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Executive summary

A Quantitative Health Impact Assessment: The cost of private sector housing and prospective housing interventions in Merton

28 July 2015

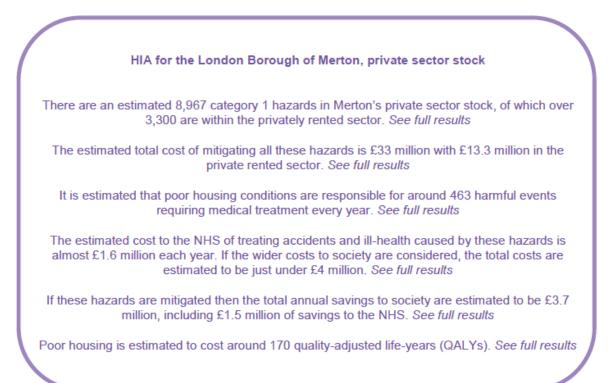
Merton Council has recognised that poor housing has an important effect on health as most occupiers spend longer in their own home than anywhere else. Additional information is also required concerning private sector housing in order to inform the Joint Strategic Needs Assessment (JSNA).

- The council has commissioned BRE to produce housing stock models to help understand the condition of the private sector housing within their area (these are provided in a separate report). The housing stock model is based on data gathered from a number of sources (including the English Housing Survey (EHS)) and includes an assessment of dwelling hazards using the Housing Health and Safety Rating System (HHSRS). This data from the housing stock model has then been used as a basis for this Health Impact Assessment (HIA) to better understand the effect of private sector housing hazards and intervention strategies on the health of residents in Merton.
- A HIA is a formal method of assessing the impact of a project, procedure or strategy on the health of a population. This HIA draws on evidence of the health impact of hazards identified using the Housing Health and Safety Rating System (HHSRS¹) and a methodology developed by the BRE Trust and published in the "Real Cost of Poor Housing"². The HHSRS is the method by which housing condition is now assessed in accordance with the Housing Act 2004. A dwelling with a category 1 hazard is considered to fail the minimum statutory standard for housing and is classified as "poor housing".
- This report provides a quantitative HIA for the London Borough of Merton which covers:
 - The condition of private sector housing and the estimated effect on the health of occupiers
 - The cost of prospective interventions to reduce the number of hazards
 - o The costs to the NHS and wider society of treating these health issues
 - The health cost benefit analysis of interventions to reduce some of these hazards
 - o An analysis of Quality Adjusted Life Years (QALYs) relating to housing hazards

¹ Housing Health and Safety Rating System Operating Guidance, Housing Act 2004, Guidance about Inspections and Assessments given under Section 9, ODPM, 2006

² The Real Cost of Poor Housing, M Davidson *et al.*, IHS BRE Press, February 2010

The main results are shown in the summary table below and the headline results are as follows:



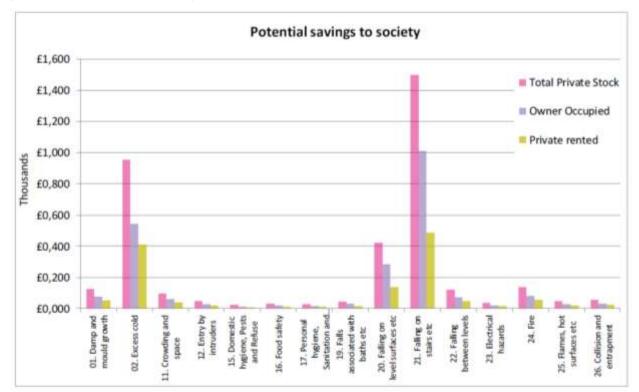
Summary of results, private sector stock

Housing hazard type	Numbers of bacards (total private sector stock)	Estimated number of instances requiring medical intervention	Cost of milligating all hazarde	Admittel annual costs of not mitigating hazarde				Cost benefit analysis			
								Cost benefit to NHS		Cost beenfit to Society	
				Costs to NHS	1000	Savings to NHS	Savings to society	where 20% works are	Positive cost benefit year where 50% works are carried out	benefit year where 20% works are	benefit yea where 50% works are
Damp and mould growth	151	20	E1,776,075	訪問題	STOTES .	151,000	《出書號》	1	1	8 92	3
Excess cold	2,521	- 14	£18,738,153	E423-770	STORATS.	ENES	(THE AT)	1	- 15	1	6
Crowding and space	12		£749,510	106770	DECH	139,666	1100,125	4	12	2	. 3
Entry by intruders		31	E1331,247	120.640	CORE I NEED	119,730	STR.15	2	1	1	8 2
Domestic hygiene, Pests and Refuse	81	20	E541:536	6000	101.125	19.350	123.325	Excluded	Excluded.	Exhibit	Excusient
Food safety	2	12	1754.478	113,700	COULSE	613.680	E34.781	Encluded	Excuded	Exhibit	Enturbed
Personal hygiene, Sanitation and Drainage	54	11	£000.579	£12.000	Transmitt.	112.040	EN III	Excluded	Excluded	Exhibit	· Exhibit
Falls associated with baths etc	81	5	003,993	. Ette att	F.E.M. DEC	118,310	EB705	0	0	0	1.0
alling on level surfaces etc	ART	49	41.982.271	11100-410	14 mm	1109,570	20070-005	1	2	1.1	1
Falling on stairs etc	3,792	119	#5.249.575	EURE-RIO	11010.025	E600.060	11,500,1131	1	2	11	1
Falling between levels	457	244	1770,779	245310	Galicini	148.990	4122.225	2	5	1	1. 2
Sectrical hazards	0	3.0	1337.725	£11,800	107.25	£11,60	02.05	Excluded	Ecouded	Exhibit	Estudied
le	ND	5	£1.324.691	220,400		£54,900	1220.235	1	<u>(</u>)	2	0.18
Flames, hot surfaces etc	130	21	E479.981	120.040	STERN IM	E19,440	annin sa	1	2		0.01
Collision and entragment	236	34	£275,724	124.380		122.640	100.000	0	0	0	0
TOTAL	1.507	463	1255.040.005	E1.586.631	12,000,000	£1,475,580	12 888 300	10.0	0/8	11.0	80

(N.B. due to data availability, some hazards are excluded from the cost benefit analysis. The estimated number of hazards is more than the number of dwellings containing hazards since a dwelling can contain more than one hazard, the numbers in the cost benefit analysis columns relate to the payback periods [years] achieved through the mitigation of the least expensive 20% and 50% of hazards).

As well as the estimated number of hazards present it is also possible to estimate the number of persons living in private sector housing within Merton that are expected to be affected by the hazards. These estimates are based on the number of dwellings being occupied by a person who may be in the "risk" group for a particular hazard (the vulnerable age group).

- The estimated annual cost to society of fall hazards associated with older people is estimated at £2.1 million but a saving of £2 million is estimated as being possible. This indicates that repairs and improvements to stairs, floors and paths, plus additional safety arrangements for baths are likely to be the cost effective.
- The estimated costs and savings can be shown by tenure. The largest costs and savings are within owner occupied dwellings but the estimated savings to society when all category 1 hazards in the privately rented sector are mitigated is £1.4 million as shown in the graph below.



Potential savings to society following mitigation work, by hazard and tenure, all private sector stock and split into tenure

- The health cost benefit analysis of interventions to reduce some of these hazards has been developed to show the costs and savings to the NHS and to society as a whole from carrying out work in dwellings with the least expensive 20% and 50% of required works. By focussing on the less expensive works, the expected payback periods (the number of years to reach the break-even point) are shorter. The table on the previous page shows that the shortest payback periods are for the hazards of collision and entrapment and some of the falls hazards. The longest payback periods are associated with the more complex hazards of damp and mould, excess cold and crowding and space.
- The quantitative information provided in this HIA on the impact of private sector housing on health, will provide an invaluable contribution to the JSNA. The results will contribute to the provision of evidence of the costs, savings and benefits of improving housing in the private sector, and the costs to health of not doing so. Some recommendations are provided which look at possible interventions in order to assist the council in making

decisions concerning where resources can best be targeted to improve private sector dwellings in Merton. Local knowledge will be key in targeting resources to gain the greatest benefit in both geographical areas and population profile. The importance of a Home Improvement Agency or a Handy Person Service to help take action is identified by this report.

Main recommendations:

- Within the private rented sector, the annual cost to society of category 1 hazards is estimated to be £1.5 million. Work to mitigate these hazards will need to be carried out by landlords in accordance with legislation in the Housing Act 2004. To facilitate this, an active housing enforcement strategy will be necessary.
- Landlord Accreditation Schemes can help to educate landlords on the need to mitigate hazards.
- The hazard of damp and mould particularly affects children and can cause long term effects that may well be underestimated by this piece of work (the evidence is not available to quantify the true cost over a long time period). Flames and hot surfaces and falling between levels also specifically affect children. Education using a multi-agency approach with Health Visitors or through Children's Centres and accessing local knowledge will be crucial to reducing these hazards. Professionals working with families in the private rented sector should be made more aware of landlord duties.
- The evidence indicates that initiatives to reduce the incidence of falls at home should be one of the more cost effective strategies. The cost benefit scenarios show that the best value initiatives will look to small-scale repair or improvement works to stairs, trip hazards within the home and to uneven paths. Targeting this initiative towards dwellings occupied by persons over 60 will bring the greatest benefit.