



## Hinckley & Bosworth Borough Council

Forward timetable of consultation and decision making

Council 18 July 2023

Wards affected: All wards

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### Pilot Project – Housing and Respiratory Illness

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Report of Director (Community Services)

#### **1. Purpose of report**

- 1.1 To inform members of a joint pilot project under the Lightbulb Governance Board, to be hosted by Hinckley and Bosworth Borough Council, to address housing conditions likely to exacerbate respiratory illness.
- 1.2 To request an income and expenditure budget to deliver the project.

#### **2. Recommendation**

That Council

- 2.1 Notes the project and its intended outcomes.
- 2.2 Approves a supplementary income and expenditure budget of £147,000 each year over the next two years, funded from the Better Care Fund, as detailed in section 5 of the report.

#### **3. Background to the report**

- 3.1 The quality of housing can have significant impacts on health and wellbeing. It is estimated that nearly a quarter of privately rented homes do not meet basic decency standards. Poor housing conditions and the prevalence of issues such as excess cold, damp and mould can exacerbate respiratory illnesses such as asthma. Those most vulnerable to health harm from damp and mould include babies and children and older persons. Those with existing health concerns such as respiratory illness, weakened immune, allergies and asthma are also more at risk. The tragic and recent death of Awabb Ishak has

further highlighted the relationship between poor housing conditions and respiratory illness.

The Lightbulb Partnership has agreed a pilot project intended to implement a consistent approach, across Leicestershire, to identify damp and mould hazards within households, at the earliest point, across all tenures. Whilst District and borough councils already undertake inspections of homes to assess for risks including damp and mould, these inspections tend to be more responsive rather than proactive. Being proactive is the key to this stream of work. This project would also help to close a gap in service delivery with Housing and Primary /Secondary Care being more joined up in the prevention of respiratory conditions by establishing clear pathways and training. By adopting a common approach to identification, remedial action and wider referral it is hoped that causal factors likely to aggravate the presence of damp and mould within the home also are addressed, in turn reducing the likelihood of serious respiratory illness from developing.

The proposal also seeks to establish robust and sufficient responses from both health and housing authorities, once hazards are identified, to prevent reoccurrence and to minimise adverse health impacts for households. By assessing wider causal factors, such as fuel poverty or insufficient home insulation, it is hoped that the reoccurrence of damp and mould hazards within households can be reduced.

The proposal seeks to increase knowledge across our frontline workforce, to determine a minimum standard of action and to establish and implement a memorandum of understanding between the housing and health partnership.

### 3.2 Project delivery

Through agreed funding contributions from the Better Care fund as set out in table A, the project will facilitate the recruitment of two full time staff, with speciality in housing and health who will lead on establishing a minimum standard of response and subsequent action from housing and health authorities across Leicestershire when damp and mould hazards are identified.

Table A

<b>Districts</b>	<b>Respiratory illness across LLR (for 2 years – costs will be replicated next year)</b>
Blaby	£21,000
Charnwood	£21,000
Harborough	£21,000
Hinckley	£21,000
Melton	£21,000
NWL	£21,000
Oadby/Wigston	£21,000
<b>TOTAL</b>	<b>£147,000.00 (£294,000)</b>

The post holders will also establish a training programme across housing and health services, to ensure that frontline officers are aware of the impacts of adverse housing conditions on health, particularly in terms of risks to vulnerable groups. Resources and training programme materials will be shared with wider health and public health to disseminate wider; such as asthma hubs, respiratory services and parent/carer forums.

The post holders will look to embed an approach to ensure that remedial actions are progressed effectively, by providing support and advice to all housing authorities, and that pathways to help households tackle aggravating factors, such as fuel poverty or other cost of living impacts, such as referral to wider supportive offers in each locality are maximised. A comprehensive damp and mould training programme of front-line staff would ensure a legacy outcome for the project.

There are currently a number of housing retrofit schemes being delivered across the county within low income, mixed tenure households. The project officers could link in with this work where homes are identified as requiring physical remedial work to improve the property so that adequate thermal comfort is achievable.

Cross referral pathways to align these streams of work would satisfy both the proactive respiratory health improvements and the decarbonisation of housing stock. This would allow for innovative delivery and potentially allow for access to more external funding opportunities, to deliver capital improvement works. External funding opportunities are often more successful if able to demonstrate innovation and multiple outcome delivery. Adopting a systems approach, the proposal will also develop a pathway between health and housing colleagues to ensure that intervention to take action to reduce and eradicate damp and mould within the home is established at the earliest point.

The post holders will establish a performance framework that each locality can ultimately adopt, to ensure that continued collaboration and effective outcomes are enabled and embedded in services beyond the duration of the project.

### 3.3 Delivery

Hinckley and Bosworth Borough Council's Housing Service will host and lead the project on behalf of the 7 district councils over the next 2 years. As such an administrative fee of 10% will be required to support project delivery, this is built into allocations outlined in Table A.

### 3.4 Governance

Priorities and key outcomes for the pilot will be determined by a working group comprising of representatives from each of the 7 district councils. Quarterly updates in project delivery will be provided to the Lightbulb Governance Board.

#### **4. Exemptions in accordance with the Access to Information procedure rules**

4.1 Open Session

#### **5. Financial implications [AW]**

5.1 The pilot will be paid for out of the Better Care Fund. HBBC direct contributions is £42,000 over two years. Therefore, there no impact on the general fund as covered by the better care fund budget, but the diverted funds will not be available for adaptations as they will be used to fund the pilot study.

5.2 The overall budget is £147,000 in the first year of the pilot, which will be repeated in year two. Contributions from external partners will be £126,000 with HBBC's contribution being £21,000. AS HBBC are the host body, the budgets will need to be approved and set to cover the total income and expenditure of the pilot, which will run for two years. As the budget required is over £50,000 it will require full Council's approval.

#### **6. Legal implications [MR]**

6.1 Section 1 of the Localism Act 2011 gives the Council power to do anything that an individual generally may do including for the benefit of its area or persons resident in its area.

6.2 Section 111 Local Government Act 1972 gives the Council power to do anything which is calculated to facilitate or is conducive or incidental to the discharge of any of its functions. HBBC is a Housing Authority, and the aim of the project is clearly incidental to its functions and responsibilities as a Housing Authority

#### **7. Corporate Plan implications**

7.1 The pilot aligns to the following corporate plan objectives.  
People- *Help people to stay health, be active and feel well*  
*Give children and young people the best start in life and offer them the opportunity to thrive*  
Place- *Improve the quality of existing homes*

#### **8. Consultation**

8.1 The pilot projected was informed by consultation with all district councils in Leicestershire.

#### **9. Risk implications**

9.1 It is the council's policy to proactively identify and manage significant risks which may prevent delivery of business objectives.

- 9.2 It is not possible to eliminate or manage all risks all of the time and risks will remain which have not been identified. However, it is the officer's opinion based on the information available, that the significant risks associated with this decision / project have been identified, assessed and that controls are in place to manage them effectively.
- 9.3 The following significant risks associated with this report / decisions were identified from this assessment:

Management of significant (Net Red) risks

Risk description	Mitigating actions	Owner
Failure to adequately tackle poor housing conditions may lead to an increase in respiratory illness or associated fatality	The project looks to improve proactively identify hazards in the home and mitigate associated risks  Upskilling both housing and health frontline officers will increase reporting and early identification.	Head of Housing / Private Sector Housing Manager

## 10. Knowing your community – equality and rural implications

- 10.1 The project focuses on those most vulnerable to health harm from damp and mould include babies and children and older persons. Those with existing health concerns such as respiratory illness, weakened immune, allergies and asthma are also more at risk.

## 11. Climate implications

- 11.1 The scope of the project also considers decarbonisation objectives and looks to support residents with cost effective, low carbon heating solutions.

## 12. Corporate implications

- 12.1 By submitting this report, the report author has taken the following into account:
- Community safety implications
  - Environmental implications
  - ICT implications
  - Asset management implications
  - Procurement implications
  - Human resources implications
  - Planning implications
  - Data protection implications
  - Voluntary sector

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Background papers: None  
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