Neighbourhood coaching and health interactions

Case studies

"You cannot deal with the people and the houses separately"

Octavia Hill

Foreword

The impact of Covid followed by the cost-of-living/energy crisis on the lowest income households is well-documented. Not only will many more people struggle with rising debt levels but the sense of helplessness will extend to impact their health and wellbeing – the collateral damage!

For two decades and more I have propagated the importance of the health and housing relationship and in leadership have driven organisations to deliver across integrated services. In that, I am not alone.

As leaders like Professor Donna Hall call for the “same integration and ambition” as when the NHS was created, and the pushing outside of “professional comfort zones”, housing associations sitting on the periphery must step up.

Five years ago, Hafod, recognising data showing 49% of housing customers had one or more member of the household either registered as disabled and/or with a long-term limiting illness, fundamentally redesigned its frontline housing service provision. Moving from a transactional-focused approach to a more intensive, targeted person-centric neighbourhood coaching model. At a locality level, Hafod’s services have become better aligned with formal health care and primary care provision to address wider determinants.

This booklet contains a small sample of case studies, borne out of the Hafod experience, highlighting social housing’s wider role in tacking the wider determinants of health and social inequalities and the abundant latent capacity to do so much more.

Please feel free to contact me directly should you wish to discuss further. I am particularly keen to hear about your experiences, insight, perspectives and to share any learning.

Jas Bains
CEO, Hafod

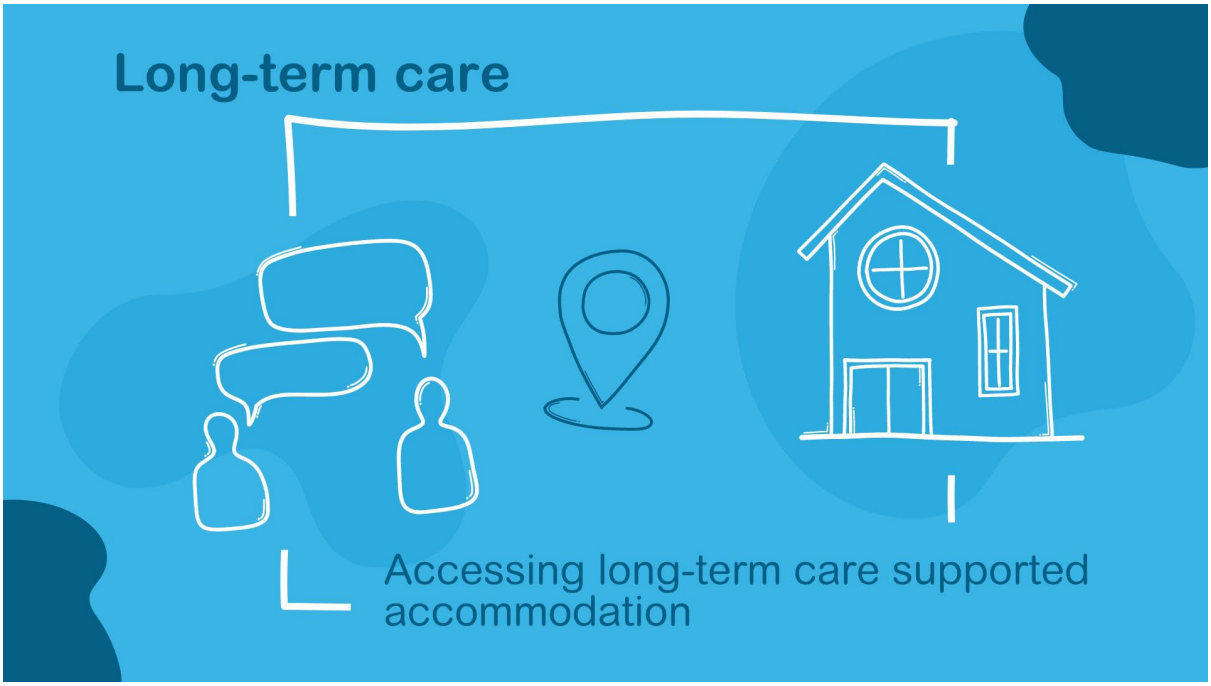
Jas.Bains@hafod.org.uk

Case studies

We have anonymised real life situations to highlight the experiences of our tenants in the current health, care and housing system, and the important role of our neighbourhood coaches.

Marc and Hafod Coach Georgia

Situation: Marc was missing, found to have been admitted to hospital



Action: As Georgia became aware Marc was missing, she made enquires locally and found that Marc had fallen and suffered a catastrophic head injury. As they have no family, Georgia spoke with the ward manager in the brain injury unit periodically to check in, and more recently engaged with their support worker regarding Marc's ongoing care and long-term prognosis.

Marc's intention is to return back to their apartment however there may be a need for them to go into a longer-term care setting. During this period Georgia has connected with the local Housing Benefit department to ensure their claim was kept open so arrears wouldn’t increase and their tenancy on their apartment would remain secure.

Outcome: If Georgia had not located them and contacted the hospital no one would have known who Marc was or where they lived - they probably would have lost their tenancy due to potential abandonment and lack of communication.

There may be some long-term care supported accommodation coming up soon in Marc's preferred locality and Georgia is working closely with Marc and their support worker to ensure they are supported in this move if this is the outcome, ensuring their tenancy is ended appropriately and relevant support is given.

Alex and Hafod Coach Katie

Situation: Coach Katie recognised some deterioration in Alex's mental health

Action: Alex has a diagnosis of bipolar (a personality disorder), anxiety and depression. They have been sectioned under the Mental Health Act in the past.

Taking a coaching approach and working closely with Alex over a number of years has enabled Katie to recognise the signs of when they are becoming unwell and take steps to support them before their health deteriorates to the point they may be sectioned.

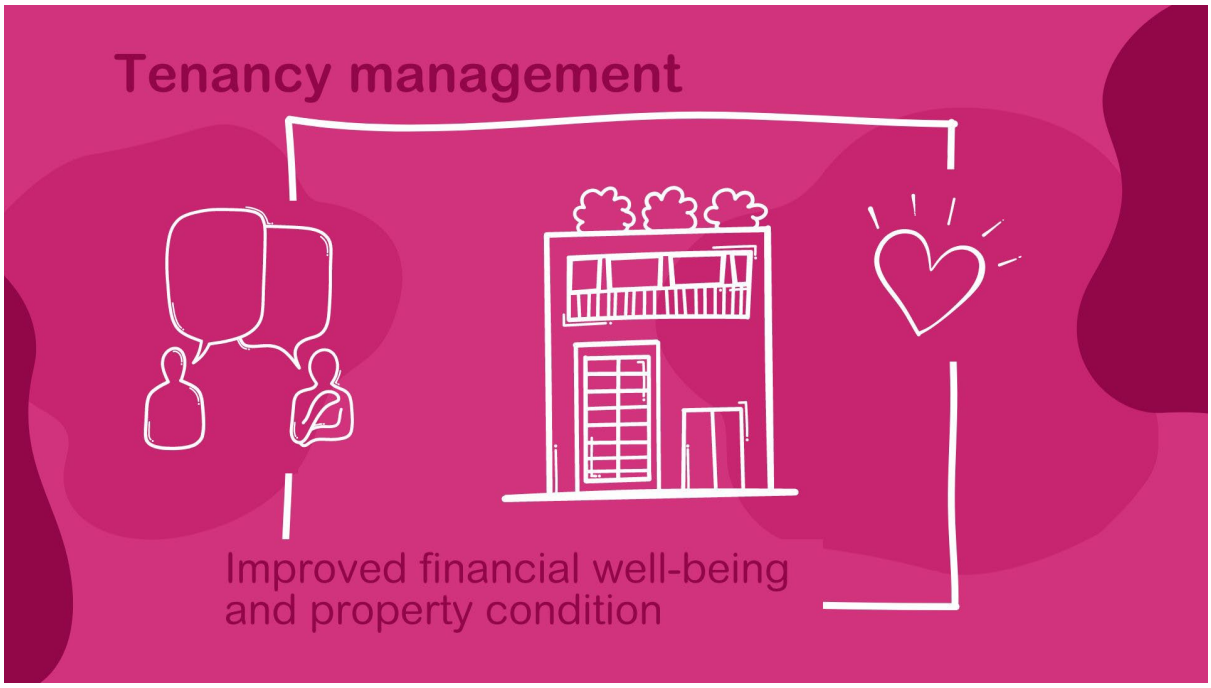
Katie phoned Alex recently regarding her rent account, but they did not answer. Katie recognises that when Alex is becoming unwell, they tend to become withdrawn. Alex responds well to WhatsApp messages so after several messages Katie managed to ascertain from Alex that they were completely off their prescription medication as their psychiatrist in the hospital had moved on to a different role and no one had picked up Alex's ongoing care. Therefore, their medication had not been prescribed and delivered to her home.

It is essential at this stage that Alex seeks help from medical professionals as if they do not the likelihood of them slipping into psychosis is very high. With Alex's permission Katie contacted their doctor and advised them that they were currently off prescribed medication, and their mental health was deteriorating. Katie asked them to arrange a telephone consultation with Alex with a view to assessing their current situation and getting the medication re-prescribed urgently. Katie advised Alex to expect the call from the doctors.

Outcome: Historically, an extended period of Alex not taking their medication has resulted in psychosis and hospitalisation. Alex is now back on their prescribed medication and feeling a lot better. Through Katie's swift actions we have prevented an extended stay in hospital.

Morgan and Hafod Coach Liz

Situation: Morgan is an older person with mental and physical health concerns, they have moved three times in the last six years due to both physical health and emotional well-being and having lost their daughter within a couple of weeks of moving to be near her. There were some property condition issues identified from start of the tenancy.

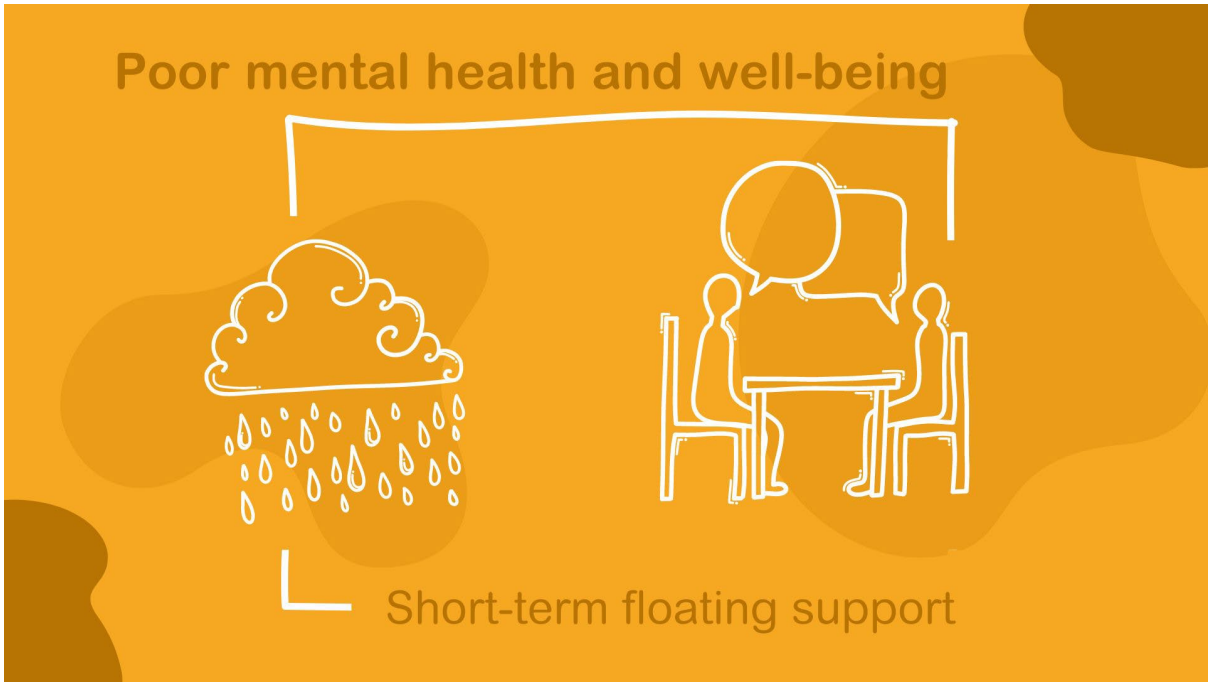


Action: Coach Liz worked with Morgan to resolve queries on financial well-being and worked together with the Neighbourhood Housing Coach to improve the property condition.

Outcome: Engaging with Hafod to resolve tenancy issues such as rent payments and property condition has led to decreased feelings of anxiety and depression, and following on from that, less contact with specialist mental health services.

Giovanna and Hafod Coach Rani

Situation: Giovanna presented with suicidal feelings



Action: Coach Rani received a phone call from Giovanna and they disclosed they were having suicidal feelings and didn't feel they could carry on. This was a long phone call - nearly two hours - in which Rani mainly listened and was empathetic and sympathetic to the tenant's situation. Rani called the GP as Giovanna didn't feel able to and a referral to the local mental health team was made.

Rani contacted local agencies such as the local authority, BAVO and Pobl to find information on tenancy support with mental health. Primary care for mental health was unavailable unless a mental health consultant made a referral. There was a lack of support available, and this support was mainly short-term, so Rani was having almost daily conversations with Giovanna to offer support and an ear of kindness. This built-up trust and formed a good relationship between them, but it was also important for Rani to set boundaries.

Giovanna eventually accepted to have floating support for a fixed period of time. Rani kept up contact with Giovanna during this time. Once the formal support ended Giovanna told Rani that they were feeling much better but knew they could contact Rani at any time, which they found reassuring.

Outcome: There has been a huge improvement in Giovanna's health, well-being and confidence over this time, as they were previously unable to contact the GP or mental health team directly for support. They do still sometimes struggle but no longer attends A&E regularly. The tenant may move area to be closer to family support when they feel able to cope with this change.

Manish and Hafod Coach Gwen

Situation: Working to overcome reluctance to engage with Hafod; discovering mental, physical, financial health issues and feelings of isolation

Action: Manish has historically been extremely hard to engage with. They would only communicate sporadically through email, and this was only when rent was late. Coach Gwen had got to a point where a scheduled home visit was required but Manish would often reply via email to avoid Gwen visiting.

Gwen was persistent in supporting communication and managed to get Manish to agree to a home visit. After a good, long chat Gwen found out that Manish struggles with financial, mental, and physical health and is digitally isolated. They don't have any family or professional support and were only receiving basic benefits.

Between them, Gwen and Manish discussed ways they could maximise the household income and manage money more effectively including Housing benefit being paid directly to Hafod as Manish finds it hard to go out and make payments. Together they are exploring an application for Personal Independence Payments (PIP) to help with living costs; Discretionary Housing Payments for arrears- outcomes from this work are to be confirmed. Manish agreed to be referred to Vale Supporting People for support with mental health, and they now have been allocated a support worker.

Gwen also utilised Hafod's Side by Side Hubbub project and supplied Manish with a new phone with data package to help them to stay connected with their friends to further support their mental health.

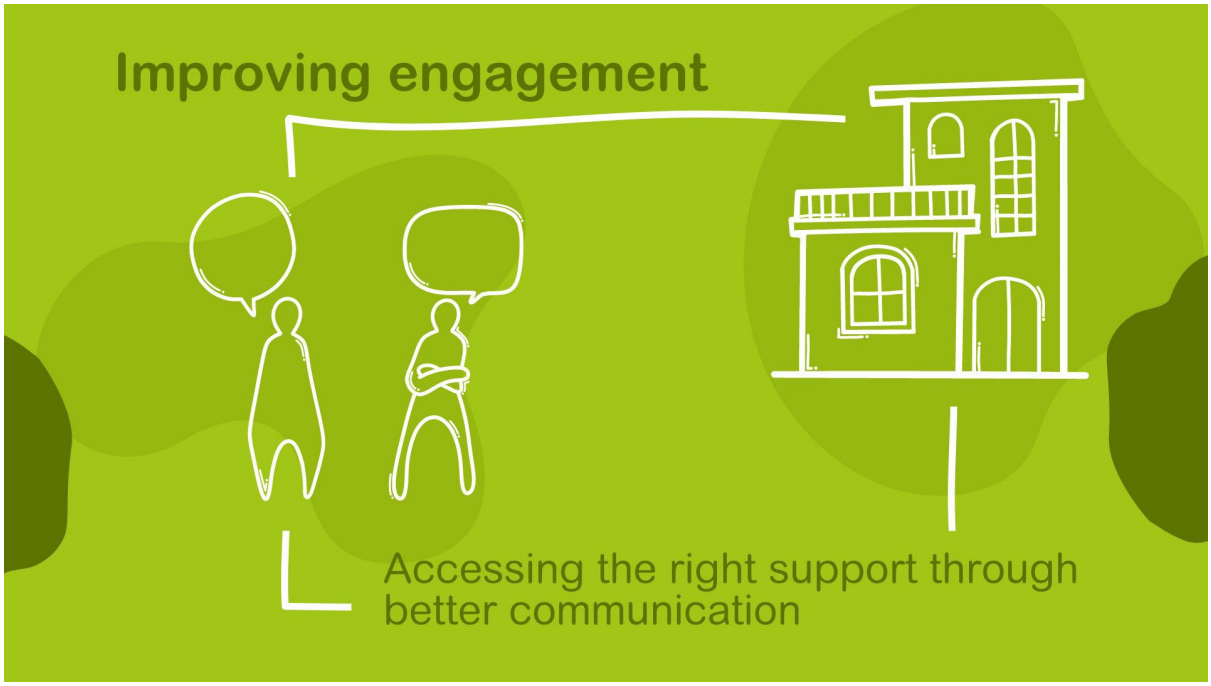
Outcome: Manish doesn’t feel as alone, they are engaged with Hafod and knows we are here to support and connect with them if needed. Going forward, this will help with reducing the burden on statutory health services by working proactively and collaboratively with community services to reduce the risk of conditions becoming worse or reaching crisis point.

In future, Gwen hopes that if an application for PIP has been successful, there will be an improvement in Manish's finances, and they will be able to access transport more readily. Gwen has discussed connecting with community groups.

Once support commences with the support worker, Manish may also gain some help with their mental health struggles. Gwen is regularly checking in with the tenant and continuing to support with income maximisation.

Alice and Hafod Coach James

Situation: Family with large rent arrears and discovering underlying health problems



Action: Alice and their family were served a notice seeking possession on rent grounds, and an injunction for property access to perform planned works, due to non-engagement.

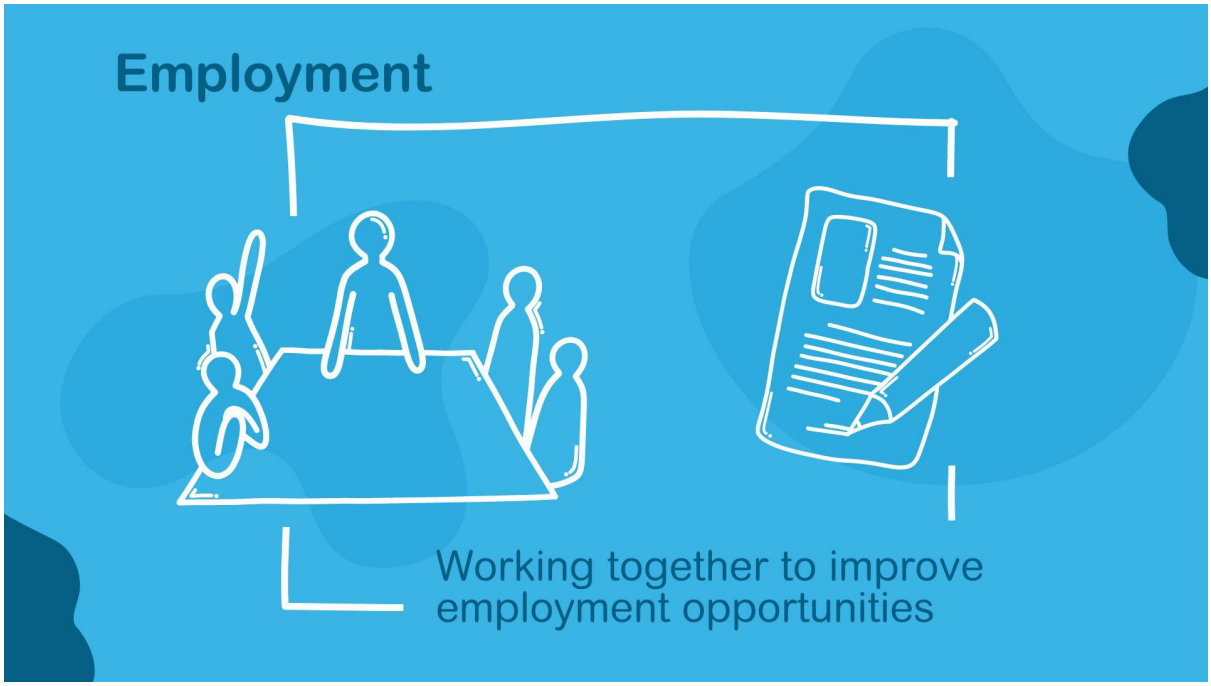
After numerous attempts at contact, Coach James managed to have a productive chat with the family. They disclosed they were struggling with grief after a bereavement and had begun using alcohol to cope with this - they felt ashamed to let anyone into the property due to its condition.

James offered advice on relevant services available to help the tenants with their mental health, alcohol misuse and their financial wellbeing. The family has been allocated a mental health support worker and are working with the local authority's financial inclusion team. They have also been supported to contact their GP to receive counselling and support on alcohol misuse.

Outcome: The family is engaging well now; they are making small steps to improve their situation including reducing their rent arrears and improving their property's condition as James continues to stay in contact to coach the family. This has prevented any legal action from Hafod being required and may also have prevented a future medical crisis as health services were not aware of the issues to the family's previous non-engagement.

Rahul and Hafod Coach Idris

Situation: Young tenant dealing with bereavement, anxiety and depression



Action: Rahul is in their 20s and has suffered with anxiety and depression for a long time, brought on by childhood grief. They are on medication and understand their triggers generally. However, Rahul's mother passed away in September 2020 and they have understandably struggled with this. Rahul succeeded their mother's tenancy and was rehoused into a one-bed flat during Covid. They have struggled to keep jobs and is currently unemployed.

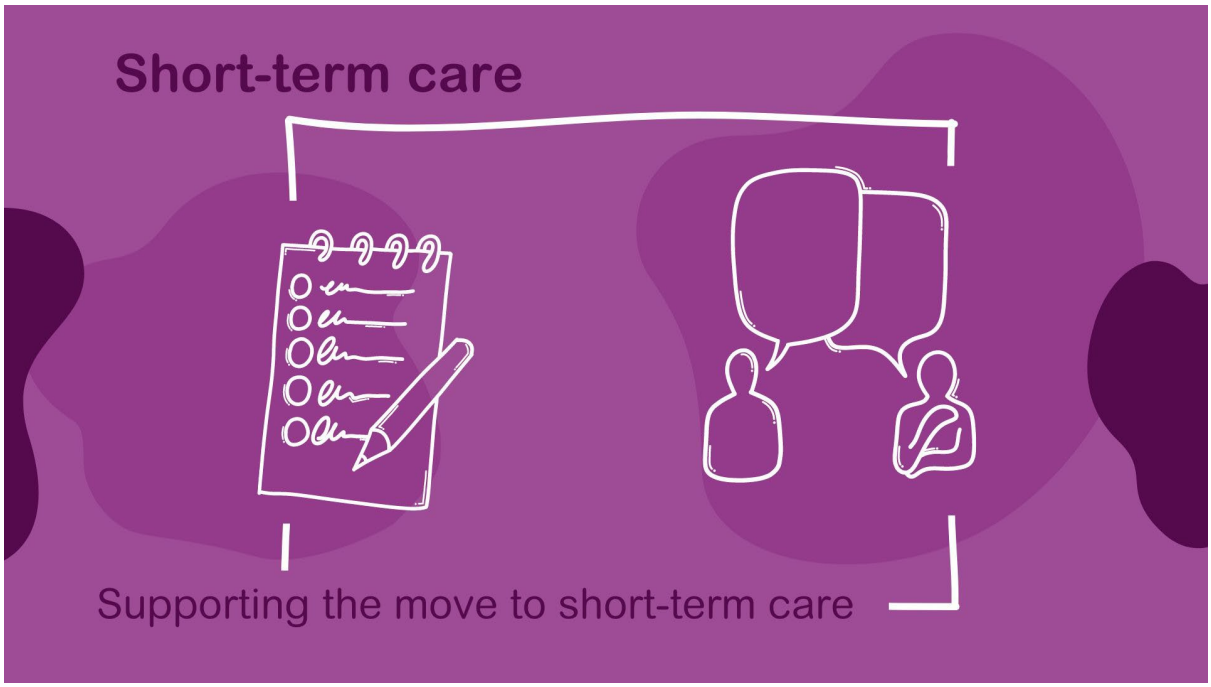
Coach Idris has signposted Rahul to a peer-to-peer bereavement group within their locality and advised on specialist bereavement counselling. Currently Rahul is signed off from work until September after speaking to their GP but is proactively engaging with services and plans to return to work.

Outcome: Idris is working with Rahul on short and long-term goals on employment opportunities, building their CV and boosting their confidence, with the aim of gaining good, sustainable employment and reducing their ongoing interaction with their GP and mental health services.

Nina and Hafod Coach Owen

Situation: Nina suffers with poor mental health as well as numerous physical health conditions. Coach Owen has been working with them to help them overcome their challenges, such as coping with general day to day tasks, managing their medication, improving their mental health and help to move home.

Owen has had conversations with their GP to request some supporting information to help support a move, and to also discuss some mental health support, which led to them being referred onto a mental health provider. He has also been liaising with the mental health team and support worker, having general conversations and providing updates in relation to their wellbeing and mental health as he speaks to them very regularly.



Action: To help the Nina overcome their low mental health and isolation by actively engaging with them on a regular basis and support them with a move away from their home to a more suitable property; whilst making necessary referrals to outside agencies.

Outcome: Nina has very recently moved into a more suitable home, and Owen hopes this will have a positive impact on their physical and mental health and wellbeing.

Engagement with: GP, Mental Health Team, Barry Hospital, Llandough Hospital, Tenancy Support Worker

Graham and Hafod Coach David

Situation: Graham is elderly, vulnerable and lives on their own. They feel rather isolated and struggle with maintaining their property, and self-care. Coach David is currently working jointly with the Adult Social Services, All Care and Graham's GP to help improve their living situation, their physical and mental health. All Care provide independent private care and carry out duties such as personal care, laundry, shopping and domestic chores to support Graham.

David has been working jointly with Social Services who are assisting Graham with things such as, helping with medication, liaising with GP due to other medical issues. David is also liaising with GP to assist with providing a supporting / medical letter to assist Graham with moving to accommodation more suited to their needs.

Action: To find more suitable accommodation for Graham and help with property condition due to hoarding. David is working with Graham to reduce complaints being made against them around noise nuisance from the television. This is due to the tenant being hard of hearing so plays the television loudly. David is taking a supportive approach as opposed to enforcement action by assisting Graham to purchase a headset to help reduce the television volume levels and therefore neighbour complaints.

Outcome: Complaints against Graham for noise nuisance have stopped and David hopes to achieve a move for them to more appropriate accommodation such as Sheltered / Independent living scheme where they can get the help needed to manage their home ongoing.

Engagement with: Adult Social Services, All Care, GP

Leo and Hafod Coach Andrew

Situation: Following concerns from a neighbour regarding the welfare of Leo, Andrew got in contact with them and, after a visit, contacted their mental health support worker, to make her aware of the concerns raised.

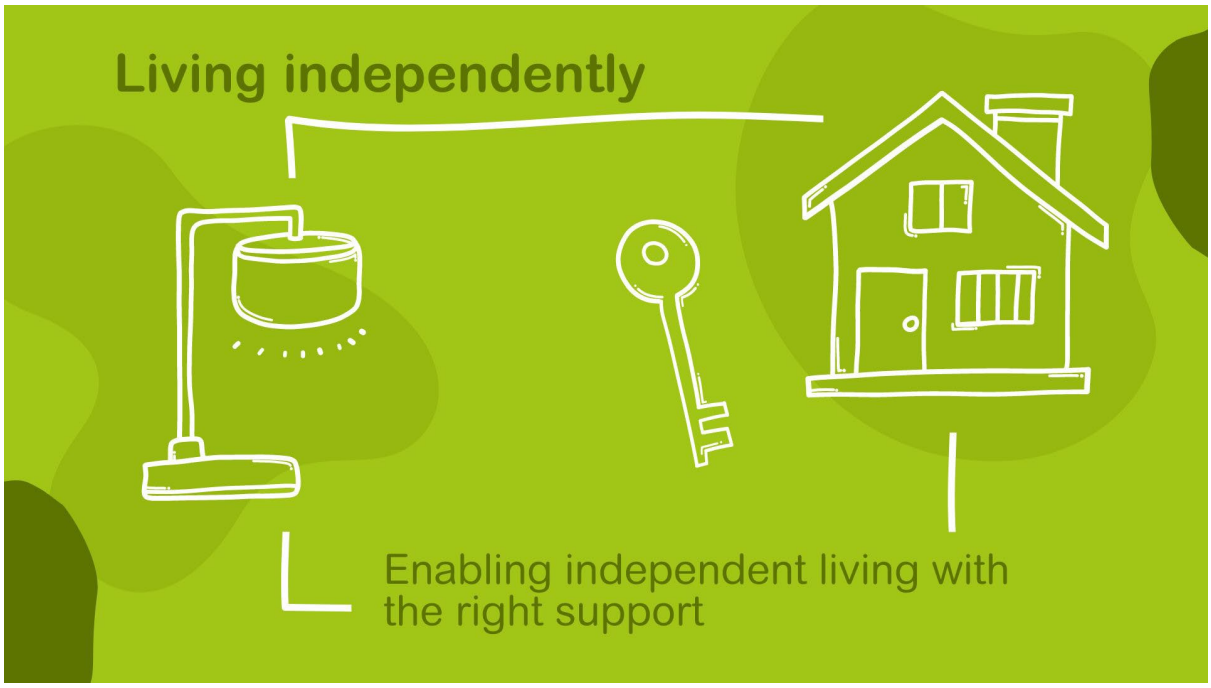
Action: Together, the mental health support worker and Andrew have been working with Leo in a joined up approach to better understand and tend to their needs to make sure they can manage their tenancy and receive any additional support required.

Outcome: The joint interaction with Leo, Andrew and the mental health support worker are in early stages and so far positive steps are being made as they support Leo to outline their ambitions and goals.

Engagement with: Mental Health team

Megan and Hafod Coach Jamila

Situation: Megan was in and out of hospital frequently due to repeated falls in their home. Megan was found on the floor when Coach Jamila visited them earlier this year. Jamila ensured they were safe and then raised various concerns about them not managing in the property with Social Services, the hospital and the importance that this was addressed before there was another failed discharge as Megan would fall again and be readmitted if nothing was done to support them at home. Jamila also attended the Frequent Attenders Panel to raise these concerns further.



Action: Support at home has been put in place such a care package and key safe. In addition, tech support such as Turn On And Test has been put in place by Jamila. Jamila is also helping Megan to get some unwanted furniture removed from property to limit fall hazards in the future.

Outcome: Megan came out of hospital and was able to return to their home, as was their choice. Jamila is visiting them each week to ensure everything in place with their care package and ensuring the home remains accessible. As a longer-term plan, Jamila is discussing and exploring alternative housing options with Megan to prepare for the future should it be needed.

Engagement with: Adult Social Services, Frequent Attenders Panel and Hospital Discharge Team