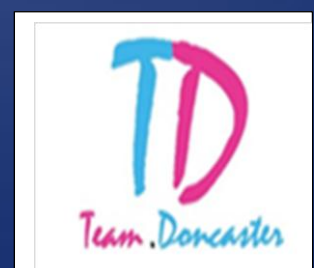




Doncaster's Affordable Warmth Plan 2014-17



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Foreword



Cold homes harm health. There is a growing knowledge and evidence base related to the direct negative impacts on morbidity and mortality of living in cold housing. We know for example that for children, cold homes are associated with poor infant weight gain, slower development, worse asthma, and more hospital admissions. Adolescents are five times more likely to suffer multiple mental health problems. Adults particularly those who are vulnerable, suffer more heart disease, stroke and respiratory disease, their general health is worse and existing conditions are exacerbated by living in cold properties. Older people suffer worse mental health and higher mortality rates.

Living in cold housing can indirectly harm health. It affects children's educational attainment, emotional wellbeing and resilience, limits the dietary opportunities and choices people make and the impact of cold on dexterity leads to a higher risk of accidents and injuries.

A handwritten signature in black ink that reads "Tony B" followed by a long horizontal flourish.

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1. Executive Summary

This Strategy sets out a partnership approach in Doncaster to achieving affordable warmth, setting specified actions to be taken by all partners. The purpose of this paper is to present a better understanding of fuel poverty within Doncaster including the consideration and recommendations from the recent “Fuel Poverty: how to improve Health and Wellbeing through action on affordable warmth report 2014” and the “Kings Fund” Improving the public's health publication (2011).

This paper raises the issues about fuel poverty within Doncaster, covering the definition, the cause and effect and incorporates both direct and indirect impact that fuel poverty has on an individual's health and the wider context, such as cold housing.

Our vision

“We want less people year on year to suffer from living in a cold home”

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2. Introduction

“Affordable Warmth” means a household is able to afford to heat their home to the level required for their comfort and health. The lack of “Affordable Warmth” is known as “Fuel Poverty”. A household is in fuel poverty if they cannot keep warm and healthy in their own home at a price they can afford. Fuel poverty has been identified as a key priority for Doncaster, one which partners can have a significant impact on by working more effectively together i.e. reducing the number of our vulnerable residents whose lives are negatively impacted by fuel poverty. Statistics suggest there are an estimated 14,516 households in fuel poverty in Doncaster (Gov.2011). This has significant negative effects on these residents’ health and well-being. For example, fuel poverty is a clear contributory factor in health issues such as excess winter deaths, respiratory diseases, falls and poor mental health. Moreover, it has a significant impact on a range of other factors, such as the ability of young people to undertake homework effectively and an individual’s ability to manage their finances/debt effectively.

Cold homes, high health care costs, cold-related illnesses, excess winter deaths and housing in poor repair are the visible signs of fuel poverty and are impacting on many households in Doncaster, affecting the most vulnerable in our society. Families on low incomes are living in cold, damp homes and the elderly are struggling to heat just one room in winter. With fuel prices continuing to rise, the issues are set to continue. In addition according to Marmot, there is a clear social gradient in fuel poverty: the lower your income the more likely you are to be at risk of fuel poverty, fuel poverty is avoidable and it contributes to social and health inequalities (DOH, 2011).



3. What is Fuel Poverty?

Fuel poverty is a term used to describe the inability of households to afford fuel consumption sufficient for domestic purposes, including the maintenance of comfortable heating standards and reasonable use of hot water, lighting and appliances.

Definition

The Low Income High Cost indicator (introduced in 2013), is the official fuel poverty indicator and classes a household as being in fuel poverty if its energy costs are above the average (median) for its household type and this expenditure pushes it below the poverty line (Hill, 2013). Using this definition 10% of the Doncaster population are classified as being in fuel poverty.

Cause & Effect

Fuel poverty is associated with a range of additional adverse health outcomes; there are measurable effects of cold housing on adults' physical health, well-being and self-assessed general health, in particular for vulnerable adults and those with existing health conditions. Evidence shows that living in a damp cold home can have a 30% greater risk of admission to hospital or attendance at primary care facilities (NICE, 2013). Marmot (2011) states that children living in cold homes are more at risk of respiratory illness, low self-esteem and confidence and contributes to mental health problems (DOH, 2013). The effects of cold housing for children contribute to low educational attainment, difficulties with emotional well-being and can decrease their food choices (DOH, 2013). The physical health impacts most commonly experienced by those living in cold homes are circulatory diseases and respiratory illnesses.

In a cold snap in a mild winter...

Two days later there is a sudden rise in heart attacks

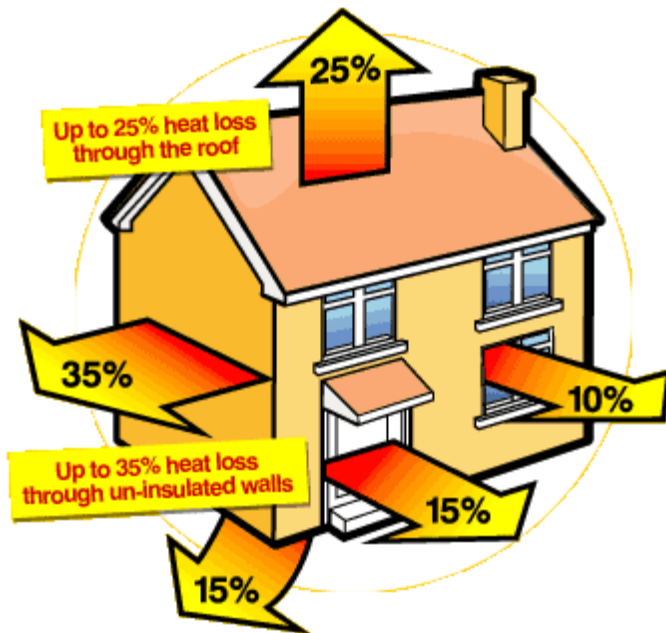
Five days later there is a big rise in strokes

Twelve days later there is a big rise in respiratory illness (DoH, 2008).

However there are a number of causes of fuel poverty which result in households not being able to afford sufficient warmth for health and comfort.

- Low household income and debt
- Inefficient heating systems
- Heating systems with high running costs
- Poor quality housing
- Access to affordable tariff and payment options
- Ill health / disability resulting in an increased demand for a warm home.

Energy Inefficient Homes



Fuel poverty often results in increased household maintenance and repair costs sending householders deeper into fuel poverty.

The associated negative impacts on the home will be increased condensation, dampness and mould growth as well as increased levels of dust mites which can exacerbate health problems.

Those most at risk

Those most vulnerable to fuel poverty and the impacts of cold, damp homes are:

- Older people – particularly those living on their own and/or in larger family homes
- Lone parents with dependent children
- Families who are unemployed or on low incomes
- Children and young people
- Disabled people
- People with existing illnesses and long-term conditions (physical and mental)
- Single unemployed people.

Excess Winter Deaths

Doncaster has a higher than national and regional average for excess winter deaths (EWD) which are calculated as the difference between the number of deaths during the four winter months (December to March) and the average number of deaths during the preceding autumn (August to November) and the following summer (April to July). Evidence suggests a strong link between EWD and cold homes. Countries which have lower EWD have more energy efficient housing. EWD are significantly more likely in private rented and owner-occupied homes, houses built before 1850 and damp houses.

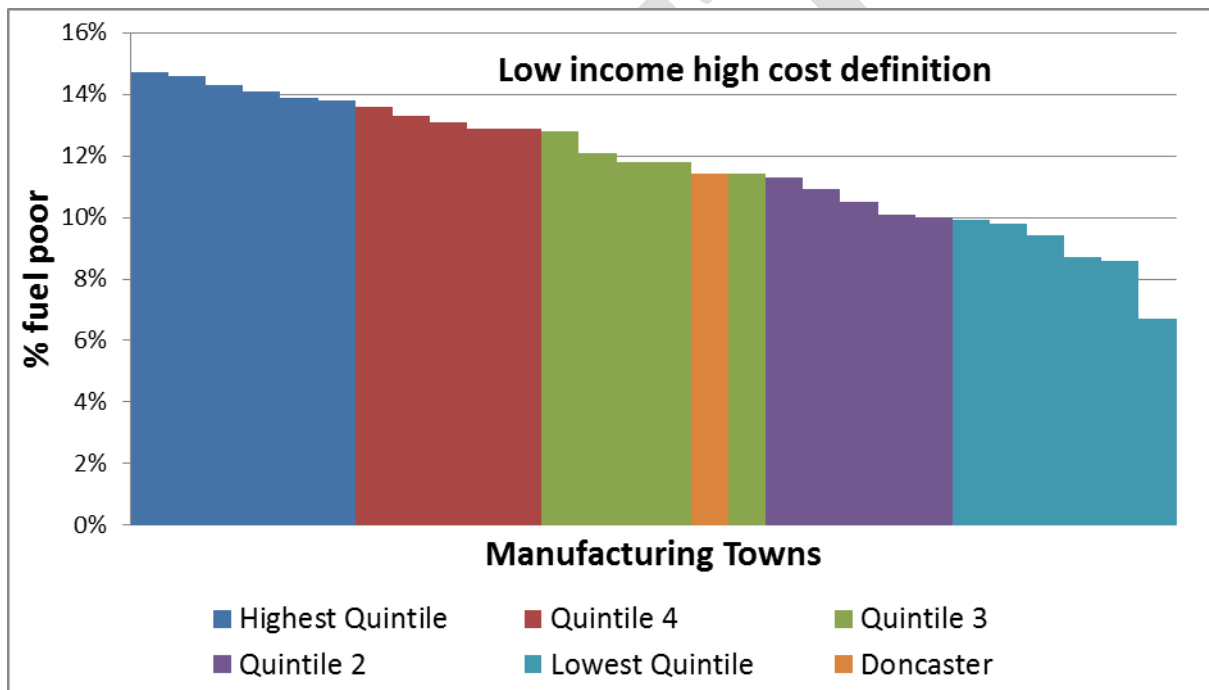
Over the last five years there have been on annual average 26,000 EWD in the UK, locally within Doncaster in 2012/13 there was 235 EWD. However not all EWD can be attributed to cold housing or low indoor temperatures: according to the World Health Organisation, between 30% and 50% of EWD can be attributable to cold indoor temperatures.

Many health conditions are aggravated by the cold, and often people with disabilities are unable to keep active during the winter months. People with disabilities have on average a 25% higher cost of living due to additional needs such as mobility, aids and care. For many, moving to a more energy efficient home is not an option as it will need to be adapted for their needs (Energy Bill Revolution, ND).

Fuel poverty can worsen people’s health conditions, which in turn impacts on the demand for health and social care services. It is also likely to lengthen recovery times of people with certain conditions and make existing problems worse. There are the mental health effects of living in a cold home too, from stress and anxiety through to more severe mental health issues.

4. Where are we now?

10% of the Doncaster population are classified as being in fuel poverty and Doncaster is ranked 16th out of 28 Manufacturing Towns in England. The following chart use sub-regional fuel poverty statistics from the Department of Energy and Climate Change. These figures date from 2011 but were published in 2013: <https://www.gov.uk/government/collections/fuel-poverty-sub-regional-statistics>.



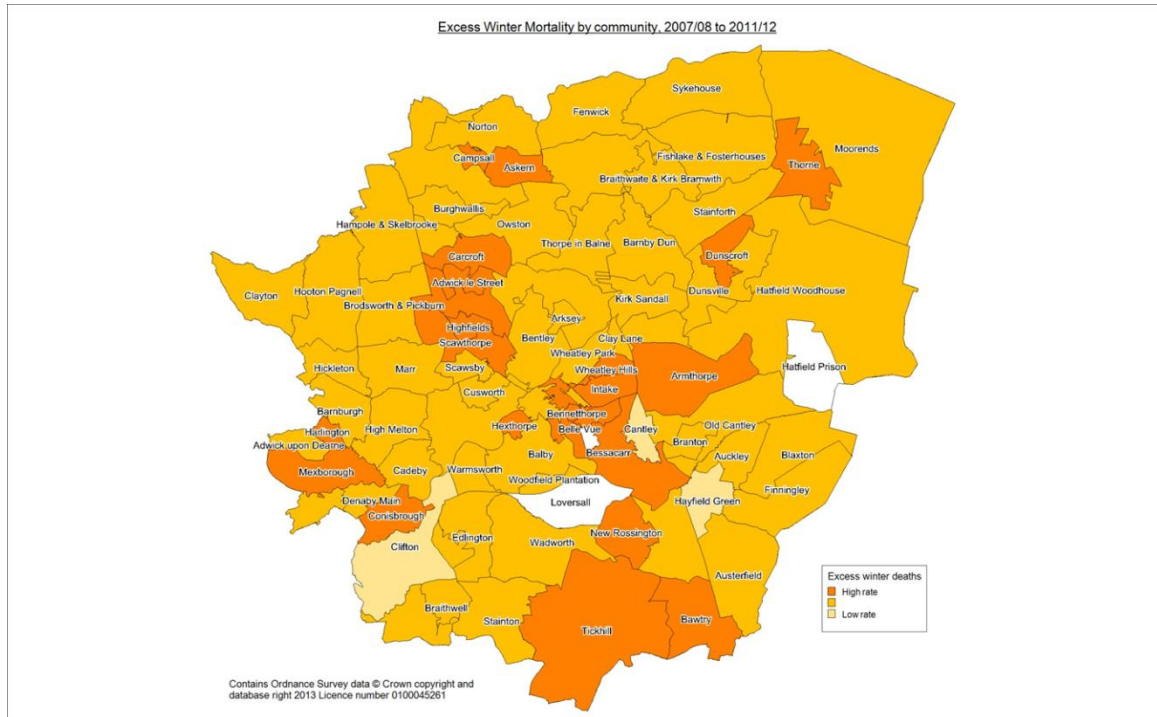
Local Evidence

In 2012/13 Doncaster had 235 excess winter deaths, therefore on each day during the winter months, about two Doncaster people die of conditions made worse by cold. The most affected communities within the Doncaster borough were;

- Mexborough
- Conisbrough
- Bessacarr
- Armthorpe
- Intake

The contributing factors to these communities having increased number of EWD is due to poor energy efficient housing, living in fuel poverty and a higher level of older people.

The map below highlights most affected communities within Doncaster.



Condition of housing in Doncaster

The latest private sector stock condition survey suggests:

- The average SAP (Standard Assessment Procedure) rating for private properties in Doncaster is 45, compared with a national average of 51 (based on an a rating system of 1-100, with 100 being the best rating)
- 7,318 fail to meet the Decent Homes standard for energy efficiency.
- 2,648 have a SAP less than 35, which deems them to be a CAT 1 safety hazard for 'excess cold'.
- 3,358 dwellings lack any form of loft insulation.
- 9,804 dwellings have a loft insulation level less than 100mm.
- 18,775 dwellings meet the 100mm loft insulation level.
- 5% of cavity walled properties are un-insulated.
- 8,233 require an upgrade from single glazed windows to double glazed.
- 95.2% of the stock has mains gas heating.

Traditionally interventions to reduce fuel poverty have focused on older people and people with ill health; however this conflicts with recent studies which have identified equally vulnerable groups that would benefit from interventions. These vulnerable groups include: people with conditions affected by living in cold damp homes: respiratory, cardiovascular, mobility and mental health. The Warm and Well Family Research undertaken in Doncaster in 2012 highlighted that families with young children are at risk. Moreover, Hills review 2013 highlighted that one of the groups at high risk of fuel poverty are those on low income who are single-person households of working age, due to lack of targeted interventions with this at risk group in the past.

Warm and Well Families Research

The Public Health Team have been working in partnership with Sheffield Hallam University and Public Health Rotherham to deliver a research study to examine the experience, knowledge, beliefs and values of adults living in households with young children in keeping warm at home. The study consists of 36 interviews with families and the measurement of indoor house hold temperatures and was performed in the winter of 2012/13. The information gained is being used to develop social marketing keeping warm interventions for winter 2014/15 this will include four pen portraits that will support professionals to deliver targeted interventions.

The different data revealed a range of themes which explain the complex world within which families operate and the barriers they encounter in relation to keeping warm. Key themes included:

- Contextual factors e.g. type of home and income
- Social factors e.g. the nature and quality of social contact and support
- Behaviours e.g. the behaviours and coping strategies of families employed to keep warm and manage household budgets
- Attitudes and beliefs, including fear of debt, priorities and beliefs regarding asthma, cold and health
- Knowledge and awareness of cold household temperatures, heating systems, getting help and trusted sources of information.

Full report available at http://shura.shu.ac.uk/7905/1/Doncaster_Final_Report_March_2014.pdf

Doncaster currently offers a wide range of low level interventions to tackle fuel poverty issues. These include:

HotSpots - A partnership approach to address affordable warmth/energy efficiency, finance, safety and health. The project enables a customer facing officer to maximise a single point of contact with a householder, to deliver essential services that are of great benefit to all residents. Offering referral to:

- Doncaster Metropolitan Borough Council's Energy Team - Energy saving and grants advice, including installation of grant funded measures.
- South Yorkshire Fire and Rescue - Home Safety Check, including fire exit plan and smoke alarms.
- Department for Work and Pensions - Benefit Entitlement Checks

- National Health Service -Stop Smoking Advice & Support
- TELECARE- Homecare alarms service.

DMBC Energy Team offer a range of support to reduce energy consumption, the number of cold homes in Doncaster, fuel poverty, carbon emissions, and help households save money, by:

- Promoting the Mayoral priority "The Big Power Switch" joining local residents together to increase their buying power and negotiate a better deal on their energy
- Working with Energy Companies to deliver their government obligations to improve the energy efficiency levels of privately owned housing
- Delivering large scale thermal improvement programmes to make Council owned housing energy efficient
- Proactively targeting the most vulnerable communities to provide 'one to one' energy saving advice and grants assistance
- Continuing to improve the quality of housing and reduce the number of poor quality, energy inefficient homes
- Improve the quality and management of private rented housing and work in partnership with private landlords to make best use of the sector to meet local housing demand.

Winter Warmth

The winter warmth work consists of a variety of pathways to identify and support vulnerable people during the winter period. We have identified geographic concentrations of fuel poverty and assessed those at risk using Doncaster's Joint Strategic Needs Assessment and Community Profiles intelligence.

Winter warmth training is offered to anyone that supports vulnerable people, the training covers spotting the signs of living in a cold, damp home, fuel poverty, energy measures and emergency planning. The Public Health Team and Energy Team offer community drop in's to provide information, advice and guidance on services available.

During the winter of 2014/15 a pilot project will be in place, the pilot will offer 20 people discharged from hospital a full homecare package, ambient monitor and wellbeing services free of charge. The 20 participants will be monitored and supported throughout the six months and given appropriate resources to overcome any fuel poverty/energy issues that may arise. A full cost evaluation will be produced.

The Public Health Team have produced 3000 leaflets with advice and tips on how to prepare for the cold weather, fuel poverty advice, which includes contact numbers for key organisations and a healthy and warming recipe. Front line staff are also given temperature cards to give to individuals to highlight a healthy temperature within their home.

Winter Warmth Toolkit

The winter warmth England Toolkit has been used to produce a variety of resources for both managers and frontline staff to provide consistent messages to encourage people to stay warm and

healthy in winter. We have encouraged staff and organisations to utilise the tools by promoting the toolkit on various websites, through the Hotspots training and via our local networks. During the winter of 2013/14 over 300 front line staff were trained to spot the signs of people living in a cold home and to refer on to services within Doncaster.

A six month communication action plan has been produced, delivering a variety of methods to raise awareness of fuel poverty and issues during the winter. Doncaster Public Health Team coordinates a multi-agency steering group that manages and governs all the winter warmth work.

5. Where do we want to be?

Doncaster MBC is committed to tackling fuel poverty and the many health issues faced by a significant number of households. A range of aims and objectives have been developed, designed to assist with the alleviation of fuel poverty, delivering affordable warmth and ensuring that the benefits of energy efficiency measures are brought to the attention of all households. This will involve accurate targeting of the people who most need support and assistance to tackle fuel poverty and reduce health inequalities, working alongside with the Energy Team to provide energy efficient housing.

Doncaster MBC will aid the implementation of the affordable warmth action plan with the support of a local partnership, this will be a non-statutory body that brings together the different parts of the public, private, voluntary and community sectors, to act as steering group. They will provide governance and direction for all activities within the affordable warmth action plan and work together to identify opportunities, to share best practice and support joint initiatives.

Doncaster MBC is committed to reducing fuel poverty and increase the energy efficiency of housing across Doncaster as part of Doncaster's Corporate Plan. With aims to target Doncaster's most vulnerable households by gather an agreed set of data to identify who is at most at risk of cold related illness and therefore establishing what support is required.

We will incorporate the considerations and recommendations from the recent "fuel poverty: how to improve health and wellbeing through action on affordable warmth report, 2014. This will be achieved by working with all partners on the affordable warmth action plan. This strategy has been developed in partnership with a number of key agencies that work closely with the Council, for example, Age UK, Doncaster Advice Services Partnership, South Yorkshire Credit Union, Doncaster Mind, M25 Housing & Support Group, Doncaster Clinical Commissioning Group, DIAL Doncaster CAL Mobile Hub Project, Department for Work & Pensions and Doncaster Citizens Advice Bureau. All partners are committed to improving access to affordable warmth solutions for all Doncaster residents. We have involved representatives from different community groups so that there is a greater first hand understanding of what fuel poverty means and what residents want the council and partners to do. We consulted on this strategy by undertaking a fuel poverty workshop with all key partners.

6. Action Plan

This Affordable Warmth plan sets out our joint approach to tackling Doncaster's' fuel poverty, with clear aims and objectives.

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Priorities	Action	Responsible Body/Person
Improve awareness and understanding of fuel poverty for residents, in all tenures.		
	To have an annual Affordable Warmth programme of public events	
	To develop awareness of Affordable Warmth through social media and traditional methods	
	Develop and implement an Affordable Warmth behavioural change programme	
	To offer a co-ordinated delivery approach to reduce the number of people living in a cold home	
Develop a shared understanding of the problem and local need through a robust Joint Strategic Needs Assessment (JSNA)	Mapping of Partnership activities	
	To define fuel poverty locally and within a national context	
	Investigate the role of winter champions	
	Gather evidence (Case Studies etc.) from partners relating to positive outcomes and achievements	
Increase the energy efficiency of Doncaster's private housing stock.	To address Doncaster's "hard to treat" private sector properties	
	Affordable Warmth programme to link with DMBC's Housing Strategy 2014-2034	
	Affordable warmth programme to link with both private sector and social housing	
Maintain and develop Doncaster's Affordable Warmth Referral System	Identify current up to date data relevant to AW in Doncaster	

	Continue to deliver and develop Doncaster Hotspot's AW referral system	
	Annual summary of training conducted and its impact on referrals	
To improve income maximisation for fuel poor residents	<p>To reduce the number of people that are fuel poor by incorporate income maximisation, health and energy advice</p> <p>Provide advice on the latest energy efficiency initiatives available to residents and residents. (including energy switching)</p> <p>Offer advice on the grants and free schemes available to help save energy and to use energy more efficiently.</p>	
	Communication with organisations where conflicting information exist	
	To continue to promoting financial inclusion, by maximise opportunities and improve quality of life during difficult times	
Ensure the co-ordination and development of Doncaster's Affordable Warmth Strategy	Improve the partnership approach to fuel poverty through the continuation of the affordable warm group	
	Set Terms of Reference	
	Increase the awareness to colleagues and partners on Doncaster's approach to tackling fuel poverty	
	Develop monitoring and evaluation systems for the plan	

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Appendix

Priorities	Achieving	Recommendations
Effective strategic leadership underpinned by cross-sector and interdisciplinary partnerships	Hotspots regional planning group Winter warmth steering group Housing group	Multi agency steering group- for example FIG/CAB/PH/ET/HWB/HOUSING/SL Peoples voice forum Winter champions
Develop a shared understanding of the problem and local need through a robust Joint Strategic Needs Assessment (JSNA)	JSNA Corporate plan	HWB affordable warmth strategy Multi agency steering group- for example FIG/CAB/PH/ET/HWB/HOUSING/SL
Identify and prioritise those most at risk in the local population	Data Observatory	Multi agency approach
Integrate fuel poverty within health improvement programme planning and evaluate effectively	PH operation plans	Integrate into the PH Improvement Strategy
Enable frontline staff to integrate affordable warmth within their everyday practice	Hotspots training 2013/14 trained Delivered 4 training session to 104 participants, 2438 Hotspots referrals; this is a 22.9% increase from 2012/2013. Winter warmth training 2013/14 6 Winter warmth sessions delivered to over 300 partners/front line staff. Viva project by NEA	Continue training packages