

AGENDA ITEM 6

TITLE OF REPORT Healthwatch Hackney Housing and Health Issues	
HEALTH AND WELLBEING BOARD - 21st July 2021	CLASSIFICATION: Open
WARD(S) AFFECTED All	
Report of Healthwatch Hackney	

1. Summary

This report comprises two sections. The first is a summary report based mainly on a review of feedback received over an 18-month period, between 1st October 2020 to 31st March 2021. This identified 72 issues from 26 people. In the main report are the key themes identified in this feedback. This is set out below and at appendix 1 is our Community Insight Report, which these key themes are based upon. Included below is section on homelessness based on our joint report with Shelter published earlier this year called 'We are still human – stories from temporary accommodation in Hackney' (see appendix 2).

2. RECOMMENDATIONS

2.1 The board is asked to note this report.

2.2. The board note the recommendations of the Temporary Accommodation report and response (press release) of Hackney Council (3.6.2. below) 2.2.1 All residents should have access to wi-fi. So, they can work, study, and socialise without having to depend on unreliable and expensive phone data.

2.2.2. All residents should have access to laundry facilities that work, are within walking distance, and available at a reasonable price – if not free.

2.2.3 Residents must be given information when they move about where they are moving to, how to access local services, and what rights they have.

2.2.4. Residents should feel supported, with clear access to information about their case and consistent support from the local authority for their wellbeing.

2.2.5. Residents should feel empowered. They should be listened to, have their concerns addressed, and be involved in open forums, meetings, and service design.

3. BACKGROUND

Key themes from the Healthwatch Community Insight Review

3.1 Repairs and Maintenance

3.1.1. Issues mentioned included 3 elderly individuals who needed **help to fix a blown light bulb** that the resident could not reach, help with their garden, and repairs to appliances, including a CD/radio and washing machine. These would not fall under Council the responsibility of the Council repair team, nevertheless they were having an impact on the health of residents.

3.1.2 An elderly individual age 90 said "I need help to sort things out, cannot manage. Did have a flood at my flat and **did not get much help from the Council**. Had to go and stay with a friend for 3 nights – nowhere else to go".

3.1.3 The **lift breaking** and leaving an individual stranded on the eighth floor meant that they were unable to get shopping up. Not knowing how long the repair would take was the worst part.

3.1.4 Getting **emergency repairs** from Newlon and Peabody in relation to water leaks in April 2020 was reported as an issue.

3.1.5 When we asked members of the Somali community in early 2021 what had the biggest impact on their health and well-being, they said housing.

Housing - It stresses me a lot. The house is **overcrowded**, it's two-bedroom council house and I have four children aged between 2-13 years. I have mice in the kitchen

5 months ago they **removed the central heating** from the bathroom and said they'll come back to put another but that never happened. I called the council on Friday to report the boiler and they said the system is down.

I applied for a bigger house year and a half ago but haven't received my bidding number yet. This greatly affects my stomach, and I can't control it, My GP doesn't listen to me sometimes. Last time I used their services I had to go and pay for private care because didn't feel comfortable with the results from my GP. The nurse there is also not very good and while ago I told them that I didn't want to be seen by her anymore. I also made a complaint.

Housing, I live a hostel with my two-year-old daughter and because I have to share the toilet, **I can't potty train her**. I can't go to the toilet at night because I can't leave her in the room by her-self.

3.2 Home adaptations

3.2.1 The following case submitted to Homerton Hospital demonstates a failure to action much needed adapations as a result of a communication failure between the hospital and Housing Association.

This is a summary of the failure to provide the assessment promised to my Landlord in March 2020. My letter of 4 August which to date has been ignored:

"Your records should show treatment I had via your physiotherapy and occupational health services, after discharge from inpatient Hospital treatment, with therapists from each visiting me at home numerous times.

At the end of that prior to the total lockdown of services they took measurements in my bathroom for the installation of accessible rails. They gave me a categorical assurance these recommendations would be sent to the Housing office who, as my Landlord, would be required to do that work.

Since that time I have still not been able to use my bath as a bath as I simply don't feel safe doing that. My Housing Association are telling me via email they have no record of such a request from your department.

One of you two organisations – Homerton Hospital or my Housing association – are now making my life difficult, when the whole point of your two organisations is to help people, not hinder them. Please resend those assessments made in March to the their office .Please send them as a matter of urgency."

The above has never been replied to. Dozens of attempts to call that dept end in a phone ringing - no answer no voicemail.

3.2.2. In another instance an individual wrote *"I have still not steps lowered to get in and out of my flat. The council keep stalling and still say I'm not in a wheelchair which is rubbish. I have on several occasions because the step is high and I have difficulty lifting my left up high enough. I have tripped and nearly fallen but raised my arms stopping myself"*

3.3 Social support available

3.3.1 A resident in sheltered housing whose husband had died 8 years ago said *"I've moved here and made new friends. We've all lost our husbands, so we mind each other"*. The issue of **mutual support** was mentioned by another resident who said, *"People here look out for each other"*.

3.3.2 Not all residents in sheltered housing receive visitors and remain isolated it was commented that *"They move in without knowing anyone. Those are ones that don't last long."*

3.3.3The lack of activities in the communal spaces in sheltered housing schemes was also mentioned *"It is hardly used except for funerals. What a waste!"*

3.4 Homelessness

3.4.1 In April 2021 Healthwatch Hackney, in partnership with Shelter, published a report based on interviews with 27 households in temporary accommodation in Hackney.

https://www.healthwatchhackney.co.uk/wp-content/uploads/2021/04/Stories-from-te mporary-accomodation-in-Hackney.pdf (Appendix 2)

3.4.2 Headline findings relating to health:

63% of disrepairs were not remedied within four weeks of being reported, with 15% of disrepairs not repaired at all.

"The cooker has been broken for three weeks and a burst pipe leaks into the room. I still haven't been moved. It's expensive having to always buy takeaways." HABBIBA, HOSTEL

78% of residents said living in temporary accommodation had an impact on their mental health.

48% of residents said living in temporary accommodation had an impact on their physical health.

"My daughter had bad eczema in our first temporary accommodation, which was infested with red ants, mould, and damp. This cleared up when we moved but no visitors are allowed in our new place, which makes me feel isolated and depressed." SHAYLA, HOSTEL

3.4.3 Other feedback gathered as part of our Covid impact survey in June 2020 was positive about the support offered. *"I was admitted with Covid-19 sympthoms. I stayed in Travelodge for two months and was very well looked after. I am homeless and used to sleep in the Synagogue before I was admitted to the hospital. The social worker arranged for me accommodation at Limetree Court and I appreciate it very much".*

3.5 Impact of Covid

3.5.1 Getting access to **appropriate food** when Shielding was an issue, with supermarket delivery slots impossible to arrange and the food parcels not containing fresh produce.

3.5.2 **Domestic Abuse** rose during the pandemic. Father 2 Father said "The African Caribbean community are not going to the statutory sector, but will go to places like Sistah Space. We want support for abused and abusers."

3.5.3 Latin American Women's Aid said "Something that is common knowledge is that there is a great increase in Domestic Violence, meaning there is a need for refuge spaces. I want to raise that women fleeing domestic violence are put on the prioritised list, so they can be rehoused. Also if women can move on from the refuge, it can make space for more women in need. Sometimes the refuge can't accept referrals because women have No Recourse to Public Funds – can this be lifted?

3.6 Hackney Council Press Release

3.6.1 The Council issued the following press release in response to this joint report from Healthwatch and Shelter.

3.6.2 "We welcome this report and these recommendations by Shelter, and have made or are already working hard to realise the improvements they are asking for. The aims of Shelter and the council coincide: to provide the very best accommodation that is possible and support for our most vulnerable residents.

"The council spends £10 million every year on temporary accommodation provision for homeless households. We have the largest temporary accommodation hostel stock in London, and in the past five years we have worked in partnership to build 173 modern units and renovate a further 150 more for families. We also provide temporary accommodation for 1,400 households outside of the borough.

"As part of our continued drive for improvement we are currently in the midst of a multi-million-pound hostel refurbishment project to provide bespoke, modern accommodation for single rough sleepers with the very highest needs, and with on-site 24-hour support to assist with their recovery journey.

"We have a statutory duty to provide accommodation for all types of homeless people including those with multiple needs and prison-leavers: and our prime concern is providing safe and secure accommodation.

"Staff work tirelessly to provide multi-layered help to our homeless residents, continually looking for ways to make change for the better, whether that be by making improvements to properties; providing access to ever-more tailored support; or introducing new ways of working that gives residents more say and agency over their situation. This work has intensified over the pandemic, despite the impact on our services of the cyberattack on the Council.

"Examples of improvements we are making include: rolling out free wifi to all our hostels over the next year; installing laundry facilities where possible; working on improved crisis prevention; trialling the embedding of social workers in housing needs teams; and providing hostel residents with clear and accessible accommodation guides, which outline key contacts and highlight a range of services they can access. We also survey residents to get their feedback and will be running focus groups with them in the future to better understand their concerns."

BACKGROUND PAPER

- Healthwatch Hackney Housing Community Insight Report
- 'We are still human stories from temporary accommodation in Hackney' Joint report of Healthwatch Hackney and Shelter

In accordance with The Local Authorities (Executive Arrangements) (Meetings and Access to Information) England Regulations 2012 publication of Background Papers used in the preparation of reports is required

Report Author	Jon Williams, Executive Director, Healthwatch
	Hackney 020 3929 8088