

Middlesbrough Environment City – Heating on Prescription

Funding GDN(s)	Northern Gas Networks
For Collaborative VCMA Projects:	Role of GDN(s) N/A
Date of PEA submission:	March 2024
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Total cost (£k)	*detailed separately
Total VCMA funding required (£k)	*detailed separately

1. Problem(s)

Lung conditions are estimated to cost society around £9.9 billion each year. Respiratory disease affects one in five people in England and is the third biggest cause of death. Hospital admissions for lung disease have risen over the past seven years at three times the rate of all admissions generally and remain a major factor in winter pressures faced by the NHS.

Incidence and mortality rates for those with respiratory disease are higher in disadvantaged groups and areas of social deprivation, where there is often higher smoking incidence, exposure to higher levels of air pollution, poor housing conditions and exposure to occupational hazards. The local authorities in the Tees Valley area are some of the most deprived in England. All five are within the top 25% most deprived. There are also higher levels of disease prevalence of Chronic Obstructive Pulmonary Disease (COPD) in the Tees Valley, with many people still undiagnosed.

Emergency hospital admissions for a range of respiratory conditions are higher than the national average for areas in the Tees Valley. The rate of admissions for COPD, particularly in the South Tees area is significantly higher than the England average. Admissions for asthma in adults are particularly high in Hartlepool and Stockton-On-Tees with the 5th highest rate nationally. Admissions for pneumonia and respiratory diseases are also significantly higher. The under 75 mortality rates from respiratory disease is worse than the England average across all locality areas.

Solution

Middlesbrough Environment City through their Warm Homes: Better Health project aim to utilise funding to support those living in disadvantaged groups with a respiratory condition COPD and support them to warm their home in winter, plus support with making positive changes to their heating infrastructure to prevent exacerbation of their condition. Roll out of the project will take place in two stages, a pilot project during 2023/24 and full roll out across all 15 GP practices in 24/25.

2. Scope and Objectives

The project will target 15 GP practices across the Tees Valley who are defined as 'deep end' practices, these are practices with the highest levels of blanket socioeconomic deprivation. Within these practices there are circa 1,322 individuals identified as having COPD These will be the target cohort.

Patients identified as being diagnosed with COPD in these practices, or identified via South Tees NHS Hospitals Foundation Trust using the same criteria, will be proactively contacted to be offered support from the warm homes: better health scheme. This contact will be two-fold by their GP Practice: by initial invitation (letter/text/email) and follow up direct contact

from the practice to support engagement and increase uptake and will take the same form for referrals made by the Trust.

The individual will then be contacted by the delivery partner to undertake an assessment of heating infrastructure in the individual's home, support with access to required equipment and provide vouchers to contribute towards heating their home during the winter period (December – March). As part of the support offered to the individual, they will also have the ability to be referred into broader Local Authority warm home schemes and broader benefit assessment/housing standards schemes, meeting the requirements of Making Every Contact Count (MECC).

It is expected that the outcome of the project will be that these individuals will have a reduced number of COPD exacerbations, improved their quality of life and in turn, there will be a reduction in pressure on NHS services. The changes made to housing standards/infrastructure will also provide a legacy of a warmer home for the individual concerned over a number of years.

The plan is to pilot the project on a smaller scale during winter 2023/24 (December – March) and roll out across all 15 practices during 24/25. This will allow for a longer period of engagement and sign up during 2024 increasing the uptake and therefore the impact.

2.1 The objectives of this initiative are:

- To improve health and wellbeing
- To reduce fuel poverty
- To increase awareness and registrations of the PSR

2.2 Scope

Actions required:

- Incentive scheme offered to 15 deep end practices (over the course of the two years) to identify patients on COPD Register.
- Practices to make contact with individuals on a two fold basis, via initial letter/email/text then followed up with direct contact (potentially from Social Prescriber/HCA) to encourage uptake. South Tees NHS Hospitals Foundation Trust will also be able to identify patients from the same cohort that present to them and refer on
- Individuals who consent are contacted by provider to undertake assessment of need, provide heating vouchers, equipment where required and referral into other relevant schemes/housing support schemes as needed
- Exacerbations to be monitored during the life of the project for the identified cohort to monitor a reduction in health presentations

3. Why the Project is being funded through the VCMA

This project qualifies under the criteria for VCMA funding, as it will support vulnerable customers across the Northumberland locality, addressing fuel poverty as well as raising awareness of CO and the PSR. As the project has mental wellbeing and financial hardship themes, it aligns with NGN'S Vulnerability Strategy.

There will be no collaboration from other GDN's nor other funded sources.

3.1 Eligibility criteria

- This project has a positive SROI
- This project will support NGN's Vulnerability Strategy by aligning with the Financial hardship theme and the wider vulnerability categories of:
 - Financial hardship
 - Socio-demographic
 - Cultural
 - Rural Vulnerability
 - Temporary vulnerability
 - Mental Wellbeing themes
 - Medically Dependent on Energy
- Has defined outcomes as required
- Goes beyond NGN's licence obligations and price control funded mechanisms

4. Evidence of stakeholder/customer support

Within the Northern Gas Networks region, we serve 2.7 million gas-using households. The socio-economic characteristics of our region mean that we operate in many communities that are amongst the most economically deprived in the whole country. This was a key factor in our prioritising engagement with vulnerable and hard-to-reach groups of customers, telling them about our services, about what we do and how we could improve.

Each year, we undertake analysis of all the insight we've heard in the previous year to prioritise those issues our stakeholders most want to engage on. Over the past 12-18 months, we've done this in a number of ways.

4.1 Customers in Vulnerable Situations (CIVS) Workshops

Asking our stakeholders what's important – using our wide range of engagement mechanisms from strategic workshops to customer perceptions, we asked stakeholders to prioritise what is most important to them. Since 2019 we've held regular workshops with our stakeholders, on the subject of Customers In Vulnerable Situations (CIVS). This ensures that we are well informed to address the needs of customers across our network and through collaborative projects.

Stakeholder engagement throughout 2022, told us that fuel poverty and the choice between heating and eating is becoming more prevalent. The energy and cost of living crises have further compounded this issue. This project provides a solution to helping those customers who are financially struggling and need extra help to address energy affordability. The project fully aligns with the need to help vulnerable customers in fuel poverty.

Recent social indicator mapping research carried out in June 2022, indicated that Bradford, Hull, Scarborough, South Tyneside, and Sunderland were the top five places, to emerge as having the greatest concentration of vulnerabilities within NGN's network. This was based on a combination of the following vulnerability factors:

- Fuel poverty
- Benefit claims
- No qualifications
- Long term health problem / disability

Our most recent stakeholder engagement during 2023 has informed us that financial hardship is still a key area of focus, alongside the health impacts associated with, or exacerbated by, living in cold and damp homes. Stakeholders also told us that increasing capacity for support within services would be key to addressing the immediate and longer term impacts of fuel poverty and energy affordability. This project addresses this need and ensures additional capacity to support households who may be at risk, through a well-established and trusted advice service.

Each year we use our annual Customer Perceptions Research to understand the priorities of our customers. Amongst a set of general tracker questions i.e., same questions that are asked year on year, the evidence in the most recent research (March 2023), indicated that keeping bills as low as possible ranked more highly, than providing a safe and reliable supply of gas. This is a clear indication, as to how concerned customers are about the cost of energy and the subsequent impact this will have on other bills. Customers were also asked to prioritise the list of vulnerabilities listed below:

- Mental wellbeing
- Rurality
- Temporary vulnerability
- Physical challenges
- Financial Hardship

This was the order of priority from the customers surveyed:

- Financial Hardship
- Physical challenges
- Mental wellbeing
- Rurality
- Temporary vulnerability

Financial hardship continued to be the dimension of vulnerability that most customers prioritised, with more customers in the most recent survey selecting this as their top priority. Physical challenges were second, closely followed by Mental well-being third. Rurality and Temporary vulnerability were ranked fourth and fifth.

Very recent (Autumn 2023) Bespoke Vulnerability Stakeholder Mapping research identified categories of stakeholders that are hard to reach, this included:

- People living with a disability
- Senior citizens with long term conditions
- Pregnancy and maternity
- Mental health

Health conditions which are prevalent in the NGN region are:

- Cancer and chronic kidney disease
- Musculoskeletal conditions
- Respiratory
- Mental health

Through the research carried out, the findings show that the 5 original NGN vulnerability categories have now evolved to 10 categories. These are:

- Physical challenges, inclusive of communication issues, physical space
- Mental wellbeing
- Financial hardship
- Temporary vulnerability – including post hospital recovery and pregnancy / maternity
- Socio Demographic
- Household composition
- Rural Vulnerability
- Accessibility Including language
- Medical Dependant on Energy
- Cultural

4.2 Customer Engagement Group (CEG)

This group provides an independent oversight into the actions we take to support our customers in vulnerable situations (CIVS). Checking we've got it right – using a range of engagement mechanisms to assess and challenge our response to stakeholder feedback,

ensuring we are responding in the right way. This has offered us robust challenges into how we deal with customers in vulnerable situations which meets the needs of our stakeholders.

4.3 Vulnerability Strategy AAA Framework

Within our vulnerability strategy we have developed, with the help of our stakeholders, the 'AAA' framework. This helps us support our customers in vulnerable situations. Awareness, Accessibility and Action. By adapting this principles-based approach into our AAA framework, we will ensure that all customers are treated fairly and consistently. The themes of rural and financial vulnerability within the project, align to NGN's Vulnerability Strategy.

5. Outcomes, associated actions, and success criteria

5.1 Outcomes

- Increase in home energy efficiency Where appropriate and with permission, residents who are engaged with this project will be offered guidance to explore how they can reduce heat loss within their home. Pathways to organisations such as MEC Affordable Warm Team and Groundworks Energy Doctor will support the implementation of installing energy saving resources.
- Additional funding secured for local residents: Local Authority teams will provide up to date information on available energy grants which could be applied to for the purpose of improving the energy rating of individuals home.
- Increase Priority Service Register uptake: All participants of the project will be signed up – 1,322
- Increase in advice, guidance and support provided: All participants will be made aware of additional advice, guidance and support available, with established pathways in place with the likes of carer's together, citizen's advice and family hubs who can provide local support around caring responsibilities and income maximisation.

5.2 Success criteria

- 1,322 individuals with COPD supported and signed up to the PSR
- Engage with 15 GP practices
- Reduced COPD and Asthma exacerbations

- Improved quality of life
- Reduced pressure on NHS services due to a reduction in exacerbations
- Improved access to benefits an individual may be entitled to
- Warmer home during winter
- Increased awareness of carbon monoxide poisoning amongst the project beneficiaries.

6. Project Partners and third parties involved

Middlesbrough Environment City was formed in 1992 and became an independent charity in 1997. Working closely with Middlesbrough Council, and other partners from the public, voluntary, community and private sectors, to deliver a diverse range of projects each year. For this project they will work specifically with:

- 15 GP practices across the locality
- South Tees NHS Hospitals Foundation Trust
- Groundworks Energy Doctor
- Carer's Together
- Citizen's Advice

7. Potential for new learning

Any learning will be shared with stakeholders, including GDN's, DNO's and water companies.

8. Scale of VCMA Project and SROI calculations

This project has a positive SROI return.

VCMA Project start and end date

January 2024 - April 2025

Geographic area

Tees Valley (Middlesbrough, Redcar and Cleveland, Stockton-on-Tees, Hartlepool)

Approved by

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