (42%) of the city's total emissions.
- 7.10 The aims of the strategy and action plan have a significant impact on improvements to the health and wellbeing of some of the city's most vulnerable residents.

# Public Health Implications:

7.11 Strategically addressing cold homes and fuel poverty in vulnerable groups will contribute to the prevention of ill health and excess winter deaths, reduce health and social inequalities, and improve wellbeing and quality of life.

# SUPPORTING DOCUMENTATION

## **Appendices:**

1. Draft action plan in response to NICE guidelines 'Excess winter deaths and morbidity and the health risks associated with cold homes'

#### **Documents in Members' Rooms**

1. NICE guidelines 'Excess winter deaths and morbidity and the health risks associated with cold homes'

## **Background Documents**

1. None