

07 February 2023 at 7.00 pm

Council Chamber, Argyle Road, Sevenoaks

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Housing & Health Advisory Committee

Membership:

Chairman, Cllr. Maskell; Vice-Chairman, Cllr. Harrison

Cllrs. Bonin, Bulford, Dr. Canet, Clack, Penny Cole, Perry Cole, G. Darrington,

Edwards-Winser, Esler and Griffiths

Agenda

There are no fire drills planned. If the fire alarm is activated, which is a continuous siren with a flashing red light, please leave the building immediately, following the fire exit signs.

	Pages	Contact
Apologies for Absence		
1. Minutes To agree the Minutes of the meeting of the Committee held on 22 November 2022, as a correct record.	(Pages 1 - 6)	
2. Declarations of Interest Any interests not already registered.		
3. Actions from Previous Meetings (if any)		
4. Update from Portfolio Holder		
5. Referrals from Cabinet or the Audit Committee (if any)		
6. To note minutes of the Health Liaison Board To note the minutes of the meeting of the Health Liaison Board held on 17 January 2023.	To Follow	
7. Homelessness Review 2022 and draft Homelessness and Rough Sleepers Strategy 2023-2028	(Pages 7 - 80)	Alison Simmons Tel: 01732 227272
8. 2023-24 Sevenoaks District Health & Wellbeing Action Plan	(Pages 81 - 122)	Kelly Webb Tel: 01732 227474

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|-----|---|-------------------|------------------------------------|
| 9. | Application Of Additional Designated Rural Area Status In Relation To Core Strategy Policy SP3 | (Pages 123 - 130) | Sharon Donald
Tel: 01732 227131 |
| 10. | Scope for Council's Energy Efficient advice | (Pages 131 - 134) | Sharon Donald
Tel: 01732 227131 |
| 11. | Home Straight Project Update | (Pages 135 - 142) | Sharon Donald
Tel: 01732 227131 |
| 12. | Work Plan | (Pages 143 - 144) | |

EXEMPT INFORMATION

At the time of preparing this agenda there were no exempt items. During any such items which may arise the meeting is likely NOT to be open to the public

If you wish to obtain further factual information on any of the agenda items listed above, please contact the named officer prior to the day of the meeting.

Should you need this agenda or any of the reports in a different format, or have any other queries concerning this agenda or the meeting please contact Democratic Services on 01732 227000 or democratic.services@sevenoaks.gov.uk.

HOUSING & HEALTH ADVISORY COMMITTEE

Minutes of the meeting held on 22 November 2022 commencing at 7.00 pm

Present: Cllr. Maskell (Chairman)

Cllrs. Bonin, Bulford, Dr. Canet, Clack, Penny Cole, Perry Cole, Edwards-Winser, Esler and Griffiths

Apologies for absence were received from Cllrs. G. Darrington and Harrison

Cllr. Dickins and Cllr. Darrington was also present via a virtual media platform which does not constitute attendance as recognised by the Local Government Act 1972.

66. Minutes

Resolved: That the Minutes of the Advisory Committee held on 6 June 2022, be approved and signed by the Chairman as a correct record.

CHANGE IN ORDER OF AGENDA ITEMS

The Chairman, with the Committee's agreement, brought forward consideration of agenda item 8 (minute 70) to take place after agenda item 5 and took agenda item 4 after the revised agenda item 6 (minute 71).

67. Declarations of Interest

There were none.

68. Actions from Previous Meetings

The action was noted.

69. Referrals from Cabinet or the Audit Committee

There were none.

70. Budget 2023/24: Review Of Service Dashboards And Service Change Impact Assessments (SCIAS)

The Chief Officer - Finance and Trading presented the report which set out updates to the 2023/24 budget process within the existing financial strategy. SDC was not immune from the financial challenges affecting the country therefore this budget process was expected to be particularly challenging.

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Housing & Health Advisory Committee - 22 November 2022

No changes had been made to future assumptions at the stage which would be reviewed during the budget process, as usual. However, due to the April 2022 pay award being higher than previously assumed and an annual savings target of £100,000 already included, an annual budget gap of £735,000 was currently reported.

The report presented a growth proposal that had been identified which needed to be considered. It requested further suggestions from Members before finalising the budget for 2023/24. Informed by the latest information from Government and discussions with Cabinet, it was proposed that the Council once again sets a balanced 10-year budget and continues to aim to be financially self-sufficient.

The Committee considered the growth proposal identified in Appendices E & F to the report. Further consideration was given to a Council energy saving advice service, which could help identify ways of helping residents identify where they could be making energy efficiencies and be able to identify appropriate providers for any work which could be carried out.

Members discussed the proposal noting that there were some free services already which offered this advice and considered that the council had previously run a similar service. The Chief Officer, People & Places advised that previously this had been funded by external funding which had since ended. The Chairman advised that any suggestions would have to go through a feasibility study first and this would be able to give a more definitive answer to whether the suggestion would be financially viable as it had to bring in an income rather than be a further expenditure.

Public Sector Equality Duty

Members noted that consideration had been given to impacts under the Public Sector Equality Duty.

Resolved: That it be recommended to Cabinet that

- (a) the growth proposals (SCIA's 01) identified in Appendices E & F to the report applicable to this Advisory Committee, be considered; and
- (b) consideration be given to the following further income suggestion of a council energy saving advice service.

71. Update from Portfolio Holder

The Chairman and Portfolio Holder updated the Committee on the work within his Portfolio. He advised that the number of residents in temporary accommodation had decreased to 98 from 139 in March 2022. This was through the hard work of Officers increasing accommodation through the purchasing of 11-13 High Street, Swanley; and providing prevention assistance through the HERO Team. Quercus Housing is currently progressing the purchase of 27 - 37 High Street, which would

provide an additional 17 units with a mix of 1 and 2 bedrooms. He also advised Members of the other successful projects delivered in partnership, including Vine Court Road, Orchard Close and Stay Green House, which had been successfully delivered and he expressed his thanks to the Officers.

The Council had achieved both the Bronze and Silver Awards for Health in the Workplace and would be shortly submitting the Gold application.

Members expressed their thanks to the Officers for all their hard work.

In response to questions the Chief Officer, People and Places advised that it was a huge success for the Council to be able to provide affordable accommodation to those who most needed to access affordable private rented homes, and would share with the Committee the housing partners housing delivery targets going forward.

72. Mental Health Update

The Health and Communities Manager gave a presentation which updated the Committee on the work of the Council over the past year to address mental health concerns.

The Committee thanked the Health and Communities Manager for all the work that she and her team had undertaken and commended them for the work on the warm spaces.

In response to a question the Health and Communities Manager confirmed that staff had had the opportunity to provide feedback on the Mental Health initiatives delivered to Council staff in conjunction with the HR Team.

Resolved: That the report be noted.

73. Health And Wellbeing Action Team Half-Year Report

The Health and Communities Manager presented the report which updated Members on the first quarter (April to June 2022) of the action plan. Members were advised that over three topics there were 23 actions and 74% were on target. She advised that quarter two monitoring was being undertaken and some of the amber targets were now mostly green as there had been delays in some of the partners starting the projects.

Resolved: That the report be noted.

74. Summary of the Emerging Homelessness and Rough Sleeper Strategy

The Head of Housing presented the report which set out the Homelessness review and a draft Sevenoaks District Council emerging Homelessness and Rough Sleeper Strategy 2023- 2028 for consultation.

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Housing & Health Advisory Committee - 22 November 2022

The Housing Strategy 2022-2027 was approved in July 2022 contained 4 key themes of focus for the District Council's housing service over the next 5 years. Included Reducing homelessness and improving routes into permanent accommodation.

The Council had a statutory duty under the Homelessness Act 2002, to have a Homelessness and Rough Sleepers Strategy. The Strategy must be renewed at least every 5 years.

The Strategy must set out the Council's plans for the continued work towards:

- prevention of homelessness
- provision of sufficient accommodation/sustainable solutions
- support to be available for people who become homeless or who are at risk

The Council were required to undertake a Homelessness Service Review to inform the Strategy. The review provided information on the needs of people who had approached the Council's housing service for help since the last Homelessness Strategy was adopted. It considered what the Council had achieved, successful funding bids to widen service provision and the delivery of additional affordable housing units through Quercus Housing.

The objectives of the draft Strategy would cover prevention, interventions and sustainable solutions detailed on page 78 and the actions to be taken to deliver these in the Action Plan page 124.

Members were advised of the consultation timetable and the feedback from the consultation would come back to the Committee on 7 February 2023.

In response to questions, Members were advised that the Council's partners were aware of the consultation and had been involved already with conversations as part of the action plan. A survey would form part of the Consultation and this would be available on the Council's website as well as workshops available for Members and key stakeholders. If required the consultation period could always be extended if it was thought necessary to gain additional data.

Public Sector Equality Duty

Members noted that consideration had been given to impacts under the Public Sector Equality Duty.

Resolved: That it be recommended to Cabinet that

- a) The outcome of the Homelessness Review, the draft Homelessness and Rough Sleeper Strategy and the proposed timetable for consultation and implementation, be considered; and
- b) the first draft of the emerging Homelessness and Rough Sleeper Strategy for public consultation, subject to any required amendment, be approved.

75. Making Best Use Of The Social Housing Stock - Under Occupation Initiative

The Housing Strategy Manager presented the report which advised members that the Housing Strategy 2022-2027 highlighted the importance of making the best use of existing social housing. Approval was being sought to introduce an under occupation initiative which was open to all Registered Provider partners with family sized housing stock located in the District. The proposed initiative could be funded from available S106 affordable housing monies for an initial 2 year period, from April 2023 to March 2025, subject to Portfolio Holder approval for the use of these funds.

Members considered the report.

Public Sector Equality Duty

Members noted that consideration had been given to impacts under the Public Sector Equality Duty.

Resolved: that it be recommended to Cabinet that

- a) the introduction of a new under occupation initiative, be agreed; and
- b) following consultation with the Portfolio Holder of Housing & Health, the Housing Strategy Manager, be delegated authority to finalise details of the initiative in collaboration with Registered Provider partners to make any minor amendments.

76. Private Sector Housing Assistance Policy

The Housing Strategy Manager presented the report which set out how the Council's Private Sector Housing Assistance Policy 2017 would provide assistance to homeowners and private tenants to enable them to keep their homes in good repair and free of hazards and enable them to live as independently as possible. The Policy set out the assistance available to disabled people to help them adapt, improve or repair their homes. The levels of discretionary grant assistance contained within the Policy were regularly reviewed to ensure they remained fit for purpose. The last review was undertaken, in consultation with the Portfolio Holder, in June 2022. The next full review was to take place in 2025, unless there were legislative changes then a review would take place sooner.

Members discussed the report noting the importance of the policy. In response to questions the Housing Strategy Manager advised she would look into whether assistive technology grants were available.

Action: For Housing Strategy Manager to look into whether assistive technology grants to support independent living were available.

Public Sector Equality Duty

Members noted that consideration had been given to impacts under the Public Sector Equality Duty.

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Resolved: That it be recommended to Cabinet that the updated levels of discretionary grant assistance available under the Private Sector Housing Assistance Policy.

77. Empty Homes Strategy and Action Plan

The Housing Strategy Manager presented the report which set out that the Housing Strategy 2022 - 2027 included the theme of promoting quality and optimising range and suitability of new and existing homes, which included an objective of fewer empty homes.

Members discussed the report asking questions of clarification and noted the importance of bringing empty homes back into use and the proposed collaboration between internal departments including Council Tax and Housing Public Sector Equality Duty.

Members gave consideration to impacts under the Public Sector Equality Duty.

Resolved: That it be recommended to Cabinet that the Empty Homes Strategy and Action Plan 2022- 2028 be adopted.

78. Work Plan

The work plan was noted with the following additions to the meeting on 7 February 2023:

Private Sector Housing Assistance Policy
Scope for Council's Energy Efficient advice

THE MEETING WAS CONCLUDED AT 9.20 PM

CHAIRMAN

**SEVENOAKS DISTRICT HOMELESSNESS AND ROUGH SLEEPERS STRATEGY
2023-2028**

Housing and Health Advisory Committee – 7 February 2023

Report of: Deputy Chief Executive and Chief Officer People and Places

Status: For Comment

Also considered by:

- Cabinet - 9 February 202
- Council - 21 February 2023

Key Decision: No

Executive Summary: Local housing authorities have a statutory duty to publish a Homelessness and Rough Sleepers Strategy every 5 years. This report presents the outcome of a public consultation and the resultant draft Homelessness and Rough Sleepers Strategy 2023-2028, for consideration. The final Strategy document will require approval by Full Council so that it may be adopted and published.

This report supports the Key Aim of: The Housing Strategy 2022-2027

Portfolio Holder: Councillor Kevin Maskell

Contact Officer: Alison Simmons, Head of Housing, Extension 7272

Recommendation to Housing and Health Advisory Committee:

- (a) To note the feedback received from the public consultation;
- (b) To consider and recommend to Cabinet the draft Homelessness and Rough Sleepers Strategy.

Recommendation to Cabinet:

- (a) To note the feedback received from the public consultation;
- (b) To consider the draft Homelessness and Rough Sleepers Strategy;
- (c) To recommend to Council that the Homelessness and Rough Sleepers Strategy 2023-2028 be adopted.

Recommendation to Council:

- (a) To note the feedback received from the public consultation;
- (b) That, subject to any amendments by Cabinet, the Homelessness and Rough Sleepers Strategy 2023-2028, be adopted.

Reason for recommendation: The District Council has a statutory duty to publish a Homelessness and Rough Sleepers Strategy every 5 years. Adoption of the Homelessness and Rough Sleepers Strategy 2023-2028 will satisfy the requirements of this duty, as well as providing a framework to the Housing Service in the prevention of homelessness and the provision of sustainable solutions to help those faced with homelessness.

Introduction and Background

- 1 The Housing Strategy 2022-2027 recognises that housing, health, wellbeing and life chances are inextricably linked. The impact of homelessness has a devastating impact on those directly affected, a social cost that extends into the wider community and a financial cost that draws resources away from other key services.
- 2 A local housing authority is required to have a strategy in place which sets out how it will prevent homelessness and ameliorate its devastating impacts. The Council is developing a new, 5 year Strategy. The draft Homelessness and Rough Sleepers Strategy 2023-2028 is centred around 3 themes: prevention – we want to help residents before they go into crisis and focus on preventing homelessness from happening in the first place; intervention - the way we support and help people who have become homeless; and sustainable solutions - taking a long term approach to establishing a range of sustainable housing and housing options for vulnerable and homeless households and rough sleepers.
- 3 In the development of the draft Homelessness and Rough Sleeper Strategy and the Housing Strategy in 2022 both have identified the need to increase the number of affordable homes to meet the needs of the residents in the District.
- 4 The announced consultation through the Levelling Up and Regeneration Bill for a new NPPF weakens the policy requirements for Councils to plan for the delivery of more homes, however for the delivery of the Strategies and the Council's social responsibility the Housing Needs Assessment and Housing Register reflect the need for homes for local residents in the District.

- 5 Following completion and approval of the Homelessness Review (attached Appendix A) a first draft of the Strategy has been subject to public consultation (attached Appendix B). The recommendations within this report have all been subject to a comprehensive 2 stage public consultation exercise which included bite size briefings, forums, an online survey, small meetings and one to one conversation.
- 6 The Council is legally required to consult with partners, stakeholders and residents. The feedback received has enabled amendments to be considered for inclusion within the Strategy ahead of a final version being presented for adoption. The consultation feedback has enabled the completion of a thorough Equalities Impact Assessment.
- 7 The draft Sevenoaks District Homelessness and Rough Sleepers Strategy 2023-2028 was subject to public consultation between 9 December 2022 and 5 January 2023. Over 100 responses were received to the online survey and the results are summarised, by question, below.

Please note "In agreement" refers to those respondents who either strongly agreed or agreed.

Theme 1 – Prevention

Question 1

We should work closely with statutory and voluntary sector partners to ensure residents can access suitable homeless advice and practical support.

In agreement – 98%

Question 2

We should promote an effective, value for money incentive scheme that encourages more private landlords to let homes to people on our waiting lists.

In agreement – 80%

Question 3

We should support education and awareness initiatives with partners to inform young people of the impact of homelessness, sources of advice and possible available housing options.

In agreement – 89%

Question 4

We continue to ensure our housing benefit, private sector housing, community safety and income teams work together to help resolve issues that may lead to homelessness.

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In agreement- 98%

Question 5

Create a one stop shop for residents seeking housing advice through a dedicated hub of local partners.

In agreement - 94%

Question 6

Is there anything else you think we should be doing to prevent homelessness.

A summary of comments received is as follows:

- Deliver more social housing
- Bring empty homes back into use
- Provide and promote information and signpost to sources of help, ensure there are clear points of contact
- Help with debt management
- Provide face to face support

Theme 2 - Intervention

Question 7

Use Government grants to provide dedicated accommodation for homeless households such those from a care leaver background, young people and former rough sleepers.

In agreement - 94%

Question 8

Work with partners to ensure all households retain their tenancies and keep a roof over their heads.

In agreement - 89%

Question 9

Maximise the benefits of partnership working and contribute to Kent-wide initiatives to improve services and options for victims of domestic abuse.

In agreement - 97%

Question 10

Review emergency and temporary accommodation to ensure it provides value for money.

In agreement – 92%

Question 11

Increase the opportunities for residents to downsize and free up family accommodation in social housing (housing association) properties.

In agreement – 87%

Question 12

Is there anything else we should be doing to support people who are homeless.

A summary of comments received is as follows:

- Provide drop-in centres and night shelters
- Provide accommodation where people can keep their pets with them
- Provide a helpline/chat-line
- Give help and advice on retraining
- Provide advice on DHP
- Work with housing associations to make best use of affordable housing eg encouraging older people to downsize from family sized housing.

Theme 3 – Sustainable Solutions

Question 13

Ensure our new Local Plan (Local Plan 2040) delivers more affordable housing.

In agreement – 87%

Question 14

Investigate the options for the Council with its partners to acquire or build new affordable homes and temporary accommodation.

In agreement – 83%

Question 15

Work with housing associations and landlords to provide more temporary accommodation.

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In agreement – 86%

Question 16

Bring more empty homes back into use that could be used as affordable housing.

In agreement – 96%

Question 17

Provide a support package to help homeless applicants live independently and sustain their tenancy.

In agreement – 92%

Question 18

Do you have any other comments or ideas that can be included in the draft Homelessness and Rough Sleepers Strategy.

A summary of comments received is as follows:

- Deliver more social housing that is genuinely affordable
- Consider cross boundary incentives to relocate
- Have a dedicated point of contact to access network of services
- Consider 'pod' type temporary accommodation
- Create employment opportunities for homeless people with Sevenoaks
- Involve people with lived experiences of homelessness within policy making

Question 19

Prevention, intervention and sustainable solutions should they be the key themes of the draft Strategy.

In agreement – 89%

Question 20

Do you feel we should include any other proposals in the draft Homelessness and Rough Sleepers Strategy to support homeless people.

A summary of comments received is as follows:

- Housing First and using our resources as best we can, replicate the conditions that are proven to deliver success in promoting recovery from homelessness and long-term tenancy sustainability
- How can the cycle of homeless becoming homeless again and again be prevented or supported
- Focus on young care leavers

Other general comments that have been submitted are:

- The requirement for some temporary accommodation units to accept pets
- Should we have a target number of temporary accommodation units at our disposal
- There is a need for more supported and move on accommodation

8 It is considered that a broad range of participants responded to the consultation. Attributes to highlight are:

- a wide ranging age profile of respondents, but no responses received from those age 18 – 24 years
- over 70% are female
- 30% have a caring function
- 19% have a long term health condition/disability

9 Overall, the consultation shows there is positive public support for the draft Strategy, which is attached as Appendix B.

10 The draft Strategy was presented to Members at 2 events. Members found the presentation very clear and informative and would assist them in the completion of the survey. The main area of concern was can the Council accommodate applicants with Pets and the suggestion that we investigate what other Councils do and in particular Maidstone.

11 The Homelessness and Rough Sleepers Forum held its inaugural meeting with the presentation of the draft Homelessness and Rough Sleeper Strategy. The attendees were invited to review the Action Plan to see how they can assist the Council in the delivery of the Strategy. The offers of assistance have been included in the Action Plan to the draft Strategy.

12 The Homelessness and Rough Sleepers Forum will meet on a quarterly basis and will be used to share service updates, learn from current best practice,

Agenda Item 7

consider latest developments, arrange Task and Finish groups if funding bids have been invited and to track the progress of the Homelessness and Rough Sleeper Strategy Action Plan.

- 13 Subsequent to the consultation, the draft Homelessness and Rough Sleepers Strategy 2023-2028 will help to address the needs of homeless people or those threatened with homelessness, whatever their background. An Equality Impact Assessment is attached at Appendix C.
- 14 The Action Plan will be monitored on an annual basis to maintain progress against the set objectives. If any minor changes are needed, these will be considered by the Head of Housing to ensure that the Strategy may be future proofed to changing legislation, circumstance and local identified needs. Authority to introduce the minor amendments is delegated to the Chief Officer, People and Places, in consultation with the Portfolio Holder for Housing and Health.

Other options Considered and/or rejected

None.

Key Implications

Financial

None.

Resource (non financial)

The Homelessness and Rough Sleepers Strategy 2023-2028 will assist the Housing Service in delivery of its homelessness function. No additional staff resource is considered necessary in its application.

Legal Implications and Risk Assessment Statement

The Council is required to have a Strategy that complies with the statutory provisions contained in the Homelessness Act 2002. Failure to have an adopted Strategy may lead to legal challenges that the Council would not be in a position to defend.

Equality Assessment

Members are reminded of the requirement, under the Public Sector Equality Duty (Section 149 of the Equality Act 2010) to have due regard to (i) eliminate unlawful discrimination, harassment and victimisation and other conduct prohibited by the Equality Act 2010, (ii) advance equality of opportunity between people from different groups, and (iii) foster good relations between people from different groups. The decisions recommended through this paper directly impact on end users. The impact has been analysed and varies between groups of people. The results of this analysis are set out in Appendix C.

Net Zero Implications

The decisions recommended through this paper have a remote or low relevance to the council's ambition to be Net Zero by 2030. There is no perceived impact regarding either an increase or decrease in carbon emissions in the district or supporting the resilience of the natural environment.

Conclusions

The District Council has a statutory duty to publish a Homelessness and Rough Sleepers Strategy every five years. Adoption and publication of the Homelessness and Rough Sleepers Strategy 2023-2028 will fulfil the requirements of this duty.

Appendices

Appendix A - Homelessness Review

Appendix B - second draft of the Sevenoaks District Homelessness and Rough Sleepers Strategy 2023-2028

Appendix C - Equality Impact Assessment (EIA)

Background Papers

None.

Sarah Robson

Deputy Chief Executive and Chief Officer – People and Places

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Sevenoaks District Council
Homelessness Review
August 2022

Introduction

This Homelessness Service Review provides information on the needs of people who have approached the Council's housing service for help since the last Homelessness Strategy was adopted. It considers what we have achieved, what has changed and how this relates to the changing environment and Government policy. It will inform our Homelessness and Rough Sleeper Strategy from 2023.

Achievements 2016-2022

During the life of the current Strategy the Council have:

- Successfully prevented 1,988 households becoming homeless since the introduction of the Homelessness Reduction Act in 2017.
- Adopted and embedded working practices to comply with the requirements of the Homelessness Reduction Act 2017.
- Embedded dedicated homelessness prevention support through our HERO team.
- 2 additional officers were appointed to the Council's HERO to support at risk tenants to remain in their home.
- Between 2016-2017 and 2021-2022, we awarded a total of £6.53 million (before Kent County Council's top slice) in grants to adapt homes to make them more suitable for people with physical disabilities and enable them to remain at home.
- Updated the Housing Allocation Scheme in 2022 to ensure it best meets the housing needs within the District and complies with the requirements of the Homelessness Reduction Act.
- Since 2018, Quercus Housing has delivered a total of 24 affordable housing units in the District.
- Between 2016-2017 and 2021-2022, a total of 434 affordable housing units have been completed in the District in partnership with Registered Providers, of which 219 were genuinely affordable social housing (affordable and social rented tenures) and 192 shared ownership tenure.
- Relaunched our landlord incentive scheme, appointing Help2Rent to extend our offer to landlords.
- Launched a Financial Hardship Working Group and use this to share information with partners and community groups about the help and support available for residents experiencing financial difficulty.
- Worked with Compaid to commission a digital inclusion and literacy support package, including devices, mobile data and training to support households placed in temporary accommodation access support and information.

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- Provided grant funding to support voluntary sector agencies working within the District to deliver advice and support services for people who are either homeless or at risk of homelessness.
- Officers in the Housing Service developed specialisms in work areas such as domestic abuse, single homelessness, ex-offenders and vulnerable adults to develop and improve links with partners and ensure that key priorities in the Strategy Action Plan were addressed.
- Appointed an Armed Forces office champion as part of our HERO offer.
- Established working relationships with other partners such as the Probation service through the Accommodation for Ex-offenders (AFEO) programme and established best practice in co-working and service referral systems.
- To address the needs of rough sleepers, in 2021-2022 secured almost £300,000 under the Rough Sleeper Initiative 4 (RSI4) and a further £677,230 under RSI5 for 2022-2023. This funding will provide coordination, outreach and complex needs support to rough sleepers and those in risk of rough sleeping.
- Appointed a Housing Pathway Coordinator to deliver the RSI.
- To address the needs of clients experiencing domestic abuse, appointed a dedicated Domestic Abuse Coordinator to support clients and signpost to partner agencies.
- Published and updated the Homeless Guide. This guide includes details of the help available within the District for people who are homeless or rough sleeping, or at risk of becoming homeless.
- Worked in partnership with West Kent Housing Association to enable a total of 4 Housing First units of accommodation at Orchards Close.
- Worked in partnership with West Kent Housing Association and Kent County Council to submit a successful Rough Sleeping Accommodation Programme funding bid to deliver 7 units of supported accommodation for rough sleepers, with Kent County Council providing support through their Kent Homeless Connect Service. The Council contributed £269,000 Section 106 monies to help bring forward the redevelopment of the scheme.
- Vine Court Road, supported accommodation completed in September 2022 and 2 residents have moved in. Support for residents is being provided by Look Ahead.
- The increase in our Accommodation Officer capacity has enabled the provision of additional support to households placed in temporary accommodation, assisting them to identify items needed to set up home in their temporary or move on accommodation, and resolving issues whilst living in temporary accommodation.
- Provided in collaboration with West Kent Housing Association and Moat Housing 46 self-contained temporary accommodation housing units, which are cost neutral to the Council and enables households to stay within the District rather than be housed out of area.
- The Council worked with HFT (a charity providing housing and support for adults with learning difficulties) to change the use of an empty property in Edenbridge and provided funding from the Homelessness Prevention Grant to develop safe and secure move on accommodation for up to 6 mothers and

babies. The scheme completed in September 2002 and will welcome the first residents late October 2022.

- The Housing Service structure was revised in 2020-2021 and a new manager post was created to oversee both the Homelessness Prevention, Advice and Register/Allocations teams.

Homelessness

National Context

Homelessness Legislation and Policy

The homelessness legislation is set out in Part 7 of the Housing Act 1996 and provides the statutory framework and duties for local housing authorities to provide assistance to people who are homeless or threatened with homelessness.

The legislation was amended via the Homelessness Act 2002 and the Homelessness (Priority Need for Accommodation) (England) Order 2002. These amendments required housing authorities in England to formulate and publish a Homelessness Strategy based on the results of a review of homelessness in their District.

The legislation extended the groups of people who housing authorities had a homeless duty towards, now including homeless 16 and 17 year olds, care leavers aged 18 to 20, people who were vulnerable as a result of being in care, the armed forces, prison or custody and people who were vulnerable because they had fled their home due to violence.

The Homelessness Reduction Act 2017 came into effect on 3 April 2018 and significantly reformed England's homelessness legislation by placing duties on housing authorities to intervene at earlier stages to prevent homelessness in their areas. Housing authorities are required to provide homelessness services to every household who is homeless or threatened with homelessness, and not just those who are considered to be in priority need. These duties include:

- An extension to the period that a household is considered to be threatened with homelessness, from 28 days to 56 days, meaning that housing authorities are required to work with people to prevent homelessness at an earlier stage.
- A new duty to take reasonable steps to prevent homelessness for every household that is threatened with homelessness. This duty can generally take effect for a period of up to 56 days.
- A new duty for those who are already homeless so that housing authorities will take steps to support households to relieve their homelessness by helping them to secure accommodation. This duty can generally take effect for a period of up to 56 days.
- A new duty to refer, where public bodies in England will have a duty to refer an individual's case (with consent) to an identified housing authority.

The Homelessness Reduction Act has reformed homelessness prevention services.

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The Government formed a Rough Sleeping Strategy 2018 and an Advisory Panel to support delivery of the strategy which aims to halve rough sleeping by 2022 and end it by 2027.

There are a number of activities that the Council must undertake in order to meet the requirements of the Act. To provide some context, the following is intended as a brief summary of the customer journey through our services since the Act was introduced and sets out the key activities and duties imposed on local authorities to prevent or relieve homelessness.

A customer approaches the Council directly or is referred by another statutory body under the Duty to Refer, then:

- The Council investigates the housing application to see if the customer is already homeless or may be homeless within 56 days.

If the customer is already homeless then under the Relief Duty the following actions are taken by the Council:

- Reasonable steps to help the customer find accommodation.
- If the customer has no local connection to Sevenoaks District, the Council can refer the customer to another authority under the Power to Refer.
- Works with the customer to form a Personal Housing Plan.
- If homelessness is not relieved, continues to assess the customer's circumstances and apply the remaining tests of homelessness.
- Make a main housing duty decision.

If the customer could become homeless within 56 days, then under the Prevention Duty the following actions are taken by the Council:

- Takes reasonable steps to prevent homelessness.
- Works with the customer to form a Personal Housing Plan.
- If homelessness is not prevented, then a Relief Duty is owed.

If the customer is not homeless now or threatened with homelessness within 56 days:

- Has a duty to provide advice and information.

Changes in Legislation

Since the adoption of the Council's Homelessness Strategy 2016-2021, there have been other substantial, ongoing legislative changes impacting accommodation and provision of services to people in housing need. These are discussed below:

The Tenant Fees Act 2019

This Act prohibits landlords and letting agents from requiring a tenant, licensee, or other relevant person to pay fees, other than permitted payments, in connection with

specified private rented sector tenancies/licences. This would normally come in the guise of renewal fees or credit check fees. It caps all deposits to 6 weeks' equivalent rent. This is a positive change as it makes access into the private rented sector more affordable as upfront fees and rent deposits are minimised.

The Homes (Fitness for Human Habitation) Act 2018

This requires a landlord to ensure his property meets minimum safety standards. Violations can range from mould, small, cramped living spaces, lack of adequate sanitation facilities, insecure doors, and windows, excess cold and potential for trips and falls. This Act empowers tenants to obtain redress in the courts for sub-standard accommodation. Poor standard accommodation in the private sector can increase the need for tenants to move to more suitable and affordable social housing.

Renters Reform Bill 2022

This proposed to amend the Housing Act 1988 to abolish Assured Shorthold Tenancies. Thereby disabling a landlord's ability to commit to a fast track eviction under Section 21 of the Housing Act, as this section will be repealed. Although more grounds for eviction will be introduced in the Bill, it will oblige landlords to prove the grounds of the eviction to a Court. Removing the fast track to evictions approach, substantially increases the security of tenure for private renters. The Bill is currently going through the legislative process.

Planning for the Future – Planning White Paper, 2020

The White Paper was launched on 6 August 2020, alongside a Government consultation on changes to the planning system. The proposed changes covered a number of key areas including delivering First Homes.

First Homes are homes for sale to first time buyers, at a discount on market value, with such discount held in perpetuity. The District Council does not have an up to date Local Plan, therefore First Homes are required to be included as an affordable tenure. In December 2021, the District Council introduced a local First Homes policy to ensure new homes are available and affordable to as many local people as possible. The local policy gives priority to those with a local connection to the District, it stipulates a 50% discount compared with the national cap of 30%, and it sets a reduced income cap compared with the national cap. The concern remains that the inclusion of First Homes in the calculation of a developer's contribution to affordable housing under a Section 106 agreement may reduce the number of social rent, affordable rent and shared ownership (part rent/part buy) homes being provided. The local First Homes policy and wider affordable housing policy are being viability tested as part of the emerging Local Plan process.

The consultation considered the threshold for developer contributions. Planning Practice Guidance Planning states that contributions (including affordable housing) should be sought only for major developments, which for residential development means 10 or more homes or a site with an area of 0.5 hectares or more. The consultation document proposed to extend the support given to economic recovery by raising the threshold to developments comprising 40 or 50 homes. In Sevenoaks District, any increase to the threshold would have a significant detrimental effect on

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our ability to provide new affordable housing. Following sustained public concern, the proposal was dropped.

On 2 February 2022, a Levelling Up White Paper was launched. Many of the white paper's provisions – such as those for encouraging the use of brownfield land and promoting beauty and good design – were foreshadowed in the white paper Planning for the Future. The potential impact, should the government's proposals be implemented, would be an acceleration of the delivery of infrastructure and housing development but not necessarily affordable housing.

Homelessness in a County wide context

Kent Homeless Connect

Kent County Council is the lead partner for Kent Homeless Connect, where support is delivered by Porchlight, Look Ahead and a network of specialist providers on behalf of Kent County Council, helps vulnerable people who are homeless or at risk of becoming homeless.

The service is available to vulnerable adults living in Kent, aged 18 and over, with complex support needs (such as mental health, substance misuse problems, or learning difficulties) who are:

- Rough sleeping
- Homeless
- At risk of becoming homeless
- Impacted by homelessness

In addition Kent County Council help those move away from homelessness for good, by bringing together elements of outreach, supported accommodation and floating support to offer tailored support to:

- Vulnerable people
- Enable them to be healthy
- Find a stable home
- Manage their tenancy or their finances

Kent Housing Options Subgroup

The Council are members of the Kent Housing Options Subgroup. All the Kent Local Authorities and Medway Council are represented on this group, which works together to improve on excellent Housing Option services provided across the County, to monitor performance, share best practice and liaise with partner organisations and agencies.

The aim of this subgroup is to continue to share best practice in terms of homelessness, housing options, allocations, lettings and service delivery. To respond and ensure that services are monitored and developed to meet changes in legislation,

to explore solutions and working practice to assist in the delivery of new affordable urban and rural housing.

Homelessness in a Local context

Tackling homelessness and rough sleeping is a priority for Sevenoaks District Council and there is a corporate commitment to make real improvements to the lives of local people who are homeless or threatened with homelessness, this is reflected in the Council's strategies and plans.

COVID has had a significant impact on the UK as a whole. In Sevenoaks District, there were 16 known rough sleepers at the start of lockdown, however 29 individuals were helped into accommodation in response to the Everyone In initiative, of which 24 individuals were helped to move on once the lockdown ceased. This is a significant success in a period of unprecedented circumstances. However, it highlights the hidden homelessness in the District.

It remains important for the Council's Housing and Health service areas to work collaboratively to find suitable local solutions for providing access and referrals to health and social care services, as well as access to education, employment, training and advice that will help to build housing and health resilience across the District.

There has been a rise in the percentage of pensionable age and elderly people living within the District. This is the fastest rising population demographic in the country and is reflected locally, which will require careful thought about longer term housing and wellbeing solutions that are suitable for an ageing population.

Rough Sleeping

Rough sleeping in the District is traditionally low in comparison to national statistics. All English Local Authorities are required to carry out either an annual estimate or count and report the figures back to central Government about the number of people known to be rough sleeping on a given night. We have seen the numbers of people reported as sleeping rough gradually reduce since 2017 and in November 2021, we counted only 1 rough sleeper in the District during the official count with DLUHC.

We know that many people sleeping rough require more support than just somewhere to live and need help from other services to help manage issues such as mental health and substance abuse. It is therefore critical that we ensure vulnerable people who are homeless or at risk of homelessness can access the appropriate help and support.

The COVID Everyone In initiative whereby all Councils were required to accommodate all rough sleepers regardless of duties owed to them, demonstrated in many cases that rough sleepers would take up offers of accommodation if it meant the risk to them was reduced and the offer was more desirable to their aspirations. Therefore, providing a range of accommodation in the District that will improve the housing offer and meet a wider range of needs, will continue to be our priority and

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longer term solution for customers in housing crisis.

The Council have commissioned Porchlight to deliver an outreach and complex needs service to identify and support people who are found to be rough sleeping or identified as single homeless in the District. This is funded through Rough Sleeper Initiative funding.

Since 2017 we have focussed on increasing the options available to rough sleepers and ensuring accurate verification of rough sleepers based on the agreed definition.

From our data we can confirm that over the course of the year 2021-2022 a total of 40 individuals were reported as rough sleeping. Of the 40:

- 16 were verified as sleeping rough
- 24 reports gave insufficient information to attempt or rough sleepers were not found for verification

Of those 16 who were verified rough sleepers:

- 13 were assisted to secure other accommodation or refused/did not engage with the Council

Verification of any reports received about people sleeping rough requires additional staff time but is vital to ensure that those sleeping rough are engaged with at the earliest opportunity.

Severe Weather Emergency Protocol (SWEP)

The Council operate SWEP during periods where the weather is forecast to be 0 degrees or lower for 3 consecutive days. This protocol is very similar to the Everyone In initiative but has traditionally only been activated at the coldest times of year.

We provide financial support to anyone wishing to access SWEP beds and provide an opportunity for rough sleepers to engage with other local health and support services, with the aim to reduce the risk of them returning to the streets when the weather improved.

Our data so far indicates that to fully meet the needs of rough sleepers and achieve the Government's goal to end rough sleeping by 2027, we need to:

- Monitor the current levels of rough sleeping, and resource services to tackle this.
- Monitor future likely levels of rough sleeping and put support in place to mitigate this.
- Work with partners to secure appropriate accommodation for those who are rough sleeping or are threatened with homelessness and to help them build housing resilience.
- Review effectiveness and quality of accommodation offers to rough sleepers and develop an improved housing offer.

The Overall picture

Who seeks help with housing?

Whilst the small number of households who are rough sleeping place an urgent demand for housing services, there are a greater number of people who are assessed by the Council as being threatened with homelessness within 56 days or at immediate risk of homelessness. Of the 377 households in 2021-2022 who were owed a statutory homeless duty, 205 were owed a prevention duty compared to 145 the previous year, and 6 were homeless and owed a relief duty compared to 128 the previous year. In 2021-2022 a further 622 were not threatened with homelessness within 56 days and therefore no duty owed however these households would have received advice and information to assist them in finding a housing solution. This demonstrates that most work undertaken by the Housing Service relates to homelessness prevention. Housing and homelessness enquiries are predominately received through applications made online to join the Housing Register, contact by telephone and email and some direct face to face contact with the duty housing officer. The team provide a triage role for initial face to face and telephone enquiries and assist residents with form filling when necessary. All calls received by the Council for housing related enquiries go through the Customer Solutions Team initially and are passed to the Housing Service when more complex advice is required, or the customer advises that they are at risk of homelessness.

There is a dedicated email address to receive referrals under the Homelessness Reduction Act Duty to Refer, and specified officer in the Housing Service is the single point of contact for such referrals. Households with an open Housing Register application can use their individual registration log in details to email updates on their circumstances direct to the Council's housing case management system. The number of general housing advice enquiries taken is not recorded by the service, but data is available on the number of advice and prevention cases opened (prior to 2018) or registered as a working case through the HCLIC system, post 2018 when Act was implemented. It will be important to improve the monitoring of general housing advice enquiries, to better understand the demand for services and the quality of advice offered at each point of contact.

In the last 3 years, it is estimated that 2,526 people each year approach the Council to request advice and assistance about their housing circumstances. Some of those approaching only require general one off advice and are then able to independently resolve their housing issue. Other households require intervention and additional support, and prior to the introduction of the Act this was dealt with through advice and prevention work, to help the customer resolve their housing difficulties.

Since the introduction of the Act in April 2018, we have had to change the way cases are processed or recorded and actions closed. Due to this, it is difficult to compare data and trends from previous years. This review has highlighted the potential for variations in how housing data is recorded and the opportunity to record the number of contacts with the service to demonstrate the true demand. The people needing to access our service come from all demographics in Sevenoaks District.

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Household composition

The table below shows the household makeup of housing applicants to whom the Council owed a prevention duty as the household circumstances demonstrated that they were at risk of homelessness within 56 days.

Year	Total owed prevention duty	Family with Dependent Children	Single Male Adult	Single Female Adult
2018-2019	342	180	80	82
2019-2020	203	114	46	43
2020-2021	145	72	34	39
2021-2022	205	105	54	46

The highest demand for homelessness prevention services comes from single female parents with children, followed by single male adults, and couples with dependent children.

The table below shows the household makeup of housing applicants to whom the Council owed a relief duty as their circumstances demonstrated that they were homeless or at risk of immediate homelessness.

Year	Total owed relief duty	Family with Dependent Children	Single Male Adult	Single Female Adult
2018-2019	81	40	32	9
2019-2020	76	21	37	18
2020-2021	128	43	58	27
2021-2022	6	21	29	16

The highest need and demand for housing and homelessness services is from single male adult and single female parent households, both of which require very different accommodation and support solutions. It will be important to ensure the housing offer in the District can accommodate both and that proactive communications are targeted to provide advice and support at the earliest opportunity before crisis happens in order to raise awareness and prevent homelessness.

Support needs

It is recognised that the many customers needing assistance to prevent homelessness or to relieve their homelessness have other support needs. Government data shows that households did not disclose a support need. The highest support need is that of mental health support. This is explored further below.

Mental Health issues

A household's support needs are considered as part of the assessment of their overall housing need and the duties owed by the Council to relieve or prevent homelessness. Mental health can impact on a household's ability to sustain their accommodation and therefore we work in partnership with mental health services to ensure that customers are informed about the help and support available to them. As a general provider of service in mental health, Kent NHS Foundation Trust delivers NHS mental health services outside of hospital, at home and within the community. The Trust helps those living with mental health needs to manage their current health and live independently.

Physical or Health disabilities

In assessing whether the duty is to prevent homelessness or relieve it, we will consider the individual circumstances and establish if the household's existing home is suitable to meet their needs. Where the property cannot be modified and is unsuitable, there may be a duty to accommodate them (relief duty). If the household's circumstances warrant a prevention duty, this will be established following completion of inquiries and the housing need assessment. Modifications to accommodation to make it suitable to meet the longer term needs of households with disabilities, can be achieved by a disabled facilities grant, small works grant or an adaptation. It may be the case that a referral to Adult Social Services under a Safeguarding Protocol is necessary. To assess the needs of those stating they have physical needs, our assessments are guided by an inhouse Occupational Therapist that works jointly across the Council and Kent County Council.

Drug or Alcohol dependency

If, at the time of approach for housing assistance, an individual is misusing substances and not engaging in specialist support, they are encouraged to engage through a Personal Housing Plan to access and engage with relevant support services (Homelessness Reduction Act duty). This is because stability needs to be established in order to maintain a long term tenancy. A tenant will need to control, manage, or resolve their substance misuse habits in order sustain their tenancy and money management.

As part of Personal Housing Plans, individual households can be referred to support services or can access support themselves via the Council grant funded or commissioned services such as debt and money advice and drop in services provided by Citizens Advice.

Age of applicant

Of those who we owed a homelessness duty to 387 in 2021-2022 approximately 200 were aged between 18 and 34 years; 157 were aged between 35 and 64 years and the remainder aged 65 or higher. A snapshot of our Housing Register in October 2021 indicates that the majority of housing applicants across the whole register in the

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Sevenoaks District are aged between 18 and 64 years with an increasing number of households in the 80 plus age group. The homelessness duty and Housing Register data largely reflect each other and the local population statistics. It will be important to ensure a continued supply of affordable accommodation to meet all age ranges and needs but due to the impact that Welfare Reform changes have on affordability of accommodation, this will increase demand, particularly for those affected by benefit caps and inability to claim benefit for accommodation that has bedrooms surplus to requirements.

Young people face significant difficulty in accessing accommodation. This is due to life inexperience, parental or home exclusion and poor financial power. Therefore, special attention needs to be given to this age group.

16 and 17 year olds

If a young person aged 16 or 17 presents as homeless, every attempt is made to assist them to return home, where it is considered safe to do so. We consider the home, if safe, to be the most appropriate and effective place for them to be for financial security and support.

All young people in this age category are initially referred to Kent County Council's Social Services who have a Resettlement Team, to try and facilitate a move home wherever possible. If this cannot be achieved, a joint assessment will be carried out to establish whether the young person is to be supported under Section 17 or Section 20 of the Children's Act 1989. Kent County Council identifies that all 16 and 17 year olds at risk of homelessness within the County are assessed under the Children's Act 1989 and ensures there is a pathway for care leavers, with housing options available to them. This arrangement has been positive in ensuring that only 1 out of 13, 16 or 17 year olds have needed to be placed into temporary accommodation over the period of the review.

18 to 34 years old Single Person Households

Sevenoaks District is covered by two Broad Rental Market Areas (these are areas in which Local Housing Allowance rates are set). These rates have been frozen for all property types since 2012, whilst rental prices have continued to increase annually.

As Welfare Reform changes have meant that single young people under the age of 35 are not eligible to claim the full amount of benefit to cover the cost of rent on a 1 bedroom flat, there is a significant shortfall between the contractual rent and the single room allowance. This has an impact on affordability and increasing demand for more affordable social housing.

Family Households

Whilst families are not impacted by the same benefit restrictions as single person households, they still face significant issues when it comes to being able to secure accommodation where they are in receipt of low income or are impacted by the benefit cap introduced by Welfare Reform changes. This can make the private rented

sector unaffordable for some families and increases the demand on social housing. The number of households applying as homeless as a result of parental eviction or unable to stay with family/friends has consistently been the most common reason for homelessness, falling in front of domestic abuse and loss of an assured shorthold tenancy.

Ethnicity of lead applicant

A snapshot of the Council's Housing Register in October 2022 shows the ethnicity of the lead housing applicant. The majority fall within the White Welsh/English/Scottish/Northern Irish/British ethnicity group or White any other background group. The second largest group includes White Other origin.

Ethnicity of lead applicant	2021-2022
Asian or Asian British - any other	6
Asian or Asian British - Bangladeshi	8
Asian or Asian British - Indian	5
Asian or Asian British - Pakistani	5
Black or Black British - African	13
Black or Black British - any other	0
Black or Black British - Caribbean	9
Chinese	0
Irish	4
Mixed - any other background	2
Mixed - White and Asian	1
Mixed - White and Black African	3
Mixed - White and Black Caribbean	13
Arabic	3
Not stated	205
Other	0
Other ethnic origin	4
White Welsh/English/Scottish/Northern Irish/British	680
White - Any other background	38
Total	999

It will be important to ensure our data collection and analysis identifies any gaps in provision of housing services and how we can better target the information and advice to support improved access and understanding. The learning from responses to COVID and input from people with lived experience of homelessness and rough sleeping will help us to better understand how we can reduce any barriers to housing across different ethnicities and cultures.

Prevention and Relief work at Sevenoaks District Council

Enquires, Advice and Closure

The table below shows how data is recorded since the introduction of the Act and the information submitted to DLUHC. This does not record the total number of

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households who contacted the service and who were assisted with advice and information, therefore it is not the full picture of service demand. However, the data recorded does show that since 2017 there has been an increase in the number of people who were assisted by the Council to prevent their homelessness (under Prevention Duty) without the need for them to be placed into emergency, temporary or other accommodation by the Council (Relief Duty). This suggests that the Council's Housing Options service continues to be effective in implementing the requirements of the Act. a focus on homelessness prevention and early intervention.

Duty Acceptances

As explained earlier the Homelessness Reduction Act places extra duties on Councils towards the public by extending definitions of *threatened with homelessness* and introducing a *Relief duty*, therefore it is important to separate the assistance given under each of the duties and the other cases where advice may have been given and the case closed. Cases where duties are accepted take up the majority of officer time and therefore are an indicator of substantial housing need and homelessness in general.

Number and reason for homelessness approaches 2019-2022

Reason for Homelessness	July 2019	July 2020	July 2021	July 2022	Total
Domestic Abuse	5	3	8	13	29
End of Private Tenancy	5	9	13	14	41
End of Social Housing Tenancy	3	2	5	4	14
Family/friends no longer will to accommodate	7	39	28	18	92
Left Prison	0	5	3	2	10
Left Hospital	0	0	0	2	2
Disrepair	1	0	2	3	6
Relationship Breakdown	0	2	6	1	9
Other	6	15	9	2	32
Total	27	75	74	59	235

The chart clearly demonstrates an increase in 'family and friends no longer willing to accommodate' in July 2020 (39) at the start of COVID.

A further spike in approaches due to applicants fleeing domestic abuse is shown in July 2022 (13). This increase follows the Domestic Abuse Bill being signed into law on 29 April 2021 which placed the following duties on local authorities:

- A duty on local authorities in England to provide support to victims of domestic abuse and their children in refuges and other safe accommodation.

- Provide that all eligible homeless victims of domestic abuse automatically have priority need for homelessness assistance.
- Ensure that when local authorities rehouse victims of domestic abuse, they do not lose a secure lifetime or assured tenancy.
- Provide that all eligible homeless victims of domestic abuse automatically have priority need for homelessness assistance.

There is evidence of an increase in private tenancies coming to an end in the July 2022 (14) snapshot. This may in part be due to a number of reforms put forward in a new White Paper, including the abolition of Section 21 (non-fault evictions).

Prevention outcomes

The main difference in the actions taken to prevent and resolve homelessness before the introduction of the Act and after, is that the need to assess *priority* and vulnerability at prevention stage has been removed and the level of all service is universal.

Most advice and prevention work is demonstrated in the arena of closed advice given, and interventions followed by case closure. It demonstrates well, the escalation of prevention work and it highlights the need to continue our commitment to provide outreach support and upstream prevention work. For many households, this will reduce the need for them to approach the Council at crisis point.

Methods of prevention

Using internally recorded data, the table below shows the method in which Homelessness Preventions were attained:

Prevention Measure	2020-2021	2021-2022
Mediation and/or counselling	86	24
Other assistance to remain in Social or Private (buying customers food)	1,097	2,037
Conciliation with friends/relatives	29	48
Resolving rent issues in Social or Private (clearing rent arrears)	78	23
Crisis intervention by Mental Health teams	123	234
Secured debt advice (IVA, DRO Bankruptcy)	63	73
Mortgage Holidays	17	1
Information and advice only	1,236	1,464
Total	2,643	3,904

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Secured Social Housing

The most effective tool to assist households to move to alternative accommodation is through an offer of accommodation via the Housing Register. As we are working within the Act duties, a formal Part 6 offer to discharge a full homeless duty is now rare. This rise shows that there is a dependence on affordable accommodation being available to help prevent homelessness within the District.

The Housing Register is for people in housing need and who have a connection to the District. People are assessed against an approved allocation scheme which provides criteria to assess a household's housing need and their eligibility for social housing in the District based upon their current circumstances. Households are nominated to properties owned by Registered Providers and allocated through the HomeChoice scheme. HomeChoice allows eligible applicants to apply for up to 3 suitable properties each week that meet a household's housing need, anywhere within the Sevenoaks District. We currently allocate certain properties under specific circumstances to households in reasonable preference groups such as vulnerable homeless households and those fleeing domestic abuse. These households, when owed a homeless duty, are made 1 offer of accommodation. The new Housing Allocations Scheme extends the 1 offer only policy to all applicants, except those seeking 55+ housing or those downsizing. Our recent experiences with Everyone Into deal with the COVID crisis demonstrates we should consider households who are rough sleepers as a reasonable preference group.

Assisted to Private Rented Sector accommodation

Our second highest prevention tool to assist households to move to alternative accommodation is a move to the private rented sector, including support with rent deposit and rent in advance, subject to eligibility. Since adoption of the Core Strategy and the accompanying Affordable Housing Supplementary Planning Document 2011, over £275,000 Section 106 affordable housing commuted sum monies have been allocated to this area.

Information and Advice only

It is positive that many cases were resolved by issuing advice. Reconciliation with friends/relatives and advocacy were strong avenues of resolution and going forward all Housing Advice Team members will be trained further in such techniques. When mediating between disputing families and giving advice, the team aims to set out realistic expectations of what the Council can offer via a homeless application or the Housing Register.

Homeless Decisions and Acceptances

With the introduction of the Homelessness Reduction Act, the need to make *main homeless duty* decisions have dramatically reduced as this action is now regarded as a last resort should other duties not be successful. The upstream prevention model traditionally adopted by the Housing Options Team is now legislated and this has

resulted in most cases ending with a prevention action.

Accommodation outcome following acceptance of Relief and main homeless duty

The only Homelessness Reduction Act duties that require an accommodation solution are relief duties and main duties. If a household has not obtained long term secure accommodation within 56 days, the authority is then obliged to make a full homeless decision where a full assessment of events leading to homelessness are considered. In these cases, on some occasions it can be assessed that the household does not qualify for further assistance.

We discharged our duty to most of the households we accepted as homeless, following an accepted nomination into social housing provided by Registered Providers. Homeless households, to whom we accept a homelessness duty, are placed on auto-bidding on the HomeChoice scheme and will receive 1 suitable offer of accommodation as per our revised Allocations Policy.

Prevention versus Homeless Relief Duties

Threatened with Homelessness (Prevention Duty owed) Homeless (Relief Duty owed) Under the Allocation Policy we can add a preference for homeless or transfer applicants, to manage temporary accommodation and meet the specific needs of certain households. However, this is used very sparingly to ensure that other groups are not disadvantaged.

The Council can discharge our duties by way of a Private Rented Sector Offer, where suitable private rented sector property is available.

Use of a Part 6 offer to end homelessness (Reliance on Social Housing)

When a household is housed by being offered accommodation through the Housing Register, it is known as a Part 6 offer of accommodation (under the Housing Act 1996). This is applied where prevention actions have been exhausted.

This table shows out of all Sevenoaks District housing allocations 21% in 2020-2021 and 27% in 2021-2022 were provided to homeless applicants.

	2020-2021	2021-2022
General	115	95
Homeless	49	58
Key worker	Unknown	Unknown
Transfer	73	62
Total	237	215

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The percentage of lets to homeless households has risen by 6% in the last financial year.

Availability of new Affordable Housing Delivery

During the period of the review we have seen the number of allocations to Registered Providers accommodation fall slightly. This is partly due to a reduction in delivery of proposed new builds and a reduction of allocations to homelessness cases demonstrated later.

Year	Number of allocations to SDC nominees
2018-2019	357
2019-2020	355
2020-2021	317
2021-2022	209
Total	1,238

Sevenoaks District is bound by strict planning constraints. It is 93% Green Belt and over 60% Areas of Outstanding Natural Beauty. These constraints mean the delivery of new homes has never been easy. However, delivery was further severely impacted by COVID, as was the case across the nation. The rising cost of raw materials and labour/materials shortages are continuing to have an impact. If the Government takes forward proposals to raise the site threshold triggering affordable housing contributions, this will further inhibit our ability to secure new homes.

The table below shows that the number of affordable properties delivered over the period of the review:

Type of property	2017-2018	2018-2019	2019-2020	2020-2021
All dwellings (net)	378	254	426	213
Affordable Housing (gross)	49	71	206	22
% of affordable to market	13%	28%	48%	10%

The provision of new, onsite affordable housing is only triggered on development sites comprising of 10 or more homes. Provision is subject to viability testing. Owing to the nature of Sevenoaks District, a sizeable proportion of development sites comprise less than 10 homes (small sites). Where small sites are located in Designated Rural Areas (S157 of the Housing Act 1985) and comprise 6–9 homes, National Planning Policy Framework gives scope for local policy to be adopted. The District Council has adopted local policy, meaning commuted sum payments are triggered in lieu of onsite provision.

There continues to be a gap in the provision of genuinely affordable housing (Social Rented and Affordable Rented housing) in the District and there are actions set out in the Housing Strategy 2022-2027 to address this.

The table below shows affordable housing completions broken down by tenure

Year	Social Rented	Affordable Rented	Shared Ownership	Other tenures	Total
2017-2018	0	23	26	0	49
2018-2019	0	53	18	0	71
2019-2020	0	95	107	4	206
2020-2021	2	0	20	0	22

Other Accommodation Options

With the data showing a drop in allocations to Registered Providers and a fall in new affordable housing completions in future, other ways to fulfil housing obligations are needed. It will be important to make best use of and improve housing conditions in the private rented sector so that this remains an attractive option to households who can afford to rent privately.

Access to Private Rented Accommodation

The private rented sector can be a realistic housing option for households in housing need. Although it is generally more expensive and offers shorter tenancies than the social housing sector, it can respond quicker to demand and provide more flexibility. However, for those on lower incomes, including those in paid employment, the choice of suitable private rented accommodation that is affordable can be limited.

With the Government legislating the abolition of non-fault evictions, the economic downturn post COVID and tightening of tenant rights, there is a concern that the number of private sector landlords letting properties in the area may be reduce. We need to proactively promote the opportunity with private sector landlords (through the Landlords Forum or publicity) to let their properties through our Landlord Incentive package. Working with households on our register via Personal Housing Plans, to explore private rented sector property as a housing option will be important but the cost may, for some households, make this prohibitive.

The high private market rental values in the area is fuelled in part by Sevenoaks being well placed with good transport links to London. Sevenoaks District is recognised to be one of the most expensive places to live when comparing median earnings to property prices.

For households in receipt of full or part Local Housing Allowance, there is likely to be a shortfall between local housing allowance rates and local rents, as shown in the tables below:

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Shortfall between LHA rates and local rents

Property Size	LHA Rate - North West Kent BRMA (£ pw)	Average Rent for Swanley (£pw)	Shortfall per week (£)
1 Bed	£155.34	£221.00	£65.66
2 Bed	£195.62	£288.46	£92.84
3 Bed	£241.64	£406.15	£164.51
4 Bed	£299.18	£496.15	£196.97
Property Size	LHA Rate - High Weald BRMA (£ pw).	Average Rent for Sevenoaks Town (£pw)	Shortfall per week (£ pw)
1 Bed	£159.95	£248.31	£88.36
2 Bed	£207.12	£412.15	£205.03
3 Bed	£260.05	£573.46	£313.41
4 Bed	£345.21	£690.46	£345.25

Data sourced September 2022 – [Home.co.uk](https://www.home.co.uk)

Property Size	LHA Rate - North West Kent BRMA (£ pw).	LHA Rate - High Weald BRMA (£ pw).	Average Rent across District 2021/22	Shortfall per week (£)
1 Bed	£155.34	£159.95	£224.31	£68.97/£64.36
2 Bed	£195.62	£207.12	£300.46	£104.84/£93.34
3 Bed	£241.64	£260.05	£379.85	£138.21/£119.80
4 Bed	£299.18	£345.21	£752.54	£453.36/£407.33

Whilst the average rent charged within the private rented sector varies based upon demand at any given time, the table above provide a snapshot of the difference between the market/average rent being charged within the District and the shortfall for residents requiring support from Local Housing Allowance towards their monthly rent. This highlights the difficulty that many people on low incomes have with being able to identify accommodation they can afford and demonstrates why many landlords are reluctant to accept tenants claiming benefits. We are aware anecdotally, of landlords stating that they are unable, as a condition of their insurance, to let to tenants in receipt of benefits and our landlord offer includes cover for this via Help2Rent.

We are aware that affordability issues impact on those claiming out of work benefits and households where one or two members are in paid employment, still find it difficult to afford local rent levels.

Property Standards

Between 2017-2021, the Council issued 45 Enforcement Notices and improved 26 homes through enforcement action.

Houses in Multiple Occupation licensing was introduced in 2006 but extended to more premises from 1 October 2018 when the original requirement that premises only had to have a licence if there were 5 or more tenants forming 2 or more households, and had 3 or more storeys, was changed so that it applied regardless of the number of storeys. The legislative change resulted in an increase of 31% (5) of licensed Houses in Multiple Occupation. The number does fluctuate because of new Houses in Multiple Occupation being created and others ceasing to operate. Licenses typically last for 5 years, so there is a regular turnover. Houses in Multiple Occupation with fewer than 5 tenants are not subject to mandatory licensing but are subject to broadly similar standards and are checked periodically.

Between 2017–2021, the Council granted 371 Disabled Facilities Grants. The works carried out with grant funding ensure residents can remain safely in their own homes and continue to enjoy independent living. This prevents residents needing to be rehoused.

Between 2017–2021, the Council granted 173 Safe and Secure Grants which are designed to reduce admissions to hospital and promote independence that could include repairs or modifications to stairs, floors and steps, safety and security repairs or providing additional property modifications to promote independence for customers with a specific disability, diagnosed condition (or written evidence supporting a condition) with a Dementia to ensure they reside in their own home as long as possible.

Between 2017–2021 the Council granted 62 Hospital Discharge Grants which is to provide support to any customer being discharged from hospital. A Better Care Coordinator has been appointed funded through the Better Care Fund. This appointment has ensured that strong links between the Council and Health and third sector organisations have been built which in turn has provided opportunities to improve the lives of vulnerable people and in doing so provide a better service and quality of life.

Landlord Incentive Scheme

The aim of Sevenoaks District Help to Let scheme is to encourage landlords to work with the Council to help to assist local families in housing need whilst reducing the risk and hassle of private sector renting.

Help to Let will provide a tenant matching service for local landlords from our client base, this will primarily be households that we have a duty to prevent or relieve their homelessness by securing alternative accommodation within the private rented sector.

In addition to the tenant matching service the scheme will offer the following services free of charge:

- No letting agency fees for tenant finding/matching services
- Right to rent checks carried out

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- A full electronic inventory prepared
- Check in and check out
- A single point of contact within our Accommodation Team
- Post – tenancy visit within the first 6 to 8 weeks
- One property inspection per 12 month tenancy
- £500 towards repairs during each 12 month tenancy period

The financial incentives available under Help to Let are flexible and be tailored to our individual households depending on the households needs. The basic financial incentives are as follows:

- Bond or cash incentive (equivalent of 6 weeks rent)
- Free landlord insurance provided in partnership with Help2Rent

These financial incentives support the landlord with the provision of Local Housing Allowance weekly/monthly rates for rental throughout the agreed period. All incentives with our Help to Let scheme are funded through our Homeless Prevention Grant.

28 Households have been rehoused under this scheme between April and October 2022. The majority of these households have been under a Prevention Duty.

Supported Housing Options

Many homeless applicants need support to sustain independent accommodation in the long term. Access to supported accommodation, transitional, longer term and crisis support services can reduce the risk of repeat homelessness.

Discretionary Housing Payments and pressure on affordability

Resolving rent issues in social or private rented sector involves the use of Discretionary Housing Payments which are administered by the Council's Revenues and Benefits Team. Discretionary Housing Payments are intended to support households to access or sustain their tenancies and are available to assist households for an interim period whilst they resolve their individual financial circumstances. They can be used to assist with clearing rent arrears, issues of affordability, benefit cap and in some cases for deposits or rent in advance to access new accommodation.

The Revenues and Benefits team work closely with the Housing Service to ensure customers are receiving advice and support where homelessness is identified as an issue for requesting support with Discretionary Housing Payments. Issues of affordability within the District have consistently been one of the main reasons for people seeking assistance with a Discretionary Housing Payments and affordability affects households in both the social and private rented sectors. In the period of this review, over £736,785 was awarded to residents in Discretionary Housing Payments.

The table below shows the number of payments awarded and the central Government contribution:

Financial Year	Total DHP awarded	Central Government contribution
2017-2018	£177,847	£198,116
2018-2019	£185,668	£190,679
2019-2020	£164,004	£164,643
2020-2021	£236,266	£238,106
TOTAL	£736,785	£791,544

If the central Government contribution to the Council is not fully spent, then it must be returned. Therefore, although we may endeavour to spend as much of the allocation as possible, if Discretionary Housing Payments are not made during a financial year's payment run, they will come out of the next financial year's contribution. This explains some of the differences in amounts awarded against contribution total. Although it is not possible to analyse Discretionary Housing Payments expenditure on homelessness prevention cases, awards of Discretionary Housing Payments have risen over the past 4 years.

Use and availability of Temporary Accommodation

Use of Temporary Accommodation

The Council has a duty to offer Temporary Accommodation to:

- Households that present as homeless where there is reason to believe that they may be in priority need and they have nowhere to stay pending a homelessness decision.
- Households for whom following an assessment, a full homelessness duty has been accepted.
- Households deemed vulnerable and owed a Relief duty.
- Households who present themselves to the Council as homeless, are usually placed in temporary accommodation whilst enquiries are made into their circumstances, and a decision is made as to whether we owe a duty to continue to provide accommodation.

Officers work with applicants as far as possible to enable them to remain in existing accommodation until suitable temporary accommodation becomes available; however this is less likely to be possible for households who present at the point that homelessness has already occurred, and these households will be more likely to require emergency or Bed and Breakfast placements. Officers aim to place applicants into self-contained temporary accommodation if this is available. If there is a need for an emergency placement, or self-contained temporary accommodation is not

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available, Officers will make placements into Bed and Breakfast accommodation in the first instance. In some cases, households will then move on from Bed and Breakfast accommodation to self-contained temporary accommodation as soon as it is available.

COVID Everyone In impact

Between 23 March 2020 and 4 July 2020 when the Prime Minister announced that lockdown restrictions would end, we accommodated around 80 households in temporary accommodation across 7 different locations at a total cost of £184,373.00. The costs continue to rise whilst some households remain in the temporary accommodation until suitable secure accommodation can be found for them.

Sources of Temporary Accommodation

Bed and Breakfast accommodation

The Council have a small selection of options available to meet the needs of households requiring temporary accommodation. The option used will depend upon the urgency of the applicant's housing circumstances and availability of accommodation at the time of approach.

Where people approach needing accommodation in an emergency or with limited notice that they are to become homeless, the main option is likely to be Bed and Breakfast, which is paid on a nightly basis, or in a hotel.

Where out of area bookings are used, we strive to meet the requirements of households with work or school commitments close to our administrative boundaries. Some out of area bookings have been made at the request of the applicant, usually for personal safety reasons. These are only used as a last resort for a short period of time, until accommodation within the District can be identified.

Bed and Breakfast is not considered to be suitable accommodation for families and the law says it can only be used in an emergency and for no longer than a maximum of 6 weeks.

Self-contained Accommodation

If a homeless duty is accepted and the household has been placed in Bed and Breakfast or hotel accommodation as an initial placement, officers will look to move the household into self-contained accommodation at the earliest opportunity.

We have an agreement with West Kent Housing Association and Moat to provide 46 self-contained temporary accommodation units in the District.

Time spent in Temporary Accommodation

We work to limit the amount of time households have to spend in temporary accommodation. We provide support through our Accommodation Officers who

visits families to ensure they are maintaining their temporary accommodation and applying for suitable properties available through our HomeChoice system. If households are not applying for all suitable properties available within an advertising cycle, officers will place bids on suitable properties on their behalf, to ensure they move out of temporary accommodation at the earliest opportunity.

During the review period, the number of households who remained in temporary accommodation for over 12 months, increase during COVID and has since decreased during 2021-2022 with 104 accommodated for over 12 months.

The table below shows the time spent in Temporary Accommodation for those owed an immediate emergency accommodation duty:

Time in Temporary Accommodation	2018-2019	2019-2020	2020-2021	2021-2022	Total
Under 6 months	78	89	105	92	364
6 -12 months	39	49	72	56	216
1-2 years	110	128	236	104	578

Expenditure on Temporary Accommodation

Households placed into temporary accommodation are charged rent whilst they are staying in the accommodation and can claim Housing Benefit to assist with this if they are receiving a low income.

2017-2018	2018-2019	2019-2020	2020-2021	2021-2022
£77,05.99	£332,773.33	£501,240.88	£860,170.44	£1,483,056.35

Funding towards Homelessness Responses

Homelessness Prevention Grant

Central Government used to give local housing authorities funding for homelessness prevention work via a ringfenced grant. A few years ago, the ring fenced grant ceased, and the funding was incorporated into the Council's wider local government settlement but was visible as a discrete element of the total settlement. The Homelessness Prevention Grant allocation for Sevenoaks District Council is as follows:

2018-2019	2019-2020	2020-2021	2021-2022
£178,842	£264,630	£364,043	£434,897

This funding has been used by the Housing Service to support a range of community and voluntary sector groups to provide services within the District that are focused on supporting the prevention of homelessness. Examples of where this funding has

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been used include to assist with rent and mortgage arrears, alongside financial difficulties paying their utility bills.

Rough Sleeper Initiative funding

The Council successfully bid for Rough Sleeper Initiative funding in 2021-2022 secured almost £300,000 under the Rough Sleeper Initiative 4 (RSI4) and a further £677,230 under RSI5 for 2022-2023. This funding will provide coordination, outreach and complex needs support to rough sleepers and those in risk of rough sleeping and our spend is programmed to deliver:

- Emergency Accommodation
- Imago Social Prescriber Service
- Housing Pathway Coordinator
- Assessment Resettlement Officer (Porchlight)
- Weekly Drop-in (Porchlight)
- Outreach Officer (Porchlight)
- Personalised Budget
- Private Sector Rented Funding

Accommodation for Ex-Offenders

The service helps build partnership links and create housing pathways at point of prison release, risk of homelessness from family/host (client who has been offender history in the last 12 months), move on from specialist supported accommodation beds and hospital discharges.

A dedicated officer post provides an assessment, linked in with support under a prevention/relief duty.

This role links in with the Council's current outreach and inreach provision funded by RSI5, and as the Council upscale the prevention interventions in the District to prevention homelessness.

This service is part of the established HERO service, providing support and advice to people at risk of rough sleeping, prison charges, responding to duty to refers and ensuring all customers are assessed for a full homelessness assessment. The Council's HERO service is a responsive prevention service, with mediation, conflict resolution interventions, access to grant assistance for rent deposit and rent in advance private rented sector accommodation.

The service will continue to work to undertake prevention and relief assessments with providing rapid responses to prison discharges ensuring no one sleeps rough and no second night out in the District.

The Council housed 6 ex-offenders and are working with another 12, some of whom are due to be released from prison during November and December 2022.

Using Section 106 Affordable Housing Commuted Sum monies

The Council has used Section 106 commuted sum monies totalling £6.269m to deliver 31 new affordable homes in the District, including 27 genuinely affordable homes where rents are capped at local housing allowance levels. Of these, 20 homes have been delivered by Quercus Housing across 2 schemes and 7 by West Kent Housing Association. The homes have been allocated to those on the Housing Register, with 15 homes specifically targeted at homeless households moving on from temporary accommodation and 7 for Rough Sleepers.

Section 106 monies have been used to fund initiatives which impact, directly or indirectly, on our homeless customers. These include a private sector landlords' incentive scheme to secure more homes in the private rented sector (see Assisted to Private Rented, above) and a downsizing incentive scheme to free up family sized social housing for reletting to those in need.

Total Section 106 monies expended on these various initiatives represents approximately 70% of all Section 106 monies spend since 2011.

Working in partnership

Strong and effective partnership working has been key to the successful prevention of homelessness in Sevenoaks. Our partners include:

- Porchlight
- Look Ahead
- CGI
- Priority House (NHS)
- Highlands House (NHS)
- Littlebrook mental health unit (NHS)
- DAVS (domestic abuse services)
- CAB
- Cross Light Debt Assistance
- KSAS (KCC scheme for emergency support needs)
- Abacus for all furniture needs
- Department of Working Pensions
- Royal British Legion
- SSAFA
- IPAG (Kent Police)
- Stalking Charities
- Social Services
- GP Practices
- Probation services for ex-offenders
- CROP (citizen's right for older people)
- Criminal justice system
- West Kent Housing Association
- Moat

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Strong relationships, referral routes and jointly delivered services will continue to lead to better outcomes for the homeless.

Future Challenges and Priorities

Looking ahead into 2023–2028, the Council with our partners and stakeholders need to assess the content of this review and taking significant national events into consideration, understand the challenges that might lie ahead. We have assessed that the following factors will shape the way in which services are delivered, and any Strategy going forward, should endeavour to tackle and overcome them.

Challenges

Funding

Partnership working can be destabilised by short term funding. Partners need confidence in long term funding to develop and mature services in our favour. Yearly and short term funding approaches can foster short term thinking.

Affordability

A lack of social housing and private rented affordable housing options within the District and accommodation for low income households. There is an overall affordable housing need for 423 homes per year, as set out in the Targeted Review of Local Housing Needs (TRLHN 2022). Between 2017-2021, the annual new delivery averaged at 87 homes. The private rented sector is increasingly unaffordable and the delivery in affordable housing has been impacted by the pandemic in 2020 and 2021.

To be genuinely affordable, a rent should cost no more than 35% of gross income. This equates to someone on an income of £45k (median income) paying a monthly rent of no more than £1,312. In 2020, rents in the lowest quartile (the lowest 25% of rents) across Sevenoaks District were £1,001, making it necessary for most people earning average incomes, to access some form of affordable housing. The lack of a local definition of what constitutes housing that is affordable to occupiers means that the current supply of new affordable housing may not be affordable to those in greatest need. This could create an increasing threat of homelessness as the supply of social housing is reduced and private rented sector accommodation becomes unsustainable or increasingly unaffordable

Domestic Abuse services in Kent

There is a pooled budget for County Council led commissioning of services to support people affected by domestic abuse.

Customers with support/complex needs/older residents

A need for increased accommodation and support services in the District for people who sleep rough; support for clients to be tenancy supported to enable them to access and sustain their accommodation with social and private landlords. We need

to ensure that a range of housing options are made available for younger people who have limited incomes, and older people and people with disabilities who require more support e.g. provision of additional Extra Care accommodation and accessible homes. The lack of an up to date Local Plan means we are currently unable to require homes that meet minimum standards, ie the Nationally Described Space Standards. As social housing tends to be let at maximum capacity, it is very important for homes to have reasonable space standards. Achieving higher building standards to enable us to help customers with accessibility and physical disabilities (Building Regulation Standards M4(2) and M4(3), is an even greater challenge.

Hidden Homelessness

The sudden rise in street homelessness at the start of lockdown on 23 March 2020, indicated many people were in insecure arrangements. This sector is incredibly difficult to quantify as many do not regard themselves as homeless. However understanding that many single males do not approach homeless services until crisis point indicates a need to identify this customer group at an early stage and provide suitable accommodation options and enhance outreach support.

Priorities

Financial difficulty and Financial Illiteracy

Households may experience financial difficulties in being able to access accommodation in the social or private rented sector or in trying to cover their housing costs and maintain an existing tenancy. The challenge of meeting housing costs versus limited household income applies across all tenures.

Rising Cost of Living

Rent arrears and utilities are rising hugely within our communities. Strong consumer demand for goods, rising energy prices and higher costs for businesses are reflected in higher prices within supermarkets, petrol stations and utility bills.

We saw the effects of food insecurity as we went in and came out of COVID, in certain areas of the District we saw malnutrition and hunger which is particularly alarming in the current context with high food demand and energy prices rising.

Requests for assistance with food parcels from our foodbanks within our District have risen to 2037 since April 2022.

While using the Kent Household support fund of £120k to assist customers to pay utilities, rent arrears and mortgage arrears (within a limit), across the whole District of Sevenoaks.

Greater demand is currently being seen in the Sevenoaks District for assistance with rent and mortgage payments, assistance to pay utility bills. During the month of August the Council have assisted a customer to gain a mortgage holiday, hence avoiding eviction.

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The data shows an emerging trend of hidden homelessness

We need to identify this demographic who cannot, or find it difficult to, access Council support when they most need it to prevent homelessness or rough sleeping. This may include people who find it physically difficult to attend the centre, those who do not know about our services or those who for other reasons feel they cannot access our services.

Improve the financial resilience of our customers

By offering targeted financial support, this will help to address this affordability barrier and should be a key action within the Strategy. We will monitor the costs of affordable housing, encourage delivery of housing at social rents and consider the delivery of shared housing solutions, in partnership with Registered Providers. We will need to support solutions to facilitate access into social housing for those households who are not yet tenancy ready but need independent accommodation.

We must work in partnership

With other institutions such as the DWP, Criminal Justice, Health, Kent County Council, and other Kent local authorities to improve homelessness prevention via early intervention and referrals to appropriate advice and support services, joint commissioning, or delivery of services where possible, and improved protocols.

Provide an alternative narrative to those already homeless

Improve the communications to promote our services to those who need them and build trust within the communities of interest. Consult and engage people with lived experience to understand their needs, capitalise on their strengths and codesign solutions.

Ensuring Private Rented Sector is fit for purpose

Most households do not want to secure alternative accommodation in the private rented sector due to affordability and quality concerns. We must ensure that the private rented sector is an attractive alternative housing solution.

Data capture

We need to improve the way we record homelessness and rough sleeping prevention services. This will enable us to use this data effectively to inform service improvements. Nominations agreements and lettings should be monitored, and targets set to drive appropriate actions and behaviours. Staff training will help to ensure consistency of approach to facilitating and recording the demands on the service but the solutions and positive outcomes.

Maximising delivery of Affordable Housing

Adoption of a new Local Plan will help the Council to maximise delivery of new affordable housing. Policies within the Local Plan will ensure affordable housing is developed which is truly affordable for local residents, meets prescribed standards to meet specific needs and contributes to the Council meeting its net zero targets.

Continued collaboration with existing partner Registered Providers, encouragement of new partners who share our strategic direction and the growing role of Quercus Housing (and potentially the Council building its own homes through Registered Provider status) will ensure Local Plan policy is delivered on the ground.

The use of different forms of housing will assist specific client groups, eg micro homes to help the single homeless.

Refreshed and enhanced under occupation scheme to free up more family sized housing in order to create movement in existing housing stock in the District.

Re-invigorated empty homes service to bring homes back into use for local people.

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Appendix B

**Sevenoaks District Council
Homelessness and Rough Sleeper Strategy
2023-2028**

Introduction

The demand for homelessness services has increased steadily over the past 5 years. During the past 3 years, the Council's Housing Service received more than 2,526 requests for advice and assistance from family and single households seeking help. The impact of homelessness has a devastating impact on those directly affected, a social cost that extends into the wider community, and a financial cost that draws agency resources away from other key services.

Although Sevenoaks District within the national context has seen a rise in levels of homelessness, it remains in a position of not having a rough sleeping problem. However, the Council cannot be complacent, homelessness effects lives and life chances and 1 rough sleeper must be considered 1 too many.

This Strategy introduces a framework that sets out to reduce the impact that homelessness has on local individuals and households, and the priorities the Council will pursue to help do so.

What is homelessness?

This Strategy uses a definition of homelessness that includes both rough sleepers, single people and families that are threatened with, or present as homeless. In short, any household (individual, couple, or a family) that find themselves without a safe or secure place to call home.

Those who present as homeless do not have to be sleeping on the streets or lack a roof at the time they ask for help. Households can be considered homeless if they are:

- Having to stay with friends or family.
- Staying in a hostel, night shelter or bed and breakfast accommodation.
- At risk of violence or abuse in their current home.
- Living in poor or unsafe conditions.
- Leaving an institution such as a prison or hospital, or the care system, with nowhere to go.

Contributing factors that have led to this national picture of increasing homelessness include:

- High housing demand and a lack of supply leading to high house prices and private rents with greater shortfalls between rents and Local Housing Allowance
- Shortage of social housing or truly affordable housing to rent

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- Increasing household bills and cost of living
- Cuts and reforms to welfare benefits
- Cuts in funding to statutory and voluntary services which support vulnerable people
- Buy to Let tax rules impacted the private rented market
- Impact of COVID pandemic

How has this Strategy been developed?

The relevant legislation has been adhered to in formulating and modifying this Strategy. It has been prepared in line with the statutory requirements set out in the Homelessness Act 2002, Section 1(4) of which requires housing authorities to publish a new Homelessness and Rough Sleeper Strategy, based on the results of a Homelessness Review, which we have undertaken as part of the Housing Strategy 2022-2027 refresh.

In addition we have had regard to the Council's Allocation Policy and the Homelessness Code of Guidance for local housing authorities in England 2018, (updated 12th October 2021).

The homelessness review, undertaken earlier this year as part of the Housing Strategy refresh, provided an up to date picture of:

- Current and likely future levels of homelessness across Sevenoaks District
- Activities carried out and support available to prevent homelessness and those experiencing it.
- Level of resources made available locally to tackle homelessness.

The wider public, local voluntary and statutory partners were invited to comment on the findings of the review, and their responses have been used to inform the shape and direction of this Strategy, which sets out how the Council will work with others to; put in place plans to prevent homelessness occurring; intervene effectively when it occurs; and deliver sustainable plans to support re-housing options.

National context

The operating environment in which local authorities must deliver services to reduce homelessness continues to provide a number of key challenges. Increasing house prices, rising private rented sector rents and the reduced income many local households have experienced as a result of the pandemic, continue to have an impact, sustaining the high number of households accessing services and needing to be placed in temporary accommodation.

Key issues to highlight include:

COVID: over the past 2 years the pandemic has, not unsurprisingly, had a significant impact on central Government Strategy. At a local level, this has resulted in teams refocusing services by; providing emergency accommodation to rough sleepers as

part of the Everyone In initiative; putting in place additional safeguards to help maintain social distancing in temporary accommodation; and delivering remote services as standard. A ban on private rented sector evictions, in place since the first national lockdown, expired at the end of May 2021. Along with the broader economic impacts of the pandemic, this has increased the level of demand on homelessness services and the potential impacts will need to be monitored in the months ahead.

Homelessness Reduction Act (HRA) 2017: the implementation of this Act, whilst putting in place welcome additional protections for those at risk of homelessness, has introduced extra demands on the work of local Housing Needs teams. The changes it introduced included:

- A new prevention duty, requiring local authorities to take reasonable steps to assist those likely to become homeless earlier, so within 56, rather than 28 days.
- A new relief duty, which applies to those already homeless when they ask the local authority for help. It requires local authorities to provide support for 56 days.
- A requirement to carry out a holistic assessment of the applicant's housing and support needs, then set out how these will be addressed in a Personal Housing Plan.

The combined impact of these changes has been to increase the overall number of applicants seeking help, alter the profile of those qualifying for assistance (in particular more single applicants and more households with complex needs are coming forward under the new duties) and increase the number of applicants placed in temporary accommodation.

Domestic Abuse Act 2021: Under this new Act, domestic abuse is recognised as a direct factor conferring priority need for the first time, so applicants no longer have to prove that the abuse is creating vulnerability, in order to qualify for help. This is a welcome change that will provide re-assurance and certainty for individuals and their families presenting as homeless because of domestic abuse and will simplify the decision making process for officers. The Act introduces a new definition of domestic abuse and requires that housing authorities, when rehousing victims, should provide a secure lifetime tenancy.

National Rough Sleeping Strategy 2018: this Government Strategy sets out their current plans for tackling rough sleeping. It comprises of three parts:

- **Prevention:** understanding issues that lead to rough sleeping and providing support.
- **Intervention:** helping rough sleepers with swift support tailored to their individual needs.
- **Recovery:** supporting people in finding a new home and rebuilding their lives.

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The Strategy, along with the funding received via the Rough Sleeper Initiative, set out to halve rough sleeping by 2022 and eradicate it completely by 2027.

Local context

Property prices in Sevenoaks District are high, with the average median cost of a home in 2020 is £425,000 (source: Targeted Review of Local Housing Needs 2022 (TRLHN)). The recent surge in market activity has only served to exacerbate this position. Such high prices set the context for a range of issues that restrict the access that many households have to local housing markets. These include (with all references relating to the TRLHN):

- **High house prices and rents:** house price ratios, which compare the relationship between average property prices and average earnings, showed that by 2020, median property prices were almost 12 times the local resident based full time salary. High house prices have a knock on effect on private rents, the high level of which continue to challenge the ability for local households to secure suitable housing. By 2020, the median rent (all bed sizes) stood at £1,296 per month, a rise of 40 percent over the past 10 years. A recent search on Rightmove (18 October 2022) illustrated the fact that the majority of private rents charged in Sevenoaks District are above the Local Housing Allowance, which caps levels of welfare benefit subsidy that can be claimed. Of the 39 advertised homes in Sevenoaks and Swanley, none were available at a rent below the respective Local Housing Allowance rate. With Local Housing Allowance rates remaining frozen, this picture is unlikely to change anytime soon.
- **Deprivation:** Indices of Multiple Deprivation, last published by the Office for National Statistics in 2019, provide a snapshot of relative deprivation in each locality in England, by looking at a range of factors including income, employment, education, health, and barriers to housing. These are combined into a single index. Overall, Sevenoaks District ranks as 295 out of 354 local authorities in England. Sevenoaks District has two Lower Super Output Areas (LSOAs) that are amongst the 20% most deprived in England, St Mary's and White Oak wards in Swanley.
- **Housing tenure and supply:** The total housing stock of Sevenoaks District was 50,947 in 2020, an increase of 2,886 homes, a rise of 6% over the past ten years (Department for Levelling Up, Housing and Communities – live tables). This was driven largely by new private sector provision (increase of 2,836 homes) and a smaller increase in Registered Providers (formerly known as Housing Associations) homes (62 homes). Overall, the growth in Registered Provider social housing stock has been small, once Right to Buy losses are taken into account. New affordable housing supply is an area that requires more focus if provision is to be expanded to help meet demand.
- **Housing demand and availability:** The demand for social housing is high and there are currently over 870 households waiting for homes on the Council's

housing register, each of whom meets one or more categories of preferential need. The availability of social housing, on the other hand, is restricted in terms of both new supply and the number of existing homes that become available to relet. During 2021-2022 a total of 194 West Kent Housing Association homes were let to new tenants, which represents a stock turnover of 3.5%. There remains a significant discrepancy between the levels of supply and demand.

The combined impact of high housing costs and restricted affordable housing in both the private and social rented housing sectors, presents a real housing challenge to residents of the District. These challenges restrict the housing choices of many households on middle incomes and severely restrict the choices of those on low and unstable incomes, many of whom have to compromise on the standard and suitability of the homes they can secure. These inequalities will continue to have a disproportionate impact on young people, single households, and those reliant on welfare benefits.

Strategic fit

This Strategy contributes directly to the housing ambitions set out in Sevenoaks District Council's Council Plan and our refreshed Housing Strategy 2022-2027 priorities, which are:

- Priority 1: Developing Sevenoaks' housing offer: building new affordable homes.
- Priority 2: Promoting quality and optimising the suitability of homes.
- Priority 3: Reducing homelessness and improving routes into permanent accommodation.
- Priority 4: Healthy people, homes and places.

In addressing homelessness the plan sets out goals to; focus on prevention; support households at risk of homelessness; and work in partnership to address the number of rough sleepers in the town.

Summary of findings from the Homelessness Review

The review set out to provide an up to date picture of the:

- Current and likely future levels of homelessness across the District.
- Activities carried out and support available to prevent homelessness and those experiencing it.
- Level of resources made available locally to tackle homelessness.

The main causes of homelessness in the District remains static:

- Parents, other relatives or friends no longer willing or able to accommodate.
- Loss of rented or tied accommodation due to termination of assured shorthold tenancy.

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- Violent breakdown of relationship involving partner.
- Other reason (eg homeless in emergency, sleeping rough or in hostel returned from abroad).
- Non-violent breakdown of relationship.
- Loss of rented or tied accommodation other than termination of assured shorthold tenancy.

A summary of key findings from the review is set out below.

- **Service demand and operational response:** the review showed that the demand for services remains high and is likely to remain so into the foreseeable future. During 2021-2022, 999 households raised enquiries with the housing needs team, a decrease from 1,180 enquiries received the year before. 376 of these enquiries progressed through to a formal homelessness application, and of these, 205 households were found to be owed a prevention duty (because they were at risk of homelessness when they approached the Council) or relief duty (because they were homeless at the time they approached the Council).
- **Prevention duty and the Council's response:** the number of households whose prevention duty ended during the year is used to measure the level of activity under this duty. During 2021-2022 this duty ended for 205 households, with the preventative activities undertaken by the Housing Service successfully securing accommodation for 130 of those seeking help. Around 36 went on to become homeless. Taking positive action to prevent homelessness in this way reduces both the social cost of homelessness on households and the financial costs borne by the Council.
- **Relief duty and the Council's response:** the number of households whose relief duty ended during the year is used to measure the level of activity under this duty. During 2021-2022 this duty ended for 171 households, with the activities undertaken by the Housing Service successfully securing accommodation and addressing homelessness for 38 of those seeking help. As is the case with preventative measures, relieving homelessness in this way reduces the social and financial costs of homelessness. Around 130 of households remained homeless as their relief duty ended (after 56 days) and progressed to be assessed under the main homelessness duty.
- **Main duty assessments:** the number of main duty assessments undertaken has risen by 48% over the past few years, from 62 cases in 2018-2019 to 130 in 2021-2022. The Council has assisted many households earlier in the process under the prevention and relief duties as introduced in the Homelessness Reduction Act. However the Council has seen an increase in the number of approaches from households impacted by COVID, an increase in domestic abuse presentations and single households and those aged 16 and 17 year old. Single households are less likely to qualify as a priority than families, as having children is the key driver of priority need set out in the legislation. In 2021-2022 most households re-housed under the main duty accepted an offer of a

socially rented home with the remainder accepting an offer in the private rented sector.

- **Rough Sleeping:** the number of rough sleepers in Sevenoaks District continues to be low when compared with areas of a similar size. The annual rough sleeper count, which takes place in all local authorities each autumn, recorded 1 case in 2021, a reduction from 8 in 2020. The Rough Sleeping Initiative continues to provide ongoing support, carrying out proactive outreach work that identifies those sleeping rough and helps connect them with local services, but there remains a significant shortage of suitable move on accommodation in the District. This has been exasperated by the Government's Everyone In COVID plans, which provided much needed shelter for those at risk of rough sleeping, but has left high numbers of single, often vulnerable persons, in emergency accommodation. Addressing their support and housing needs is a priority.
- **Partnerships:** working with statutory and voluntary partners has been integral to mounting an effective local response to homelessness, and a wide range of dedicated partners have joined efforts to help prevent homelessness and provide support to vulnerable households. The new Duty to Refer pathway, introduced by the Homelessness Reduction Act is working well, with partner agencies referring 1,687 enquiries to the Council between 2018-2022. The probation service, hospitals and prisons were the leading sources of referral.
- **Local trends and COVID:** over the past year, analysis of how the Housing Service has been operating indicates that the pandemic has had a local impact that reflects national trends. As such, the associated policies that have sought to restrict evictions and support the most vulnerable, have increased the proportion of single households, and reduced the number of households with children being assisted by the housing services team.
- **Impact of the Homelessness Reduction Act:** there is evidence that the shift towards assisting more single households was underway before the pandemic, as a result of the new prevention and relief duties introduced by the Homelessness Reduction Act. In 2021-2022 single persons accounted for 201 of all those qualifying for assistance under the prevention or relief duties. Invariably, this means that the service is managing higher numbers of single and vulnerable people with mental health issues and other complex disadvantages.
- **Impact of the Domestic Abuse Act:** the new act was introduced in 2021 and placed a duty on local authorities to give support to victims of domestic abuse and their children in refuges and safe accommodation. Since its introduction, the Council has seen a rise in out of area placements, notably from London authorities. Domestic abuse now accounts for a significant number of our homelessness enquires and has seen 136 placements being made in temporary and emergency accommodation in 2021-2022.

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- Longer term trends:** Whilst in the short term there is likely to be some re-balancing of the profile of those accessing the service, as the impact of COVID cases, services are likely to continue to face a high level of demand from a more marginalised demand through preventative activity. In addressing these trends, the emphasis will need to be placed on putting in place high quality services that seek to reduce homelessness. Locally, we are seeing the rising cost of living impacting a rise in homelessness. The proposed removal of the Kent Homeless Connect support contract by Kent County Council will impact the provision of much needed supported accommodation and intensive support for rough sleepers with multi-complex needs and challenging customer base.

Strategic Objectives

The objectives of the Strategy will cover the following themes:

<p>PREVENTION</p>	<p>Quality housing needs and standards - services dedicated to effective advice, holistic and informed assessment.</p> <p>Preventative casework - working alongside partners, to stop those seeking help from becoming homeless.</p> <p>Targeted preventions for the most vulnerable groups through the provision of agreed pathways into support.</p> <p>Strategic activities that seek to identify issues that drive homelessness across the District and apply remedies to reduce it.</p>
<p>INTERVENTION</p>	<p>Tackling rough sleeping - continue supporting the County wide approach to reducing harm and addressing associated multiple, complex needs.</p> <p>Partnership working - maximise the effectiveness of joint working and pathways for at risk groups.</p> <p>Temporary housing - provide a good quality, safe, secure, value for money accommodation portfolio and reduce the use of emergency placements.</p>
<p>SUSTAINABLE SOLUTIONS</p>	<p>Re-housing establish a range of sustainable housing and move-on</p>

	<p>options for rough sleepers, vulnerable and homeless households.</p> <p>Support - deliver effective support services to help households maintain accommodation once housed.</p>
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Each of these themes is underpinned by a series of objectives:

- Effective collaborations with statutory, agency and voluntary partners.
- High quality services that treat customers with respect and provide value for money.
- Skilled and well trained staff.

Pursuing an integrated approach that works with partners to assess and prevent the local causes of homelessness and rough sleeping, can help deliver best practice, reduce the barriers that restrict people from accessing services, and equip residents with the skills they need to sustain their tenancy in the longer term.

Monitoring

The Action Plan will be monitored on an annual basis to maintain progress against the set objectives.

If any minor changes are needed, these will be considered by the Head of Housing to ensure that the Strategy may be future proofed to changing legislation, circumstance and local identified needs.

Authority to introduce the minor amendments is delegated to the Chief Officer, People and Places, in consultation with the Portfolio Holder for Housing and Health.

Homelessness and Rough Sleeper Strategy: Action Plan 2023-2028

Theme 1: Prevention					
Objective	Action	Success Criteria and Outcomes	When	Lead Officer/Team Responsible	Progress
Quality housing advice, prevention and accommodation services - dedicated to effective advice, holistic and informed case assessment	Train and develop a team of confident and experienced housing advice, prevention and accommodation officers to deliver high quality needs assessments and excellent customer service, with dignity and respect	Develop and update skills matrix for all teams/staff	Year 1 and ongoing	Homelessness Prevention Manager/ Housing Advice Team Leader	
		Organise delivery of homelessness law and case law update courses	Annually	Homelessness Prevention Manager/ Housing Advice Team Leader <i>Partners:</i> <i>Porchlight</i> <i>CAB</i>	
		Named staff champions with joint responsibility for leading specialist training/liaison in areas, such as domestic abuse, ex-offenders and mental health awareness	Year 1	Housing Advice Team Leader	
		Enhanced monthly	Ongoing	Homelessness	

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		monitoring of complaints and ensure outcomes are discussed at 1-1s to reduce levels of complaints		Prevention Manager/ Housing Advice Team Leader	
	Develop IT systems to maximise efficiency, case management and reporting capabilities and align key customer processes	Effective case management of homelessness applications and decisions in place	Year 1 and ongoing	Homelessness Prevention Manager/ Housing Advice Team Leader/ Accommodation Team Leader	
		Updated website content, with better quality information providing residents with opportunities to receive answers via self-service options	Ongoing	Homelessness Prevention Manager/ Housing Advice Team Leader/ Accommodation Team Leader	
		Automated management reports detailing caseload, approaches, throughput, and demographics, to support the more effective monitoring of service	Ongoing	Homelessness Prevention Manager/ Housing Advice Team Leader/ Accommodation Team Leader	

		<p>Data reports that can be extracted and shared with partners to support the development of new initiatives and funding bids</p> <p>Key customer processes, including applications for homelessness, housing register and change of circumstance forms, fully operational and online</p> <p>Automated processes in place that reduce the time spent on administrative tasks and improve customer outcomes</p>	<p>Ongoing</p> <p>Year 1</p> <p>Year 1</p>	<p>Homelessness Prevention Manager/ Housing Advice Team Leader/ Accommodation Team Leader</p> <p>Homelessness Prevention Manager/ Housing Advice Team Leader/ Accommodation Team Leader</p> <p>Homelessness Prevention Manager/ Housing Advice Team Leader/ Accommodation Team Leader</p>	
	Work closely with statutory and voluntary sector partners, ensuring customers can access advice and	Hold regular forum with voluntary homelessness service providers, advice, and statutory agencies	Year 1 and ongoing	Head of Housing/ Homelessness Prevention Manager/ Housing Advice Team Leader/ Accommodation Team Leader	

	practical support which meets their needs and delivers realistic housing solutions	<p>At least one partner agency invited to each monthly team meeting to discuss their service/project</p> <p>Monitor referral arrangements in place to deliver preventative outcomes via commissioned partners</p>	<p>Year 1 and ongoing</p> <p>Year 1 and ongoing</p>	<p><i>Partners:</i> Porchlight West Kent Housing Association CAB</p> <p>Head of Housing/ Homelessness Prevention Manager/ Housing Advice Team Leader</p>	
Preventative casework - working, alongside partners, to stop those seeking help from becoming homeless	Work effectively with other colleagues in the Council such as housing benefit, private housing, community safety, licensing, and income teams, to help resolve issues that may lead to homelessness	Improved standards in private sector accommodation resulting in fewer approaches due to disrepair	Ongoing	<p>Head of Housing/ Homelessness Prevention Manager/ Housing Advice Team Leader</p> <p><i>Partners:</i> West Kent Housing Association</p>	
	Work with neighbouring authorities and	Increased volume of timely referrals from agencies and support	Ongoing	Homelessness Prevention Manager/ Housing Advice Team	

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	named public bodies to review and maintain effective Duty to Refer pathways, to help drive the early identification of homelessness	services, improving prevention outcomes for applicants		Leader	
Page 62	Create a dedicated hub of local partners, integrating the prevention work of Council teams, voluntary and statutory agencies, to focus on upstreaming preventative activities and coordinate casework	Hub established as the focus of preventative work and the lead in deploying early interventions targeted to those at risk of losing their home	Year 1 and ongoing	Head of Housing/ Homelessness Prevention Manager <i>Partners:</i> <i>Porchlight</i> <i>West Kent Housing Association</i> <i>CAB</i>	
		Increased volumes of planned moves to alternative Private Rented Sector homes and other housing options through negotiation and the use of incentives	Ongoing	Homelessness Prevention Manager/ Accommodation Team Leader	
	Target early financial support for tenants (Discretionary	Reduced proportion of relief versus prevention outcomes managed through the	Ongoing	Housing Advice Team Leader/ HERO Team Leader	

	Housing Payments, rent deposits and rent in advance) in partnership between Benefits, HERO and West Kent Housing Association	housing services team			
	Promote an effective, value for money, landlord incentive scheme that encourages more private rented sector landlords to let homes to housing needs referrals	<p>Scheme published/advertised to private sector landlords</p> <p>Landlord event held to promote the scheme</p> <p>Key point of contact for private sector landlords established and better working relationships with local landlords, local agents and the National Landlords Association</p> <p>Increased number of private sector</p>	<p>Ongoing</p> <p>Year 1</p> <p>Ongoing</p> <p>Ongoing</p>	<p>Homelessness Prevention Manager/ Accommodation Team Leader</p> <p>Homelessness Prevention Manager/ Accommodation Team Leader</p> <p>Accommodation Team Leader/ Landlord Liaison Officer</p> <p>Accommodation Team Leader/</p>	

		properties available and reduced number of applicants in emergency/temporary accommodation		Landlord Liaison Officer	
Offering targeted preventions for the most vulnerable – through the provision of agreed pathways into support	Support education and awareness initiatives for young people to highlight the reality of becoming homeless	Develop a Sevenoaks District schools Homelessness Prevention Project	Year 2	Homelessness Prevention Manager/ Housing Advice Team Leader/ Accommodation Team Leader <i>Partners:</i> <i>Kent County Council</i> <i>CAB</i>	
	Jointly manage and review key Duty to Refer pathways for those leaving hospital and Care Leavers teams, to improve interventions for the most vulnerable customers	Reduced numbers of 18 to 25 year old homeless applicants Embedded pathways for those leaving hospital and Care Leavers reducing the numbers in emergency and temporary accommodation	Ongoing Year 2	Homelessness Prevention Manager/ Housing Advice Team Leader Homelessness Prevention Manager/ Housing Advice Team Leader <i>Partners:</i> <i>West Kent Housing Association</i> <i>Kent County Council</i>	

	Develop pathways for prison leavers and those in the criminal justice system through the Accommodation for Ex-Offenders (AFE0) funding	Jointly funded HERO Resettlement Officer in post (funded by AFE0 funding) Reduced number of prison leavers entering emergency and temporary accommodation	Year 2	Housing Advice Team Leader/ Housing Pathway Coordinator Housing Advice Team Leader/ Housing Pathway Coordinator	
	Agree joint working pathways with Children's Services for families who may be intentionally homeless, to minimise the impact of homelessness on these households	Reduced number of intentionally homeless families with children in emergency and temporary accommodation	Year 2	Homelessness Prevention Manager/ Housing Advice Team Leader	

Theme 2: Intervention					
Objective	Action	Success Criteria and Outcomes	When	Lead Officer/Team Responsible	Progress
Tackling rough sleeping - continue supporting the County wide approach to reducing harm and addressing associated multiple, complex needs	Work with key delivery partners to deliver a programme of support and initiatives, as part of the Rough Sleeper Initiative 5 funding	Agreed funding framework for rough sleeping services to sustain initiative for next 3 years	Year 1 to 3	Head of Housing/ Homelessness Prevention Manager <i>Partners:</i> <i>Porchlight</i> <i>CAB</i>	
	Develop a District wide support and accommodation approach for customers with the most complex support needs	An established multi-disciplinary team/hub where multiple complex needs cases across the District are managed in one place Reduced number of households with multiple complex need cases in emergency and temporary accommodation	Year 1 and ongoing Ongoing	Homelessness Prevention Manager/ Housing Advice Team Leader Homelessness Prevention Manager/ Housing Advice Team Leader/ Accommodation Team Leader	
	Continue to use capital and revenue	Completed refurbishment of the		Homelessness Prevention Manager/	

	<p>grants from DLUHC and Homes England, to provide dedicated move on accommodation for former rough sleepers and work collaboratively with relevant partners (for example, West Kent Housing Association and Look Ahead) to ensure the success of those placements</p>	<p>West Kent Housing Association owned Vine Court Road and Orchard Close properties, funded by the Rough Sleeper Accommodation Programme capital grant round</p> <p>Support services within the Rough Sleeper Accommodation Programme revenue grant agreed and in place for Vine Court Road and Orchard Close</p> <p>Reduced numbers of rough sleepers</p>	<p>Year 1 and 2</p> <p>Ongoing</p>	<p>Housing Advice Team Leader/ Housing Pathway Coordinator</p> <p>Homelessness Prevention Manager/ Housing Advice Team Leader</p> <p>Homelessness Prevention Manager/ Housing Advice Team Leader/ Housing Pathway Coordinator</p> <p><i>Partners: Porchlight</i></p>	
	<p>Engage with the voluntary sector and</p>	<p>Established District wide homelessness</p>	<p>Year 1 and ongoing</p>	<p>Head of Housing/ Homelessness Prevention Manager/</p>	

	<p>statutory agencies to target and deliver support where it is needed most and make best use of their well established working relationship with this group</p>	<p>forum for relevant for relevant partners</p> <p>Joint plan with voluntary groups for delivering Severe Weather Emergency Protocol (SWEP) responses and winter night shelters, in place</p> <p>Support rough sleepers and the wider street community by addressing their vulnerability and wider impact on community safety issues</p>	<p>Ongoing</p> <p>Ongoing</p>	<p>Housing Advice Team Leader/ Accommodation Team Leader</p> <p><i>Partners:</i> <i>Porchlight</i> <i>West Kent Housing Association</i> <i>CAB</i></p> <p>Homelessness Prevention Manager/ Housing Advice Team Leader/ Housing Pathway Coordinator</p> <p>Homelessness Prevention Manager/ Housing Advice Team Leader/ Housing Pathway Coordinator</p> <p><i>Partners:</i> <i>Porchlight</i></p>	
Partnership working -	Strategic commitment to	An established multi-disciplinary team/hub	Ongoing	Homelessness Prevention Manager/	

maximise the effectiveness of joint working and pathways for at risk groups	partnership working across various multi-agency panels and forums to find solutions in the most complex of individual cases	where multiple complex needs cases across the County are managed in one place Reduced number of multiple complex needs cases in emergency and temporary accommodation	Ongoing	Housing Advice Team Leader/ Housing Pathway Coordinator Housing Advice Team Leader/ Accommodation Team Leader/ Housing Pathway Coordinator	
	Strategic commitment to close working with Kent Districts and Boroughs to minimise duplication, pool resources and reduce costs	Regular attendance at the Kent Homelessness Officers Group	Ongoing	Homelessness Prevention Manager/ Housing Advice Team Leader	
	Continue with consortium applications for grant funding wherever possible, to help maximise funding successes	Successful joint bids with other Kent authorities for future funding opportunities	Year 1 to 5	Homelessness Prevention Manager/ Housing Advice Team Leader/Accommodation Team Leader	
	Contribute to County wide efforts to improve	Enhanced housing options to support for	Ongoing	Homelessness Prevention Manager/	

	services and options for victims of domestic abuse	<p>victims of domestic abuse</p> <p>Domestic Abuse Housing Coordinator in post and in attendance at MARAC</p> <p>West Kent Domestic Abuse Forum continues to meet</p>	<p>Ongoing</p> <p>Ongoing</p>	<p>Housing Advice Team Leader</p> <p>Homelessness Prevention Manager/ Housing Advice Team Leader</p> <p>Homelessness Prevention Manager/ Housing Advice Team Leader</p>	
<p>Temporary housing provide a good quality, safe, secure, value for money accommodation portfolio and reduce the use of emergency placements</p>	<p>Review existing emergency and temporary accommodation provision to ensure value for money across the portfolio</p>	<p>Reduced average cost of emergency per unit</p> <p>Quality portfolio of temporary accommodation properties to better meet a wide range of applicants housing needs in place</p> <p>Continue to optimise the use of West Kent Housing Association and Moat Housing stock as temporary</p>	<p>Ongoing</p> <p>Ongoing</p>	<p>Homelessness Prevention Manager/ Housing Accommodation Team Leader</p> <p>Homelessness Prevention Manager/ Housing Accommodation Team Leader</p> <p><i>Partners:</i> <i>West Kent Housing Association</i></p> <p>Homelessness Prevention Manager/ Housing Accommodation Team Leader</p>	

		accommodation, over and above emergency short term placements			
	Review the Allocation Policy and make the best use of existing social housing stock	Allocation Policy updated, consulted, and approved Reduced void turnaround process between the Council and our partner Housing Associations	Year 1	Homelessness Prevention Manager/Accommodation Team Leader Homelessness Prevention Manager/Accommodation Team Leader/partner Housing Associations	
Rehousing - establish a range of sustainable housing and move on options for homeless households	Ensure cohesive approach to private rented sector procurement and lettings of Assured Shorthold Tenancies and leased properties	Greater range of sustainable move on options for homeless households delivered	Ongoing	Accommodation Team Leader/Landlord Liaison Officer	
	Work with partners in Kent County Council to ensure the commissioning and best use of supported accommodation across the County	Reduce numbers of applicants in emergency accommodation awaiting move on to supported accommodation	Ongoing	Head of Housing/ Homelessness Prevention Manager <i>Partners: West Kent Housing Association</i>	
	Accelerate the delivery of new	Suitable affordable homes delivered in the	Ongoing	Chief Officer, People and Places	

	affordable housing, as part of Quercus Housing and in partnership with the Council's strategic development team, developers and registered providers	District to address housing need			
	Ensure the Allocation Policy balances the needs of homeless and housing register applicants and review existing applications	Revision of Allocation Policy complete and Housing Register list up to date	Year 1	Homelessness Prevention Manager/Accommodation Team Leader	
	Make best use of Disabled Facilities Grants to provide suitable adaptations across the public and private sector and a review of needs undertaken as part of the new Private Sector Housing	More residents continuing to live independently and Disabled Facility Grants statistics reflected in homelessness prevention outcomes	Ongoing	Private Sector Housing Team Leader	

	Assistance Policy 2025-2030				
	Undertake regular assessments of housing need to inform delivery plans for new homes	Comprehensive housing needs assessment completed in partnership with the Planning Policy Team as part of Housing Strategy 2022-2027	TBC	Housing Strategy Manager/ Housing Enabling Officer	
Support – deliver effective services to help customers maintain accommodation once housed.	Provide the HERO and One You services to bridge the gap between health, homelessness and employment/skills	Increase in homelessness preventions	Year 1	Homelessness Prevention Manager/ HERO Team Leader	
	Develop a standalone Tenancy Readiness package to support homeless applicants in specific areas of independent living and tenancy sustainment	Tenancy readiness package developed and implemented	Year 1 and ongoing	Homelessness Prevention Manager/ HERO Team Leader	

Theme 3: Sustainable Solutions					
Objective	Action	Success Criteria and Outcomes	When	Lead Officer/Team Responsible	Progress
Ensure that the emerging Local Plan contains policies that optimise the delivery of a range of affordable homes through the planning system	Local Plan policies drafted	Included in Reg 18 consultation Local Plan adopted by Full Council (following examination)	Year 1 – 12/2022	Housing Enabling Officer/ Planning Policy Officer	
Explore the scope for a managed increase in Quercus Housing's delivery outputs	Develop a scoping paper for Purchase and Repair acquisitions to provide family sized affordable rent and/or temporary accommodation within the District	Revised Business Plan adopted by Quercus Housing Guarantor Board	Annually	Chief Officer, People and Places	
Continue to work with the Rural Housing Enabler (Rural Kent), Parish	5 year programme of local needs surveys undertaken	All Town and Parish Council areas surveyed	Year 3 – 6/2025	Housing Enabling Officer	

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<p>Councils and community groups to undertake a programme of local housing needs surveys across the District and to facilitate the delivery of new rural exceptions housing where needs are identified</p>	<p>Assistance provided to facilitate delivery of new local needs housing</p>	<p>At least 30 new local needs homes delivered during the Housing Strategy period, subject to planning approval</p>	<p>Ongoing</p>	<p>Housing Enabling Officer</p>	
<p>Include provisions in the emerging Local Plan to deliver accessible and wheelchair adapted housing</p>	<p>Policies included in new Local Plan to ensure new homes meet the needs of older and disabled households</p>	<p>Policies included in Local Plan Reg 18 consultation and onwards</p>	<p>Year 1 - 12/2022</p>	<p>Housing Enabling Officer/ Planning Policy Officer</p>	
<p>Within the existing Registered Provider stock, seek to refurbish, extend, or</p>	<p>Work with West Kent Housing Association and other Registered Providers to facilitate the best use of the existing</p>	<p>Planning applications submitted for remodelling of stock</p>	<p>Ongoing</p>	<p>Housing Strategy Manager/ Housing Enabling Officer</p>	

repurpose existing dwellings to make better use of them	stock, including the remodelling of social housing schemes that are no longer fit for purpose				
Seek to introduce an enhanced rightsizing incentive scheme for social housing tenants	Subject to agreement with partner Registered Provider's and approval of the use of Section 106 affordable housing commuted sum funding, a rightsizing incentive scheme (including an officer to coordinate the scheme), developed and submitted for approval	Scheme approved by Cabinet	Year 1 – 2/2023	Homelessness Prevention Manager/ Accommodation Team Leader/ Changing Spaces Officer <i>Partners:</i> <i>West Kent Housing Association</i>	
Support owners of empty homes through the Council's membership of	Development of a new Empty Homes Strategy and Action Plan	Empty Homes Strategy and Action Plan approved, and empty homes brought back into use and	Year 1	Housing Strategy Manager/ Empty Homes and Efficiency Officer	

<p>Kent No Use Empty, to create a downward trend in the number of long term empty homes</p>		<p>provided as affordable housing wherever possible</p>			
<p>Create a coalition of temporary and move on accommodation landlords to provide sustainable, reliable, cost effective temporary accommodation</p>	<p>Work with Kent Housing Group to ascertain emergency accommodation charges from private providers across the County and seek consistency</p> <p>Review all emergency accommodation providers used by the Council and develop a preferred provider list</p>	<p>Consistency of charging for temporary accommodation across Kent</p> <p>List of preferred providers in place based on suitability/affordability</p>	<p>Year 1 and 2</p> <p>Year 1 and 2</p>	<p>Head of Housing/ Homelessness Prevention Manager</p> <p>Homelessness Prevention Manager/ Accommodation Team Leader/ Housing Strategy Manager</p>	

<p>Provide regular Landlord Forums to ensure relationships with local private rented sector landlords are strengthened and to maximise the potential for the placement of homeless households into long term housing solutions</p>	<p>Provide regular Landlord Forum events for private sector landlords</p> <p>Develop support pages for landlords on our website, to increase landlord engagement and to highlight any new incentives available</p> <p>Investigate the provision of web alerts so that landlords are notified of updates</p>	<p>Events held</p> <p>Website updated and reviewed every 6 months</p> <p>If feasible, web alerts implemented to subscribing landlords</p>	<p>Bi-annually</p> <p>Year 1 and ongoing</p> <p>Year 1</p>	<p>Head of Housing/ Housing Accommodation Team Leader</p> <p>Housing Accommodation Team Leader</p> <p>Housing Accommodation Team Leader</p>	
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Equality Impact Assessment – Appendix C

This template should be completed alongside proposals that will be subject to decision by Councillors.

Summary of decision to be made:	Adoption of the Homelessness and Rough Sleepers Strategy 2023-2028		
Lead Officer (job title):	Head of Housing		
Date the final decision is due to be made:	21/02/2023	Date this assessment commenced:	05/01/2023
Is the decision relevant to the aims of the Public Sector Equality Duty?			Yes / No
Eliminate discrimination, harassment and victimisation			Yes / No
Advance equality of opportunity			Yes / No
Foster good relations			Yes / No
If the answer is yes to any of the above, proceed with the assessment. If the answer is no, please say why and summarise any evidence:			
For each of the following characteristics, summarise any existing data, consultation activity, interpretation of the impacts and actions that can be taken to reduce or mitigate any negative impacts:			
Characteristic:	Data and consultation	Summary of impact	Actions
Disability	<p>Targeted Review of Local Housing Needs 1/2022, Sevenoaks District Housing Strategy 2022 - 2027, Homelessness Review 8/2022, public consultation 9/12/2022 to 5/1/2023.</p> <p>In deciding if a customer group would or might be disadvantaged by this Strategy, we based our conclusions on the following:</p> <ul style="list-style-type: none"> Monitoring evidence where this was available, in particular the evidence from the data collected by the homelessness services. Information about housing needs and barriers to receiving homelessness services faced by particular groups, drawn from local and national organisations and available research and guidance from governmental, academic and other sources. 	Ensures there is a robust evidence base to inform decisions on affordable housing and other housing needs in order to improve access to affordable housing and housing options.	WKEP Aim: Other actions as a service provider
Carers	As above.	As above.	

			WKEP Aim:Other actions as a service provider
Race	As above.	As above.	WKEP Aim:Other actions as a service provider
Gender	As above.	As above.	WKEP Aim:Other actions as a service provider
Age	As above.	As above.	WKEP Aim:Other actions as a service provider
Religion / Belief	As above.	As above.	WKEP Aim:Other actions as a service provider
Sexual Orientation	As above.	As above.	WKEP Aim:Other actions as a service provider
Pregnancy / Maternity	As above.	As above.	WKEP Aim:Other actions as a service provider
Marital or Civil Partnership Status	As above.	As above.	WKEP Aim:Other actions as a service provider
Gender reassignment	As above.	As above.	WKEP Aim:Other actions as a service provider
Summary of impacts : (to be included in committee reports)	<p>Under the Public Sector Equality Duty (section 149 of the Equality Act 2010) to have due regard to (i) eliminate unlawful discrimination, harassment and victimisation and other conduct prohibited by the Equality Act 2010, (ii) advance equality of opportunity between people from different groups, and (iii) foster good relations between people from different groups. The impact has been analysed and does not vary between groups of people.</p> <p>The decisions recommended through this paper will</p>		
Please tick the outcome of this assessment:	No impact X	Adjust the policy	Continue the policy
Date assessment will be reviewed:	01/04/2024		

2023-24 DRAFT HEALTH & WELLBEING ACTION PLAN

HOUSING & HEALTH ADVISORY COMMITTEE - 7 February 2022

Report of: Chief Officer People & Places

Status: For Approval

Also considered by: Cabinet 16 March

Key Decision: Yes

Executive Summary: The 2023-24 Sevenoaks District Health & Wellbeing Action Plan is set out to deliver against health targets.

This report supports the Key Aim of: Community & Corporate Plan

Portfolio Holder: Cllr. Maskell

Contact Officer(s): Jolanda Gjoni, Ex 7121 & Kelly Webb, Ext. 7474

Recommendation to Cabinet:

To approve the 2023-24 Sevenoaks District Health & Wellbeing Action Plan.

Recommendation to Housing & Health Advisory Committee

To recommend to Cabinet that the 2023-24 Sevenoaks District Health & Wellbeing Action Plan be approved.

Introduction and Background

- 1 Originally the HAT (Health Action Team) had not meet since 2018 -. The new plan was drafted in 2019 and went through a process, however it was not put into action, mainly due to the pandemic.
- 2 In May 2021 we was asked by the Portfolio Holder to put this into place and reinstate the HAT but to include Wellbeing, we had an initial meeting with partner organisations and developed the action plan. Due to us being approximately 2 months behind of the start date (April 2021) it was agreed that partners would work on this one through the meetings rather than wait for the following year as we had missed the Cabinet process.
- 3 Since that time we have now developed a yearly one with partners. In December 2022 we held a workshop with partners to develop a new action plan against 4 priorities.

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- 4 This plan has double the actions of the current one and has a lot of focus on mental health and issues around cost of living and health.
- 5 The plan will be monitored on a quarterly basis by the Partnership

Key Implications

None to SDC. It is a Partnership document

Legal Implications and Risk Assessment Statement.

None

Equality Assessment

The decisions recommended through this paper have a remote or low relevance to the substance of the Equality Act. There is no perceived impact on end users.

Net Zero Implications

The decisions recommended through this paper have a remote or low relevance to the council's ambition to be Net Zero by 2030. There is no perceived impact regarding either an increase or decrease in carbon emissions in the district, or supporting the resilience of the natural environment

Wellbeing

This document supports wellbeing and looks at this throughout the document.

Conclusions

For the Committee to approve the report

Appendices

Appendix A - Draft 2023-24 Health & Wellbeing Action Plan

Background Papers

None

Sarah Robson

Deputy Chief Executive and Chief Officer - People & Places



Sevenoaks District Health & Wellbeing Action Plan

1 April 2023 – 31 March 2024

Sevenoaks District Health and Wellbeing Action Plan 2023-24

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Sevenoaks District Profile

Population

According to the Office of National Statistics (2018 subnational population projections) Sevenoaks District has a population of 121,400.

Population by age group, Mid 2020 - Sevenoaks

Source: ONS Mid-Year Estimates

Sevenoaks	Total Persons		Males		Females	
	No.	% Of total population	No.	%	No.	%
All People	121,400	100%	58,800	100%	62,600	100%
0-15	24,600	20.3%	12,600	21.4%	12,000	19.2%
16-64	70,500	58.1%	34,300	58.4%	36,200	57.8%
65+	26,300	21.6%	11,900	20.2%	14,400	23.0%

Using this data, we can see that Sevenoaks District population is expected to rise:

Population forecasts - Sevenoaks - 2021-2041

	Total	0-15	16-64	65+
2026	129,100	25,100	75,400	28,600
2031	136,800	25,700	79,600	31,500
2036	144,300	27,000	83,200	34,100
2041	151,000	28,800	86,400	35,800

The data from the Office of National Statistics breaks down projected population growth by age group. This information forecasts demographics where we are most likely to see a growth in population.

Age Group	2019 Population	2025 Population		2030 Population		2035 Population		2040 Population	
		Number	% increase from 2019	Number	% increase from 2019	Number	% increase from 2019	Number	% increase from 2019
0-19	29,083	29,881	2.7%	29,303	0.75%	28,593	-1.69%	28,668	-1.43%
20-34	17,315	16,467	-4.9%	16,489	-4.77%	17,103	-1.23%	17,853	3.11%
35-49	23,834	24,644	3.4%	25,218	5.81%	25,054	5.12%	24,064	0.96%
50-64	24,553	25,276	2.9%	24,922	1.5%	24,879	1.33%	25,709	4.71%
65+	26,044	27,728	6.5%	29,887	14.76%	31,889	22.44%	33,149	27.28%
All Ages	120,829	123,996	2.6%	125,818	4.13%	127,518	5.54%	129,442	7.13%

As is evident from the table above, it is projected that, in the years to come, the population of Sevenoaks will increase, however it is in our older population that we will expect to see the greatest annual growth. With this information, it is important to ensure that we have services in Sevenoaks District which can cater to the needs of this growing population of older residents, but also that we are implementing health improvement services so that we can prevent the onset of ill-health in older populations for as long as possible.

Diversity

The 2011 Census data indicates that Sevenoaks District is relatively homogenous with 95.8% of the District being of a White ethnic background and 4.2% of the population being of a Black, Asian and Minority Ethnic (BAME) background. This varies between different wards in Sevenoaks District from 1.8% of the population of Cowden & Hever to 9.6% of the population of Swanley St Mary's (ONS, 2011). Across all households, the 2011 Census data indicates that 3.7% may have some residents who do not speak English as their main language, this is particularly noted in Brasted, Chevening and Sundridge (2%). It may therefore be important to be mindful of how we promote our health improvement services so we can ensure an equitable opportunity of access to these services.

Health

The Local Authority Health Profile (2019) for Sevenoaks states that generally, the health of people in Sevenoaks is better than the England average. Sevenoaks is one of the 20% least deprived districts/unitary authorities in England, however about 12% (2,500) children live in low-income families. Life expectancy for both men and women is higher than the England average, however a difference in Life expectancy is observed across wards in Sevenoaks, with men living on average 3.1 years less and women living 1.8 years less in the most deprived areas of Sevenoaks than in the least deprived areas.

Looking at child health, obesity rates in children in Year 6 stand at 14.9%, better than the average for England. The rate for alcohol-specific hospital admissions among those under 18 is 12*, better than the average for England. This represents 3 admissions per year. Levels of teenage pregnancy and GCSE attainment (average attainment 8 score) are better than the England average.

In adults, the rate for alcohol-related harm hospital admissions is 479*, better than the average for England. The rate for self-harm hospital admissions is 154*, better than the average for England. Estimated levels of excess weight in adults (aged 18+), smoking prevalence in adults (aged 18+) and physically active adults (aged 19+) are better than the England average. The rates of new sexually transmitted infections and new cases of tuberculosis are better than the England

average. The rates of statutory homelessness, violent crime (hospital admissions for violence), under 75 mortality rates from cardiovascular diseases and under 75 mortality rates from cancer are better than the England average.

However, the rate of killed and seriously injured on roads is worse than the England average as well as the estimated diabetes diagnosis rate and estimated dementia diagnosis rate. In addition, the percentage of smoking during pregnancy is slightly higher than the regional value, children in relative low-income families (under 16s), is relatively low but increasing and the percentage of people in employment is worse than the regional and national averages, as well as smoking status at time of delivery. Other indicators such as emergency hospital admissions due to falls in people aged 65 and over are worse than regional and national rates.

Health Inequalities

“Health inequalities are unfair and avoidable differences in health across the population, and between different groups within society. Health inequalities arise because of the conditions in which we are born, live, work and age. These conditions influence our opportunities for good health, and how we think, feel and act, and this shapes our mental health, physical health and wellbeing” NHS England.

As we have already noted there is a 9-year age gap in the life expectancy of males and females living in different wards in Sevenoaks. It is believed that the deprivation of an area could have a major contributing impact on the health outcomes of residents.

Deprivation

The Indices of Multiple Deprivation 2019 indicates that there are seven Lower Super Output Areas in Sevenoaks District that are ranked within the top 40% of Deprivation nationally, two of those are ranked within the top 20% of Deprivation nationally. We understand that residents living in the lowest areas of deprivation often have limited resources to manage life’s pressures and are therefore more at risk of ill health resulting from poor health behavioural choices. As with the socio-economic data previously presented, it is important to ensure that health improvement services are reaching and are accessible to our most at risk populations.

Sevenoaks Ward	LSOA Code	LSOA Name	Deprivation Score (deciles)
Swanley St Mary's	E01024476	Sevenoaks 002A	2
Swanley St Mary's	E01024477	Sevenoaks 002B	2
Swanley White Oak	E01024480	Sevenoaks 002D	3
Swanley White Oak	E01024482	Sevenoaks 002F	3
Swanley White Oak	E01024481	Sevenoaks 002E	4
Hartley and Hodsell Street	E01024444	Sevenoaks 004D	4
Edenbridge South and West	E01024429	Sevenoaks 014E	4

Unless otherwise referenced, the information listed above was sourced from the Kent Public Health Observatory or the Kent County Council District Profiles The information referenced above was sourced from the Kent County Council District Profiles (2021).

Sevenoaks District health and wellbeing strategy:

This Health and Wellbeing Action plan aims to address the health focused priorities and actions outlined within the Sevenoaks District Community Plan (2022-25).

As outlined within the Sevenoaks Council Plan, wellbeing “runs through everything we do...”. “Wellbeing” is a unifying factor that underpins all the work we do for our residents.

Wellbeing isn’t just about access to health services. It’s about quality of life: doing all we can to provide suitable homes for people to live in, a safe, healthy and protected environment and a strong local economy that provides the jobs and services we need. It’s about our lifestyle choices and opportunities to plan our future, and services that keep people living independently for longer. It looks at Cost of Living and Mental Health and has factors on how to help residents with this through the work of Sevenoaks District Council and our Health Partners.

It’s about playing our part in how and where we live, work and play is the best it can be.

The Council Plan outlines our ambitions for the communities we serve.

- We will continue to deliver excellent services, to the highest quality, always ensuring the very best value. Wellbeing will be the focus of everything we do.
- This means that we want our residents to lead long, happy and healthy lives, and our businesses to thrive and prosper.
- It means working to ensure our communities have suitable homes to live in, within a safe, healthy and protected environment, and supporting a strong local economy that provides the jobs and services we need
- We will enhance wellbeing by supporting people, supporting the economy, improving the environment and developing stronger communities
- We will implement measures through our strategies and plans that have a positive impact on wellbeing
- We treat each person we contact attentively, respectfully and as an individual.

SDC COMMUNITIES AND HEALTH TEAM COMMUNITIES AND HEALTH TEAM are committed to ensuring wellbeing runs through all of the things we do, set out through each of five themes:

- 1. The high-quality environment of the District plays a pivotal role in the wellbeing of our residents. Our focus remains on protecting the very special environment of the District. The number of homes we should be building to meet future demands is a huge challenge in an area predominantly Green Belt and Area of Outstanding Natural Beauty. Yet we know there are many families and young people in particular who need a home of their own or more space to grow. Failure to provide this would put our economy and our communities at risk.*
- 2. The District’s economy will always be hugely influenced by our proximity to London. As the economy changes new jobs will be created and skills required. We will support businesses and residents through the transition ahead, with our tailored support for businesses and focus on our towns and rural economies and new opportunities for training.*

3. The availability of affordable housing is the single biggest issue facing the future of the District. With the link between housing and health well known the need to provide the right homes for the future of the District has never been greater. To achieve this, we will start to build homes for the first time in 30 years.

4. We are fortunate to live in one of the safest places in the country, but we understand we will need to continue to work with our communities and partners to maintain this. Supporting our outstanding voluntary and community groups in their work with the most isolated and vulnerable residents in the district will continue to be a priority.

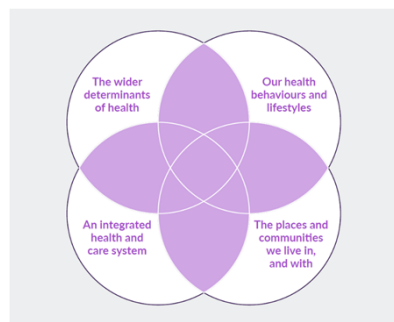
5. We will deliver first class health prevention in our District. This means residents will have access to the most appropriate support when they need it. We will do this by linking our leisure facilities, housing, open spaces, planning and environmental health work together. So, we need to increase our resilience, and look at long term, sustainable solutions with our residents, alongside those changes we can make straight away. This means nurturing our financial self-sufficiency, growing our partnerships and providing even better service to our customers, residents and businesses.

Sevenoaks District Health & Wellbeing Action Plan 2023-2024

The 2023-2024 Health & Wellbeing Action Plan will build upon the previous Sevenoaks District Health & Wellbeing Action Plan (2022-23). To effectively address the health needs of residents we will be responsive to the Health Intelligence data we have from a number of different sources. It also highlights new concerns such as cost of living and mental health.

The actions raised in this Action Plan aim to take a population health approach. This is defined as “An approach aimed at improving the health of an entire population. It is about improving the physical and mental health outcomes and wellbeing of people within and across a defined local, regional or national population, while reducing health inequalities. It includes action to reduce the occurrence of ill health, action to deliver appropriate health and care services and action on the wider determinants of health. It requires working with communities and partner agencies. (Buck et al 2018, p 18).

Figure 2 - A population health system



Source: Buck et.al/2018

Source: Buck et.al., (2018).

This Action Plan recommends concentrating on the first three of four pillars of action:

Pillar 1: The Wider Determinants of Health

The wider determinants of health: these are the most important driver of health. In addition to income and wealth, these determinants include education, housing, transport, leisure and safety.

For Sevenoaks District the average life expectancy for males is 82.1 years, which is better than the England value of 79.4 years. For females, the average life expectancy is 84.2 years, which again is better than the England value of 83.1 years. There has been a slight reduction in life expectancy in Sevenoaks and England by comparison to previous data collected. However, this only tells a proportion of the story.

For males, there is an 8-year age gap dependant on where in Sevenoaks you are born, this is noted between Sevenoaks Northern (79.4 years) and Cowden and Hever (87.4 years). Sevenoaks Northern (79.4 years) is the only area in the Sevenoaks District where life expectancy in males is lower than the England value.

For Females, there is also a 9-year age gap noted between Swanley White Oak (81.3 years) and Seal and Weald (90.3 years). Farningham, Horton Kirby and South Darenth (82.8 years) is the only other area in Sevenoaks where the life expectancy in women is less than the England average. Listed below are selected impacts of wider determinants on health and public services:

Income

Evidence shows that income plays three roles in determining health: managing on a low income is stressful, which has physiological impacts on the body and its regulatory systems; a low income is related to unhealthier behaviours (emerging neuroscience suggests that this is due to changes in how people make decisions); and income gives us the ability to buy health-improving goods (from food to exercise equipment). We know that cost of living has had a big impact over the past year, which also affects mental health and the Council has been working hard to help residents with information and funding. This information can be found at www.sevenoaks.gov.uk

Poor health can also lead to a low income (reverse causation). For example, it can prevent people from taking paid employment, while poor childhood health can affect educational outcomes and therefore future earnings.

Income deprivation affecting children index (IDACI, 2019) shows us the variance that exists within the district between different wards in Sevenoaks. The England equivalent value is 17.1% of children are affected by income deprivation, in Sevenoaks District; Edenbridge South and West (17.1%), Swanley White Oak (28.6%) and Swanley St Mary's (32%) are equivalent to or higher than the England equivalent value. Targeted work with Children and Young people in these areas should receive concerted and prolonged attention in order to ensure that they are able to achieve equivalent opportunities for development as other young people in Sevenoaks District despite the financial challenges they experience every day.

Poorer children have worse cognitive, social-behavioural and health outcomes independent of other factors that have been found to be correlated with child poverty (for example, household and parental characteristics). Children growing up in disadvantaged circumstances have a higher risk of death in adulthood across almost all conditions that have been studied, including mortality as a result of stomach cancer, lung cancer, haemorrhagic stroke, coronary heart disease, respiratory-related problems, accidents and alcohol-related causes.

The older people in poverty: Income deprivation affecting older people index (IDAOPI, 2019) highlights the differences that exist between wards in Sevenoaks District from Halstead, Knockholt and Badgers Mount (4.1%) and Swanley St Mary's (15.4%). Swanley White Oak and Swanley St Mary's represent the only two wards where residents are at greater risk of income deprivation by comparison to the England average.

Housing

There are more than 2 million visits to accident and emergency (A&E) departments every year by children following an accident in or around the home. Death rates rise 2.8% for every Celsius degree drop in the external temperature for those in the coldest 10% of homes, compared with 0.9% in the warmest homes. Excess winter deaths

This rate indicates the number of deaths that occur during the winter that would not have been usually expected throughout the course of the year. They are generally associated with the reduced temperature and our older residents who are more adversely affected by fuel poverty and medical conditions that result from lower temperatures.

In Sevenoaks District, we can see a rate of 15% (ONS, 2018-19) which is statistically similar to the England rate of 15.1%. With a growing older population, it will become increasingly important to make sure our older Sevenoaks residents are able to stay well each winter and have the resources they need to keep a warm, safe home.

Environment

In the UK, air pollution is estimated to contribute to the early deaths of around 40,000 people a year. Areas with more accessible green space are associated with better mental and physical health among the local population and with reducing the impact of income inequalities on health.

Transport

Each year, traffic accidents cause around 250,000 casualties and kill almost 3,000 people. Those living in the most-deprived areas have a 50% greater risk of dying from a road accident compared with those in the least-deprived areas. Cycling to work reduces the relative risk of mortality by almost 40% through reducing the risk of cardiovascular disease and obesity and improving general health, and results in lower absenteeism.

Education

Four more years of education reduces mortality rates by 16% – equivalent to the life-expectancy gap between men and women – and reduces the risk of heart disease and diabetes. Those with less education report being in poorer health. They are more likely to smoke, to be obese and to suffer alcohol-related harm.

Work

Being unemployed is bad for people's health, leading to a higher rate of mortality (including from cardiovascular disease, lung cancer and suicide) and risk factors such as hypertension. It is also linked to poorer mental health and psychological wellbeing and a higher use of health care resources. Good-quality work is good for people's health through income and wider personal and social benefits. Meanwhile, 'poor-quality' work (for example, work that involves adverse physical conditions, exposure to hazards, a lack of control and unwanted insecurity) is bad for people's health.

Statistics from DWP (2020) helps us to identify which wards in Sevenoaks District are more likely to have residents in receipt of Universal Credit. The average for Sevenoaks District in 2016 was 1.9%. Focusing our attention on those with above average rates, we can identify the following areas:

- Swanley St Mary's (6.5%)
- Swanley White Oak (5%)
- Swanley Christchurch and Swanley Village (2.4%)
- Crockenhill and Well Hill (2.3%)
- Fawkham and West Kingsdown (2.3%)
- Farningham, Horton Kirby and South Darenth (2.2%)
- Edenbridge South and West (2.1%)
- Hextable (2%)
- Otford and Shoreham (2%)

It is estimated that residents of Penshurst, Fordcombe and Chiddingstone (12.4%) and Cowden and Hever (12.6%) are more likely than the England average (10.3%) to experience fuel poverty (PHE, 2018). Residents in Swanley St Mary's (3.4%) are more likely than the England average (2.8%) to be unemployed and claiming out of work benefit and 3.4 (per 1000) residents of Leigh and Chiddingstone Causeway are likely to be in long-term unemployment, which is more than the equivalent England rate (3.2 per 1000) (PHE 2019/20).

Pillar 2: Health behaviours and lifestyle

Health behaviours and lifestyle are the second most important driver of health. They include smoking, alcohol consumption, diet and exercise. For example, while reductions in smoking have been a key factor in rising life expectancy since the 1950s, obesity rates have increased and now pose a significant threat to health outcomes.

Healthy Life Expectancy

As well as life expectancy (how long the population could expect to live), it is also important to consider the quality of life or length of time spent in good health. This is referred to as healthy life expectancy. In 2017 to 2019, healthy life expectancy was 63.2 years for males and 63.5 years for females and has shown little improvement in recent years (Figure 14a). Females could expect to spend around 20 years in poor health, or 24% of their life. As male life expectancy is shorter, but males have similar healthy life expectancy to females, males could expect to spend fewer years in poor health (17 years), or 21% of their life.

In 2017 to 2019, the inequality gap in years spent in good health was even larger than the gap in life expectancy presented earlier. Differences in education, employment and living conditions and variations in social care and health services influence healthy life expectancy (76). The gap in healthy life expectancy between the most and least deprived areas in England (as measured by the SII) was 19 years for both females and males. Therefore, people in deprived areas had shorter life expectancy, spent fewer years in good health and also spent a larger proportion of life in poor health: 35% for females and 29% for males, compared with 18% and 15% in the least deprived decile. (Figure 14b)

The Health Profile for England 2021 (Public Health England 2021a) reports on the top 20 risk factors associated with morbidity (as measured by years of life lost) in England in 2019. High BMI, smoking and high fasting plasma glucose remain the leading causes in 2019 as they were in 1990. These are associated with

many of the most common physical causes of morbidity, including low back pain (often caused by pulled muscles, more common in lower paid jobs such as construction, healthcare or warehouse jobs), depressive disorders, diabetes, respiratory disease, and gynaecological diseases such as cancers etc.

The leading behavioural risk factor for mortality and morbidity in populations continues to be tobacco use, closely followed by alcohol consumption, drug use and dietary behaviours. The main metabolic risk factors combined for both mortality and morbidity are high Body Mass Index (BMI) and high fasting plasma glucose levels, followed by high systolic blood pressure (Appendix C).

20–64-year-olds represent around 54% of the Sevenoaks District Council population. As we age, our risk of developing health conditions increases, these may include (but not limited to); cardiovascular disease, stroke, high blood pressure, cancer, type 2 diabetes and Chronic Obstructive Pulmonary Disease (COPD). However, many of these conditions are preventable (or at the very least, delay-able), enabling our residents to live their healthiest lifestyle is crucial to this Health and Wellbeing Action Plan and as a result the data presented below will look at Health Behaviour and its impact on Health Conditions.

Adult Premature Mortality

The Kent Public Health Observatory allows us to view the premature (all causes) mortality rate (per 100,000 population) of under 75-year-olds when compared with the rest of Kent (2015-2017). As previously identified, we can see that the rate is not consistent in the Sevenoaks District with 100.73 persons per 100,000 in Penshurst, Fordcombe and Chiddingstone and 385.14 per 100,000 in Swanley White Oak. This perhaps contributes towards the variance in life expectancy we noted previously in the “Starting Well” section.

We can also view premature mortality by causative disease:

- Premature mortality from cardiovascular disease of under 75-year-olds when compared with the rest of Kent (2013-2017)
 - 17.58 (per 100,000) in Sevenoaks Kippington
 - 122.47 (per 100,000) in Swanley White Oak
- Premature mortality from cancer of under 75-year-olds when compared with the rest of Kent (2013-2017)
 - 42.66 (per 100,000) in Penshurst, Fordcombe & Chiddingstone
 - 149.17 (per 100,000) in Crockenham and Well Hill

Causes of mortality 65+

The Kent Public Health Observatory allows us to view the premature (all causes) mortality rate (per 100,000 population) of over 65-year-olds when compared with the rest of Kent (2015-2017). As previously identified, we can see that the rate is not consistent in the Sevenoaks District with 2480.7 persons per 100,000 in Halstead, Knockholt and Badgers Mount and 4946.02 per 100,000 in Sevenoaks Northern.

We can also view premature mortality by causative disease:

- Premature mortality from cardiovascular disease of over 65-year-olds when compared with the rest of Kent (2013-2017)
 - 81.46 (per 100,000) in Brasted, Chevening and Sundridge

- 1702.73 (per 100,000) in Sevenoaks Northern
- Premature mortality from cancer of over 65-year-olds when compared with the rest of Kent (2015-2017)
 - 429.62 (per 100,000) in Peshurst, Fordcombe & Chiddingstone
 - 1385.62 (per 100,000) in Hartley and Hodsell Street
- Premature mortality from respiratory disease of over 65-year-olds when compared with the rest of Kent (2013-2017)
 - 243.5 (per 100,000) in Seal and Weald
 - 901.29 (per 100,000) in Leigh and Chiddingstone Causeway

Adult Weight & Physical Inactivity

62.6% of Sevenoaks adults (18+) are classified as overweight or obese (PHE, 2019/20). This is similar to the England score of 62.8%. Living with excess weight is caused by consuming more calories, particularly those in fatty or sugary foods, than your body requires. Obesity causes physical changes and can lead to a number of serious and life-threatening medical conditions, including type 2 diabetes, coronary heart disease, some types of cancer and stroke (among many others, we now also understand the increased risk of COVID19 for people with a higher weight).

Being physically active increases the amount of calories our bodies need, so alongside a healthy balanced diet, is an effective way of creating a calorie deficit to promote weight loss. Additionally, being physically active can also lower our risk of many health conditions, including (but not limited to); diabetes, coronary heart disease, osteoarthritis, depression and dementia. The Active Lives Survey (2019/20) highlights that 70.1% of Sevenoaks adults are physically active (achieving at least 150 minutes of moderate intensity activity per week). This is statistically similar to the England score of 66.4% of adults.

Prevalence of medical conditions related to alcohol, weight and physical inactivity

There is significant overlap in the health conditions that result from higher risk alcohol consumption, living with excess weight and physical inactivity. Conditions have been grouped and presented below.

Heart Health

- Emergency hospital admissions from Cardiovascular Disease (2015/16-2017/18) range in Sevenoaks District from 429.12 (per 100,000) in Brasted, Chevening and Sundridge to 1077.65 (per 100,000) in Swanley Christchurch and Swanley Village.
- Coronary Heart Disease Prevalence (2015/16-2017/18) ranges in Sevenoaks District from 2.05% in Sevenoaks Eastern to 4.18% in Swanley St Mary's.
- Hospital admissions for Coronary Heart Disease (2015/16-2017/18) ranges in Sevenoaks District from 145.36 (per 100,000) in Sevenoaks Eastern to 472.1 (per 100,000) in Ash.
- Recorded Heart Failure prevalence (2015/16-2017/18) ranges in Sevenoaks District from 0.54% in Sevenoaks Eastern to 1.04% in Swanley St Mary's.
- Emergency hospital admissions for myocardial infarction (2013/14-2017/18) ranges in Sevenoaks District from 31.33 (per 100,000) in Sevenoaks Eastern to 145.92 (per 100,000) in Fawkham and West Kingsdown.

Stroke & Transient Ischaemic Attack (TIA)

- Stroke & TIA Prevalence (2015/16-2017/18) ranges in Sevenoaks District from 1.52% in Sevenoaks Eastern to 2.34% in Swanley St Mary's.
- Hospital admissions for Stroke (2013/14-2017/18) ranges in Sevenoaks District from 47.6 (per 100,000) in Seal and Weald to 211.93 (per 100,000) in Eynsford.

Diabetes

- Diabetes Prevalence (2015/16-2017/18) ranges in Sevenoaks District from 4.61% in Sevenoaks Eastern to 8.35% in Swanley St Mary's.
- Hospital admissions for Diabetes (2013/14-2017/18) ranges in Sevenoaks District from 30.31 (per 100,000) in Kemsing to 120.98 (per 100,000) in Hextable.
- The Diabetes diagnoses rate is 68.1% of those anticipated to have Diabetes (2018). This is below the England value of 78% and actions should be taken to improve the diabetes diagnoses rate in Sevenoaks District.

Hypertension (High Blood Pressure)

- Hypertension Prevalence (2015/16-2017/18) ranges in Sevenoaks District from 11.96% in Sevenoaks Eastern to 19.5% in Swanley St Mary's.

Children's Weight; Overweight and Obesity

The prevalence of overweight (including obesity) in Year 6 children are generally lower than the England average (28.9% in Sevenoaks and 35.2% in England, 2019/20). However, when we take a closer look at Sevenoaks, we can see the variance that exists across the District depending on where the child lives:

Excess weight in reception year children (ages 4-5) 2017/18-2019/20; a 19.9% difference in percentage likelihood exists between Seal and Weald (20.5%) and Hextable (30.4%).

- Obesity in reception year children (ages 4-5) 2017/18-2019/20; a 12.9% difference in percentage likelihood exists between Sevenoaks Northern (5.3%) and Crockenhill and Well Hill (18.2%).
- Excess weight in year 6 children (2017/18-2019/20); a 25.6% difference in percentage likelihood exists between Otford and Shoreham (15.4%) and Swanley St Mary's (41%).
- Obesity in year 6 children (2017/18-2019/20); a 21.63% difference in percentage likelihood exists between Sevenoaks Town & St John's (5.9%) and Swanley St Mary's (25.6%)

Excess weight and obesity is a multifaceted problem with many causes. However, breastfeeding for up to 6 months of a baby's life has links with reduced levels of obesity and cardiovascular disease for infant (and mother). Across Sevenoaks District we can see a wide range in the uptake rate in breastfeeding at the newborn visit (2016-2017), from Swanley White Oak (41.98%) to Penshurst, Fordcombe and Chiddingstone (84.71%). At the 6-8-week health visitor, check (2016-2017) the rate of breastfeeding decreases and we still see wide ranging disparity in uptake depending on where mother and infant live; Swanley St Mary's (23.81%) and Penshurst, Fordcombe and Chiddingstone (70%).

Solving the rise in obesity is a complex problem with many potential solutions; however perhaps one to investigate is around increasing the ability for our Sevenoaks District Mothers to sustain breastfeeding up to the recommended 6 months post birth. This should not however ignore the importance of other solutions such as adapting the living environment to ensure there are more healthy food outlets for young people and ensuring there is education for young people and the local community on the importance of making healthy food choices.

Alcohol consumption

Less than 14 units a week is generally considered to be low-risk drinking, however there is no “safe” level of alcohol consumption. Regularly drinking more than 14 units per week can lead to the development of many illnesses including certain cancers, stroke, heart disease, liver disease, brain damage etc.

Hospital Episode Statistics used by Public Health England highlight that in SDC COMMUNITIES AND HEALTH TEAM COMMUNITIES AND HEALTH TEAM there are 479 (per 100,000) hospital admissions (2018-2019) for alcohol specific conditions. This is better than the England value of 664 (per 100,000).

However, in SDC COMMUNITIES AND HEALTH TEAM COMMUNITIES AND HEALTH TEAM there are 24.8 (per 100,000) hospital admissions for under 18's (2017/18-2019/20) for alcohol specific conditions. This is similar to the England value of 30.7 (per 100,000). It is illegal for under 18's to purchase or be bought alcohol (unless accompanied by an adult as part of a table meal). Further work may be needed to ascertain what factors are contributing towards these hospital admissions. Alcohol consumption for under 18's can have a harmful effect on the normal development of vital organs and functions, including the brain, liver, bones and hormones, in addition to being associated with increased risks from violence, drug use, suicidal ideation and unplanned pregnancy. Further intervention maybe necessary to try to prevent the purchase of alcohol for under 18's in Sevenoaks District by working directly with the purveyors of alcohol in the District.

Smoking

Smoking prevalence in adults (aged 15+) is on a year-on-year decline in Sevenoaks and currently stands at 12.6% (NHS Digital 2019/20) which is better than the England value of 16.5%. However, we can still see higher prevalence in certain populations. In routine and manual occupations (ages 18-64) we can see a current smoking population of 15.1% (Annual Population Survey 2019) which is statistically similar to the England value.

Smoking is recognised to have a causative role in a wide number of health conditions, some of which are demonstrated below.

Smoking related mortality from:

- Lung Cancer (2017-19) 43.5 (per 100,000) which is better than the England value of 53 (per 100,000)
- Oral Cancer (2017-19) 2.8 (per 100,000) which is equal to the England value of 4.7 (per 100,000)
- COPD (2017-19) 38.4 (per 100,000) which is better than the England value of 50.4 (per 100,000)

Smoking related ill-health from:

- Emergency hospital admissions for COPD (2019-20) 327 (per 100,000) which is better than the England value of 415 (per 100,000)
- Lung Cancer registrations (2016-18) 59 (per 100,000) which is better than the England value of 77.9 (per 100,000)
- Oral Cancer registrations (2016-18) 12.3 (per 100,000) which is equivalent to the England value of 15 (per 100,000)

- Oesophageal cancer registrations (2016-18) 14.2 (per 100,000) which is equivalent to the England value of 15.4 (per 100,000)

With smoking prevalence decreasing, we can see the medical impact of smoking decreasing. Continued work in Smoking Cessation is needed to help facilitate a further reduction in Smoking within the Sevenoaks District perhaps with specific targets around higher prevalence populations.

Exposure to Tobacco

13.5% of Sevenoaks District Mothers are defined as “Smoking” at the point of delivery (2020/21 Smoking Status at time of delivery). This value is worse than the England value of 9.6%. Smoking during pregnancy presents a number of risks to the developing baby and increases the risk of sudden infant death syndrome and stillbirth, it is also associated with low birth weight. In Sevenoaks District we can see the ranging prevalence of low birth weight (2015-19) from 2.6% in Leigh and Chiddingstone Causeway to 7% in Sevenoaks Kippington and Edenbridge South and West.

Modelled estimates from 2014 highlight that smoking prevalence for young people (aged 15) varies from 3.9% in Swanley St Mary’s to 8.8% in Leigh and Chiddingstone Causeway.

Mental Health

It is believed that one in four adults and one in 10 children experience mental illness. Conditions can range from common (anxiety, depression) to more serious mental health conditions (psychoses, schizophrenia, bipolar affective disorder). In the Sevenoaks District we can see a slight change in the prevalence of serious mental health conditions, this ranges from 0.52% in Kemsing to 0.82% in Swanley St Mary’s.

With respect to hospital admissions for mental health conditions (2013/14-2017/18) we can also see a range of prevalence depending on the location in Sevenoaks District, from 97.84 (per 100,000) in Otford and Shoreham to 256.64 (per 100,000) in Swanley St Mary’s.

Hospital Episode Statistics (2019/20) highlight a rate of 187.5 (per 100,000) in Sevenoaks District for emergency hospital admissions for intentional self-harm. This is statistically similar to the England value of 192.6 (per 100,000).

Lastly, the 2018-20 suicide rate for Sevenoaks District is 8.7 per 100,000 for suicide. This is statistically similar to the England rate of 10.4 per 100,000. When we look at the difference between males and females, we can see that males have a rate of 9.2 per 100,000 which is better than the England rate of 15.9 per 100,000 and in females a rate of 8.4 per 100,000 which is worse than the England rate of 5.0 per 100,000.

Sevenoaks District Council’s Mental Health Strategy (2021) focuses of five priorities:

1. More people will have good mental health
2. More people with mental health problems will have good physical health
3. More people will have a positive experience of care and support
4. Fewer people will suffer avoidable harm
5. Fewer people will experience stigma and discrimination

The actions outlined within this action plan will aim to support the priorities outlined within the Mental Health Strategy (2021)

Pillar 3: Places and communities

Places and communities: Our local environment is an important influence on our health behaviours, and there is strong evidence of the impact of social relationships and community networks, including on mental health.

There is now a greater recognition of the importance of 'place' and that the communities in which we live shape our health. National and local policy that affects the health of the population, and the delivery of NHS, social care and other health impacting public services (such as housing and local planning decisions), all 'happen' in neighbourhoods, towns and cities. Furthermore, those around us, and our environments (for example, the accessibility of fast food, the quality of ambient air or how much advertising for alcohol we are exposed to), influence our health behaviours. Decisions at this level therefore have an impact on our health – one reason why local authorities and the roles they have are so important.

Good social relationships and support are protective of health, being associated with a reduced risk of premature mortality post-retirement. In size, the effect has been estimated to be comparable to the impact of stopping smoking on the risk of mortality. These factors have also been shown to have an impact on the development of and recovery from specific health problems such as heart disease (Kim et al 2014) and on wider wellbeing – participation in 'community assets' (for example, membership of community, resident, religious or other voluntary groups) is associated with a substantially higher quality of life.

The role of communities in supporting good mental health is critical, from help during a crisis through to wider public mental health support across the whole population and for at-risk groups, such as young girls and their risk of self-harm. We know that our place in social hierarchies and the wider role of communities (both negative and positive) are an important factor in the psychosocial pathways to mental health and wellbeing

There are many ways in which more community-centred approaches to health, wellbeing and public mental health can contribute to improving population health, from asset-based models that focus on a community's capabilities rather than its needs, to volunteering. The former approaches seek to identify and strengthen the assets within a community – such as associations, informal networks, skills and leadership – to help the community to have more control over the conditions that affect its health (The Health Foundation, 2021).

Ageing Well

People in England can now expect to live longer than ever before, but unfortunately, these additional years might not be spent in good health with many developing medical conditions that will affect quality of life. Sevenoaks is an ageing District, according to Kent County Council the number of people aged 65+ is forecast to rise by 14.76% by 2030. As such, supporting and enabling our older residents to stay fit and healthy is a major priority for Sevenoaks District.

There are some medical conditions that are more prevalent in the older generation, these include dementia, fall related hip fracture and winter death associated to poorly maintained, colder homes. With the anticipated population rise, it is important the Sevenoaks District is vigilant to the needs of our older residents and provides services that can address this potentially growing problem.

Life Expectancy at 65

2013-2017 data on Life Expectancy at 65 follows a similar trend to that noted in previous sections. A resident can expect to live for different amount of years depending on where they live. For males, this ranges from an additional 17.28 years in Swanley White Oak to 22.86 years in Halstead, Knockholt and Badgers Mount. For females, this ranges from an additional 19.98 years in Farningham, Horton Kirby and South Darenth to 27.95 years in Seal and Weald. The factors surrounding this may have been already identified in our “Living Well” section where we see higher rates of life limiting medical conditions caused by the uptake of negative health behaviours.

Cancer

Cancer (excluding non-melanoma skin cancer)

- Cancer Prevalence (2015/16-2017/18) ranges in Sevenoaks District from 2.58% in Sevenoaks Northern to 3.72% in Halstead, Knockholt and Badgers Mount.

KPHO also provides information on the Cancer screening rate respective of the different wards in Sevenoaks District. Once again, we can see variance in the uptake rates dependent on where the client resides in Sevenoaks:

- Bowel Cancer Screening (aged 60-74) of those screening within the last 30 months (2014/15-2016/17). Swanley St Mary's has a screening rate of 56.75% whereas Eynsford has a screening rate of 64.73%
- Breast Cancer Screening (aged 50-74) of those screening within the last 36 months (2014/15-2016/17). Sevenoaks Kippington has a screening rate of 70.36% whereas Eynsford has a screening rate of 78.48%
- Cervical Cancer Screening (aged 25-64) of those screening between 2014/15 - 2016/17. Swanley St Mary's has a screening rate of 75.72% whereas Eynsford has a screening rate of 84.34%

Dementia

Dementia is a syndrome associated with an ongoing decline in cognitive functioning. Alzheimer's is the most common type followed by Vascular Dementia, there are also many other less common types so dementia is used as an umbrella term for major neurocognitive disorders. This Symptoms can include problems with; memory, understanding, perception, mood, movement, language, (amongst others). People living with dementia are often living with other comorbidities and or physical conditions.

The recorded prevalence of Dementia (2015/16-2017/18) shows some variance depending on where people live, from 0.59% in Cowden and Hever to 1% in Dunton Green and Riverhead. Unfortunately, Sevenoaks District is performing worse when compared to England for Dementia diagnosis rate of 65+ residents (2021), with the Sevenoaks percentage diagnosis at 57.6% and the England percentage diagnosis at 61.6%.

Actions must be taken to improve the dementia diagnosis rates for Sevenoaks District residents where possible to enable support and treatment pathways as early as possible.

Falls Prevention

For older residents, the impact of a fall can be life changing. Older people are at an increased risk of having a fall due to; balance problems and muscle weakness, vision loss, other health conditions (heart disease, dementia or low blood pressure). In Sevenoaks District, 584 65+ residents (per 100,000) had a hip fracture (2019/20). This is statistically similar to the England rate of 572 (per 100,000).

Emergency hospital admission due to falls in people aged 65+ (2015/16-2017/18) varies from 1497.98 (per 100,000) in Seal and Weald to 3408.76 (per 100,000) in Crockenhill and Well Hill.

Emergency hospital admission due to hip fracture in people aged 65+ (2013/14-2017/18) varies from 310.22 (per 100,000) in Seal and Weald to 971.54 (per 100,000) in Hextable.

The prevention of falls and subsequent injury caused by the fall is an important action for Sevenoaks District considering the growing older population. This could take the form of supporting the physical stability of our residents or changing the landscape of Sevenoaks District to limit the risk of falls.

Pillar 4: Integrated health and care systems:

This reflects the growing number of patients with multiple long-term conditions and the need to integrate health and care services around their needs rather than within organisational silos. SDC COMMUNITIES AND HEALTH TEAM COMMUNITIES AND HEALTH TEAM representatives are engaged and involved with Health Inequalities work and interventions led by both West Kent and DGS HCPs as well as local PCNs and other primary health organisations. More details will be provided on this element of work in coming months.

Objectives and Actions

Our objectives follow the three main themes identified above. Our subsequent actions are led primarily from the data presented in this action plan. The Sevenoaks District Health Action Team will be made up of representatives of organisations that:

- Support Sevenoaks residents.
- Can contribute to the achievement of the actions outlined in this action plan.

Through the partnership work of the Health & Wellbeing Action Team, we might identify gaps in service provision or gain additional insight on the needs of Sevenoaks District residents. The Health Action Team will work in partnership to address these gaps and respond to these needs.

Ref	2023-24 Priority Action	Lead Agency	Other Partners	By When
Wider Determinants of Health				
WDH1	Provide supportive working and volunteering opportunities for people living with mental health issues	Health & Wellbeing Action Team	ALL	December 2023
WDH2	Seek opportunities to open up Royal Society for Protection of Birds premises to free parking facilities	SDC Health & Communities Team	ALL	June 2023
WDH3	<p>Deliver dementia friendly training to different departments+ businesses</p> <p>Promote local Dementia Forget-me-not Cafe Groups and Activities of which there are 6 in the District per month.</p> <p>Promote dementia awareness session delivery to different departments and businesses through local plan, shop safe and parish councils.</p> <p>Promote the Dementia Showcase taking place at the Kent Showground Detling in May 2023.</p> <p>Promote the ADSS dementia helpline and Dementia support Coordinators.</p> <p>Promote Dementia UK helpline and website,</p> <p>Promote Alzheimer's Society's Dementia Connect Website and helpline.</p> <p>Attend GP Locality training days to talk about Dementia, I have done this before and it went well. Bringing together experts in dementia, GP's, District Nurses etc.</p>	<p>The Good Care Group</p> <p>Sevenoaks Area Dementia Friendly Community</p>	ALL	December 2023 and on going

WDH4	Deliver the Local Business Support Scheme	SDC Economic Development Team	Local Businesses	March 2024
WDH5	Embed a Health in All Policies approach at SDC and help other agencies achieve this as well	SDC Communities and Health Team	All	March 2024
WDH6	Promote the uptake of Health in the Workplace Scheme to local businesses and partner organisations	SDC Communities and Health Team and SDC Human Resources	ALL	December 2023
WDH7	Adapt the physical design of Sevenoaks District so that healthy lifestyle choices become a routine part of resident's lives	Sevenoaks District Council Planning Team	Sevenoaks District Council Health Team	March 2024
WDH8	Encourage more client-facing organisations to engage in Mental Health Awareness and Mental Health First Aid training	West Kent Mind & North Kent Mind	MIND (National)	March 2024
WD09	Seek out, Consider and promote Council and Partner opportunities to reduce Cost of Living Impact on residents.	All	All	Ongoing
WD10	Source funding avenues to run interventions that address cost of living challenges experienced by residents across the district	SDC People & Places	All SDC Departments	Continued Delivery
WD11	Seek out opportunities for interventions and projects based in areas of deprivation in the district	SDC Communities and Health Team	All	Ongoing
Health Behaviours:				
HB1	Continue to provide services that contribute towards the reduction of smoking in Sevenoaks District with particular targeting for at-risk groups.	KCHFT Smoking Cessation Service	Workplace Health Award	March 2024
HB2	Improve the diagnosis rate of Diabetes for residents	Living Well, Taking Control'	KCHFT NHS Health Check Service	ongoing

		Partnership between charities Health Exchange and Westbank Community Health and Care. info@lwtcsupport.co.uk		
HB3	Encourage more Sevenoaks residents to reduce consumption of alcohol within lower risk levels and limit hospital admissions for alcohol specific conditions	Change, Grow, Live	Sevenoaks District Council Health Team KCHFT One You Team	March 2024
HB4	Support adults to adopt healthy lifestyle choices that facilitate weight loss- access to Why Weight	Sevenoaks District Council Health & CommunitiesTeam	Sencio Everyone Active	March 2024
HB5	Support adults to adopt healthy lifestyle choices that facilitate increases in physical activity	Sencio Everyone Active	Sevenoaks District Council Health Team	March 2024
HB6	Support adults living with chronic conditions to adopt healthy lifestyle choices that facilitate increases in physical activity-Exercise Referral scheme	Sencio Everyone Active	Sevenoaks District Council Health Team	March 2024
HB7	Provide adapted health improvement services targeted at specific populations (where needed) to ensure all residents can benefit from good physical health	Involve Kent	Sencio Everyone Active	March 2024
HB8	Support a reduction in obesity and excess weight in children through improving access to PA and other activities, especially in deprived areas.	White Oak Leisure Centre	KCC Youth team	March 2024
HB9	Support a smokefree home for residents and enable more Sevenoaks Mothers to quit smoking during pregnancy	KCHFT One YOU Team Smoke Free Pregnancy - Home Visits.	ALL	March 2024
HB10	Prevent the illegal consumption of alcohol in under 18's and subsequent hospital admissions resulting from excessive alcohol consumption	KCC Trading Standards Kent Police	KCC Public Health	March 2024
HB11	Support children and young people to adopt healthy lifestyle choices and increase activity	Sevenoaks District Local Children's Partnership	KCC-ALL	March 2024

HB12	Basic Health Checks (including blood pressure) to be offered at Leisure Centres and Pharmacies	KCHFT	WOLC-SENCIO-Pharmacies	March 2024
HB13	Work with Community Safety Partnership (CSP) on Domestic Abuse and Substance Misuse services to help residents find the right support through health services	HTWAT CSP	ALL	March 2024
HB14	Establish a robust network of moderate-intensity walking groups	SDC Communities and Health Team	All	March 2024
HB15	Education around Cannabis consumption risks and risk factors, prevention and intervention	Kenwood Trust	CSP-Schools-Youth Groups	Ongoing
HB16	Increase Healthy Start Uptake – both scheme registrations and vitamins registration Maintain and build on FSM registrations	KCC	ALL	March 2024
HB17	Work with the local PCNs on delivering their outcomes on mental health and Cost of Living including Social Kitchen	Sevenoaks PCN	SDC Health & Communities Team	Dec 2023
Places and Communities:				
PC1	Work with older residents to prevent falls and limit the potential for hip fracture in older residents	Involve Kent, West Kent Falls Prevention Service & Virgin Care Falls Team	Age UK Sevenoaks & Tonbridge Sevenoaks District Health Team Sencio Everyone Active	Ongoing
PC2	Ensure residents can receive support to stay safe, healthy and independent in their own homes for as long as possible	Sevenoaks District Council Private Sector Housing Team		March 2024
PC3	Promote the importance of staying well at winter in older populations	Sevenoaks District Health & Wellbeing Action Team	All Public Supporting Organisations	March 2024
PC4	Food poverty: <ul style="list-style-type: none"> Expand community access to free food across the district Identify those most in need 	Sevenoaks District Health & Wellbeing Action Team	Supermarkets, food outlets, community/voluntary orgs, statutory services, PCNs	On Going

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	<ul style="list-style-type: none"> Communications with those most isolated 			
PC5	Re-establish and update Information-sharing directory of services/interventions	Sevenoaks District Health & Wellbeing Action Team	All-health, voluntary-statutory	March 2024
PC6	Work to increase inclusivity and accessibility of services	Sevenoaks District Health & Wellbeing Action Team	ALL	Annual review
PC7	Source free premises for partners to use in-kind	Sevenoaks District Health & Wellbeing Action Team		Ongoing
PC8	Improve awareness and increase referrals to Dementia Cafes	The Good Care Group	Sevenoaks District Health & Wellbeing Action Team	March 2024
PC9	Explore breastfeeding-friendly environments in the district	Sevenoaks District Health & Wellbeing Action Team PSB	All	March 2024
PC10	Deliver a local cooking/healthy eating project	SDC Communities and Health Team	All	Sept 2023
PC11	Explore the option to deliver school holiday activities/food programs	Leisure	All	July 2023
PC12	Improve social activity provision for teens/young adults?	SDC Communities and Health Team HEALTH TEAM Youth Mentoring Group	All	March 2024
PC13	Maintain and expand YMP, increase referrals and partners	SDC Communities and Health Team	All	March 2024
PC14	Develop and deliver men's mental health drop-in programs and sessions	SDC Communities and Health Team	All	March 2024
PC15	Run Workshops & Courses for: Coping with Life Skills Mental Health Awareness Understanding Stress Understanding Anxiety Returning to work skills (including CV and interview skills)	RightMind	All	March 2024

PC16	Set up and deliver Support Groups/talking therapy groups: Bereavement and Loss Mental Health Support Group Over 65/retirement support group General/open support group	RightMind	All	March 2024
PC17	Deliver Support/Counselling support for Sevenoaks residents on a 1-2-1 basis, counselling and talking therapy.	RightMind	All	March 2024
PC18	Deliver community initiatives with Health & Communities Team	Sevenoaks District Health and Communities team	All	March 2024
PC19	Establish delivery of falls prevention training/intervention	Red Cross + Age UK	All	March 2024
PC20	Improve access to MH in areas of higher need (Swanley-Edenbridge etc)	WKM-SC-Kenwood Trust	All	March 2024
PC21	Target services towards areas and residents of greatest need without preventing all residents from accessing support.	All Organisations delivering client centred services	All	March 2024
PC22	Enable more professionals to have conversations with residents on health and wellbeing	Kent County Council - MECC	All	March 2024
PC23	Work with partners to improve people's access to digital technology to enable those in more rural settings to easier access services remotely	Kent County Council	SDC COMMUNITIES AND HEALTH TEAM COMMUNITIES AND HEALTH TEAM	March 2024
PC24	Ensure non-digital advertising is employed to promote services to those residents with limited digital access.	All Organisations delivering client centred services	All	March 2024

If you are supporting Sevenoaks residents and feel you could support in the achievement of our actions then we would welcome hearing from you and welcoming you to the Health Action Team, please contact Sevenoaks District Council via; healthy.living@sevenoaks.gov.uk

Membership of the Health Action Team 2023-24 contact details

<p>Sevenoaks District Council Argyle Road, Sevenoaks, Kent, TN13 1GP Tel: 01732 227000 Web: www.sevenoaks.gov.uk</p>	<p>Age UK Sevenoaks & Tonbridge The Old Meeting House, St John's Road Sevenoaks, TN13 3LR Tel: 01732 454108 Web: https://www.ageuk.org.uk/sevenoaksandtonbridge/</p>	<p>Change, Grow, Live Tel: 0330 128 1113 Web: https://www.changegrowlive.org/westkent</p>
<p>Everyone Active Web: https://www.everyoneactive.com/</p>	<p>Involve Kent 30 Turkey Court, Ashford Road, Maidstone, ME14 5PP Tel: 03000 810005 Web: https://www.involvekent.org.uk/</p>	<p>Imago Community John Spare House, 17-19 Monson Road, Tunbridge Wells, Kent, TN1 1LS Tel: 01892 530330 Web: https://www.imago.community/</p>
<p>Kent Community Health Foundation Trust (KCHFT) Web: https://www.kentcht.nhs.uk/</p>	<p>Kent County Council County Hall, Maidstone, ME14 1XQ Tel: 0300 041 4141 Web: https://www.kent.gov.uk/</p>	<p>Kent & Medway Healthy Workplaces Programme Gun Wharf, Dock Road, Chatham, ME4 4TR Tel: 01634 334 307</p>
<p>Kenward Trust Kenward Road, Yalding, Kent, ME18 6AH Tel: 01622 814187 Web: https://www.kenwardtrust.org.uk/</p>	<p>North Kent Mind The Almshouses, 20 West Hill, Dartford, DA1 2EP Tel: 01322 291380 Web: https://northkentmind.co.uk/</p>	<p>Sencio Buckhurst Lane, Sevenoaks, Kent, TN13 1LW Web: https://www.sencio.org.uk/</p>

<p>Sevenoaks Area Dementia Friendly Community Argyle Road, Sevenoaks, Kent, TN13 1GP Tel: 01732 447055</p>	<p>Swanley Area Dementia Friendly Community</p>	<p>Virgin Care Falls Team Gravesend Community Hospital, Bath Street, Gravesend, DA11 0DG</p>
<p>West Kent Falls Prevention Coxheath Centre, Coxheath, ME17 4AH</p>		



Enquiries to:

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Appendices:

Appendix A: Indicative impact of Wider Determinants of Health on Population Health Outcomes

Area	Scale of problem in relation to public health	Strength of evidence of actions	Impact on health	Speed of impact on health	Contribution to reducing inequalities
Best start in life	Highest	Highest	Highest	Longest	Highest
Healthy schools and pupils	Highest	Highest	Highest	Longer	Highest
Jobs and Work	Highest	Highest	Highest	Quicker	Highest
Active and safe travel	High	High	High	Quicker	Lower
Warmer and safer homes	Highest	Highest	High	Longer	High
Access to green spaces and leisure services	High	Highest	High	Longer	Highest
Strong communities, wellbeing and resilience	Highest	High	Highest	Longer	High
Public Protection	High	High	High	Quicker	High
Health and spatial planning	Highest	High	Highest	Longest	Highest

Appendix B: The Public Health Outcome Framework data highlights for Sevenoaks

Overarching Indicators:

Indicator	Period	Sevenoaks			Region England		England		
		Recent Trend	Count	Value	Value	Value	Worst	Range	Best
A01b - Life expectancy at birth (Male, 3 year range)	2018 - 20	-	-	82.1	80.6	79.4	74.1		84.7
A01b - Life expectancy at birth (Female, 3 year range)	2018 - 20	-	-	84.2	84.1	83.1	79.0		87.9
A01b - Life expectancy at birth (Male, 1 year range)	2020	-	-	81.0	80.1	78.7	73.6		83.7
A01b - Life expectancy at birth (Female, 1 year range)	2020	-	-	84.2	83.7	82.6	78.0		87.8
A02a - Inequality in life expectancy at birth (Male)	2018 - 20	-	-	3.3	7.9	9.7	17.0		0.7
A02a - Inequality in life expectancy at birth (Female)	2018 - 20	-	-	1.5	6.0	7.9	13.9		-1.8
Overarching indicators at age 65									
A01b - Life expectancy at 65 (Male, 3 year range)	2018 - 20	-	-	20.1	19.4	18.7	16.0		23.1
A01b - Life expectancy at 65 (Female, 3 year range)	2018 - 20	-	-	21.9	21.8	21.1	18.6		25.4

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Indicator	Period	Sevenoaks			Region England		England		
		Recent Trend	Count	Value	Value	Value	Worst	Range	Best
A01b - Life expectancy at 65 (Male, 1 year range)	2020	–	-	19.8	18.9	18.1	14.7		22.2
A01b - Life expectancy at 65 (Female, 1 year range)	2020	–	-	22.0	21.4	20.7	17.7		25.3
A02a - Inequality in life expectancy at 65 (Male)	2018 - 20	–	-	1.1	4.3	5.2	12.7		-1.3
A02a - Inequality in life expectancy at 65 (Female)	2018 - 20	–	-	-0.2	3.6	4.8	9.5		-1.1

Prevalence Determinants of Health:

Indicator	Period	Sevenoaks			Region England		England		
		Recent Trend	Count	Value	Value	Value	Worst/ Lowest	Range	Best/ Highest
B01b - Children in absolute low income families (under 16s)	2020/21		2,583	10.5%	11.6%	15.1%	39.2%		5.2%
B01b - Children in relative low income families (under 16s)	2020/21		3,061	12.4%	14.3%	18.5%	42.4%		6.2%
B03 - Pupil absence	2020/21		185,977	4.5%	4.4%	4.6%	6.5%		3.0%
B08a - Gap in the employment rate between those with a physical or mental long term health condition (aged 16 to 64) and the overall employment rate New data	2021/22	–	-	5.5	8.1	9.9	29.0		-6.5
B08a - The percentage of the population with a physical or mental long term health condition in employment (aged 16 to 64) New data	2021/22	–	-	61.5%	70.0%	65.5%	37.0%		89.3%

Indicator	Period	Sevenoaks			Region England		England		
		Recent Trend	Count	Value	Value	Value	Worst/Lowest	Range	Best/Highest
B08b - The percentage of the population who are in receipt of long term support for a learning disability that are in paid employment (aged 18 to 64)New data	2020/21	-	-	-	6.6%	5.1%	-	Insufficient number of values for a spine chart	-
B08d - Percentage of people in employment New data	2021/22	➔	47,000	67.0%	78.1%	75.4%	55.8%	●	89.7%
B09a - Sickness absence - the percentage of employees who had at least one day off in the previous week	2018 - 20	-	-	2.5%	2.1%	1.9%	6.4%	●	0.2%
B09b - Sickness absence - the percentage of working days lost due to sickness absence	2018 - 20	-	-	1.7%	1.0%	1.0%	4.0%	●	0.0%
B10 - Killed and seriously injured (KSI) casualties on England's roads	2020	-	-	-	95.4*	86.1*	-	Insufficient number of values for a spine chart	-
B12a - Violent crime - hospital admissions for violence (including sexual violence)	2018/19 - 20/21	-	95	30.9	29.4	41.9	116.8	●	7.9
B12b - Violent crime - violence offences per 1,000 populationNew data	2021/22	⬆	3,338	27.5	32.3*	34.9*	15.1	●	79.1
B12c - Violent crime - sexual offences per 1,000 populationNew data	2021/22	➔	258	2.1	2.9*	3.0*	1.4	●	6.3
B13a - Re-offending levels - percentage of offenders who re-offend	2019/20	-	-	17.9%	22.2%	25.4%	10.7%	●	37.1%
B13b - Re-offending levels - average number of re-offences per re-offender	2019/20	-	-	3.51	3.85	3.74	2.32	○	5.46
B14a - The rate of complaints about noise	2019/20	⬆	471	3.9	4.5*	6.4*	80.4	●	0.7
B15a - Homelessness - households owed a duty under the Homelessness Reduction Act	2020/21	-	392	7.8	9.9	11.3	31.0	●	1.6

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Indicator	Period	Sevenoaks			Region England		England		
		Recent Trend	Count	Value	Value	Value	Worst/ Lowest	Range	Best/ Highest
B15c - Homelessness - households in temporary accommodation	2020/21	–	128	2.6	2.7	4.0	48.6		0.0
B17 - Fuel poverty (low income, low energy efficiency methodology)	2020	–	3,882	7.6%	8.6%	13.2%	22.4%		5.2%
B19 - Loneliness: Percentage of adults who feel lonely often / always or some of the time	2019/20	–	-	18.61%	20.83%	22.26%	36.28%		11.27%
Indicators to be replaced with new sources or definitions:									
1.01i - Children in low income families (all dependent children under 20)	2016	➔	2,835	11.8%	12.7%	17.0%	32.5%		5.7%

Health Improvement indicators:

Indicator	Period	Sevenoaks			Region England		England		
		Recent Trend	Count	Value	Value	Value	Worst/ Lowest	Range	Best/ Highest
C01 - Total prescribed LARC excluding injections rate / 1,000	2020	↓	665	33.4	41.9	34.6	4.7		74.9
C02a - Under 18s conception rate / 1,000	2020	➔	14	6.4	10.6	13.0	30.4		2.1
C04 - Low birth weight of term babies	2020	➔	25	2.4%	2.6%	2.9%	4.9%		1.0%
C06 - Smoking status at time of delivery New data	2021/22	➔	123	10.8%	8.2%	9.1%	21.1%		3.1%
C09a - Reception: Prevalence of overweight (including obesity) New data	2021/22	↓	205	17.7%	20.3%	22.3%	28.9%		12.9%
C09b - Year 6: Prevalence of overweight (including obesity) New data	2021/22	➔	370	31.8%	34.0%	37.8%	49.1%		16.9%

Indicator	Period	Sevenoaks			Region England		England		
		Recent Trend	Count	Value	Value	Value	Worst/ Lowest	Range	Best/ Highest
C10 - Percentage of physically active children and young people	2020/21	–	-	43.4%	45.4%	44.6%	-	<i>Insufficient number of values for a spine chart</i>	-
C11a - Hospital admissions caused by unintentional and deliberate injuries in children (aged 0-14 years)	2020/21	↓	155	67.2	73.2	75.7	173.4		26.5
C11a - Hospital admissions caused by unintentional and deliberate injuries in children (aged 0-4 years)	2020/21	→	60	88.1	103.2	108.7	307.1		34.0
C11b - Hospital admissions caused by unintentional and deliberate injuries in young people (aged 15-24 years)	2020/21	→	145	126.0	130.8	112.4	264.7		37.3
C14b - Emergency Hospital Admissions for Unintentional Self-Harm	2020/21	↑	195	183.3	201.9	181.2	471.7		41.5
C15 - Proportion of the population meeting the recommended '5-a-day' on a 'usual day' (adults)	2019/20	–	-	64.8%	58.3%	55.4%	41.4%		67.7%
C16 - Percentage of adults (aged 18+) classified as overweight or obese	2020/21	–	-	55.3%	62.4%	63.5%	76.3%		44.0%
C17a - Percentage of physically active adults	2020/21	–	-	70.4%	69.2%	65.9%	48.8%		78.4%
C17b - Percentage of physically inactive adults	2020/21	–	-	21.4%	20.2%	23.4%	38.1%		11.6%
C18 - Smoking Prevalence in adults (18+) - current smokers (APS)New data	2021	–	-	4.8%	11.9%	13.0%	27.8%		3.2%
C19d - Deaths from drug misuse	2018 - 20	–	6	-	4.0	5.0	-	<i>Insufficient number of values for a spine chart</i>	-
C21 - Admission episodes for alcohol-related conditions (Narrow): New method. This indicator	2020/21	→	500	407	389	456	805		251

Indicator	Period	Sevenoaks			Region England		England		
		Recent Trend	Count	Value	Value	Value	Worst/ Lowest	Range	Best/ Highest
uses a new set of attributable fractions, and so differ from that originally published. (Persons)									
C21 - Admission episodes for alcohol-related conditions (Narrow): New method. This indicator uses a new set of attributable fractions, and so differ from that originally published. (Male)	2020/21	→	285	485	512	603	1,063		316
C21 - Admission episodes for alcohol-related conditions (Narrow): New method. This indicator uses a new set of attributable fractions, and so differ from that originally published. (Female)	2020/21	→	215	340	278	322	715		141
C22 - Estimated diabetes diagnosis rate	2018	–	-	68.1%	75.2%	78.0%	54.3%		98.7%
C23 - Percentage of cancers diagnosed at stages 1 and 2	2019	→	250	*	57.0%	55.0%	45.1%		64.2%
C24a - Cancer screening coverage: breast cancer	2021	↓	9,705	67.9%	68.0%*	64.1%*	20.2%		81.4%
C24b - Cancer screening coverage: cervical cancer (aged 25 to 49 years old)	2021	→	14,659	75.0%	69.5%*	68.0%*	42.9%		82.4%
C24c - Cancer screening coverage: cervical cancer (aged 50 to 64 years old)	2021	↓	9,132	76.0%	74.8%*	74.7%*	53.5%		83.7%
C24d - Cancer screening coverage: bowel cancer	2021	↑	14,808	70.2%	68.0%*	65.2%*	47.4%		75.9%
C24e - Abdominal Aortic Aneurysm Screening Coverage	2020/21	↓	455	69.9%	63.5%*	55.0%*	14.6%		88.9%
C27 - Percentage reporting a long-term Musculoskeletal (MSK) problem	2021	–	-	17.1%	16.0%	17.0%	26.6%		9.1%
C29 - Emergency hospital admissions due to falls in people aged 65 and over	2020/21	→	645	2,305	2,135	2,023	3,234		1,102

Indicator	Period	Sevenoaks			Region England		England		
		Recent Trend	Count	Value	Value	Value	Worst/ Lowest	Range	Best/ Highest
C29 - Emergency hospital admissions due to falls in people aged 65-79	2020/21	→	200	1,066	957	937	1,671		517
C29 - Emergency hospital admissions due to falls in people aged 80+	2020/21	→	445	5,897	5,553	5,174	8,181		2,548

Health Protection indicators:

Indicator	Period	Sevenoaks			Region England		England		
		Recent Trend	Count	Value	Value	Value	Worst/ Lowest	Range	Best/ Highest
D01 - Fraction of mortality attributable to particulate air pollution (new method)	2020	—	-	6.0%	6.0%	5.6%	3.0%		7.8%
D02a - Chlamydia detection rate per 100,000 aged 15 to 24New data	2021	→	108	938	1,105	1,334	222		3,063
D02a - Chlamydia detection rate per 100,000 aged 15 to 24 (Male)New data	2021	→	44	760	697	860	130		2,345
D02a - Chlamydia detection rate per 100,000 aged 15 to 24 (Female)New data	2021	→	64	1,119	1,463	1,762	319		3,664
D02b - New STI diagnoses (excluding chlamydia aged under 25) per 100,000New data	2021	↓	-	173	292	394	2,634		103
D04d - Population vaccination coverage: Flu (primary school aged children) <65% ≥65%	2021	—	-	-	61.1%*	57.4%	-	Insufficient number of values for a spine chart	-
D07 - HIV late diagnosis in people first diagnosed with HIV in the UKNew data	2019 - 21	—	1	100%	48.0%	43.4%	100%		0.0%

Indicator	Period	Sevenoaks			Region	England	England		
		Recent Trend	Count	Value	Value	Value	Worst/Lowest	Range	Best/Highest
<div style="display: flex; justify-content: space-between; align-items: center;"> <25% 25% to 50% ≥50% </div>									
D08a - Proportion of drug sensitive TB cases who had completed a full course of treatment by 12 months	2019	-	-	-	82.3%	82.0%	-	<i>Insufficient number of values for a spine chart</i>	
D08b - TB incidence (three year average)	2018 - 20	-	13	3.6	5.6	8.0	43.1		0.3
D10 - Adjusted antibiotic prescribing in primary care by the NHS	2021	-	42,920	0.75	0.69	0.74	1.05		0.33
<div style="display: flex; justify-content: space-between; align-items: center;"> ≤ mean England prescribing 2013/14 > mean England prescribing 2013/14 </div>									

Healthcare and premature mortality:

Indicator	Period	Sevenoaks			Region	England	England		
		Recent Trend	Count	Value	Value	Value	Worst	Range	Best
E01 - Infant mortality rate	2018 - 20	-	8	2.2	3.5	3.9	8.3		0.8
E02 - Percentage of 5 year olds with experience of visually obvious dental decay	2018/19	-	-	12.9%	17.6%	23.4%	50.9%		1.1%
E03 - Under 75 mortality rate from causes considered preventable (2019 definition) (1 year range)	2020	➔	105	92.2	120.7	140.5	272.5		68.2

Indicator	Period	Sevenoaks			Region	England	England		
		Recent Trend	Count	Value	Value	Value	Worst	Range	Best
E03 - Under 75 mortality rate from causes considered preventable (2019 definition) (3 year range)	2017 - 19	—	352	102.0	120.9	142.2	265.2		79.0
E04a - Under 75 mortality rate from all cardiovascular diseases (1 year range)	2020	➔	58	50.2	61.5	73.8	137.1		36.1
E04a - Under 75 mortality rate from all cardiovascular diseases (3 year range)	2017 - 19	—	182	52.3	57.1	70.4	121.6		39.8
E04b - Under 75 mortality rate from cardiovascular diseases considered preventable (2019 definition) (1 year range)	2020	➔	24	20.6	23.7	29.2	55.0		13.7
E04b - Under 75 mortality rate from cardiovascular diseases considered preventable (2019 definition) (3 year range)	2017 - 19	—	75	21.5	22.1	28.1	49.3		13.7
E05a - Under 75 mortality rate from cancer (1 year range)	2020	➔	118	100.6	116.2	125.1	187.1		69.3
E05a - Under 75 mortality rate from cancer (3 year range)	2017 - 19	—	417	119.7	121.6	129.2	182.4		87.4
E05b - Under 75 mortality rate from cancer considered preventable (2019 definition) (1 year range)	2020	➔	31	26.6	45.0	51.5	98.2		22.6
E05b - Under 75 mortality rate from cancer considered preventable (2019 definition) (3 year range)	2017 - 19	—	151	43.0	47.7	54.1	92.4		31.5
E06a - Under 75 mortality rate from liver disease (1 year range)	2020	➔	15	13.0	17.4	20.6	44.9		7.4
E06a - Under 75 mortality rate from liver disease (3 year range)	2017 - 19	—	39	11.3	15.9	18.8	48.2		7.2
E06b - Under 75 mortality rate from liver disease considered preventable (2019 definition) (1 year range)	2020	➔	11	9.5	15.5	18.2	37.8		7.9
E06b - Under 75 mortality rate from liver disease considered preventable (2019 definition) (3 year range)	2017 - 19	—	36	10.4	14.1	16.7	43.4		5.5
E07a - Under 75 mortality rate from respiratory disease (1 year range)	2020	➔	21	18.1	23.4	29.4	77.2		9.7
E07a - Under 75 mortality rate from respiratory disease (3 year range)	2017 - 19	—	91	25.5	27.7	33.6	77.5		13.7
E07b - Under 75 mortality rate from respiratory disease considered preventable (2019 definition) (1 year range)	2020	➔	13	11.2	14.1	17.1	53.7		5.7
E07b - Under 75 mortality rate from respiratory disease considered preventable (2019 definition) (3 year range)	2017 - 19	—	53	14.8	16.6	20.2	45.4		6.5

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Indicator	Period	Sevenoaks			Region	England	England		
		Recent Trend	Count	Value	Value	Value	Worst	Range	Best
E08 - Mortality rate from a range of specified communicable diseases, including influenza (1 year range)	2020	➔	9	*	7.0	8.3	-	Insufficient number of values for a spine chart	
E08 - Mortality rate from a range of specified communicable diseases, including influenza (3 year range)	2017 - 19	—	19	4.6	8.1	9.4	19.5		3.7
E10 - Suicide rate	2019 - 21	—	36	11.1	10.6	10.4	19.8		4.4
E11 - Emergency readmissions within 30 days of discharge from hospital	2020/21	—	1,665	14.7%	15.7%	15.5%	20.0%		12.4%
E13 - Hip fractures in people aged 65 and over	2020/21	➔	160	584	508	529	746		306
E13 - Hip fractures in people aged 65-79	2020/21	➔	55	286	204	219	360		88
E13 - Hip fractures in people aged 80+	2020/21	➔	110	1,448	1,389	1,426	2,137		684
E14 - Excess winter deaths index	Aug 2019 - Jul 2020	—	70	18.4%	17.4%	17.4%	50.2%		0.7%
E14 - Excess winter deaths index (age 85+)	Aug 2019 - Jul 2020	—	30	15.0%	20.7%	20.8%	61.5%		-14.9%
E15 - Estimated dementia diagnosis rate (aged 65 and over)	2022	➔	861	62.2%	*	62.0%	41.2%		83.7%

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Appendix C: Leading Risk Factors for Mortality and Morbidity in England

Figure 1: Mortality

Figure 18 – Leading risk factors

• Figure 18a - Morbidity • Figure 18b - Mortality

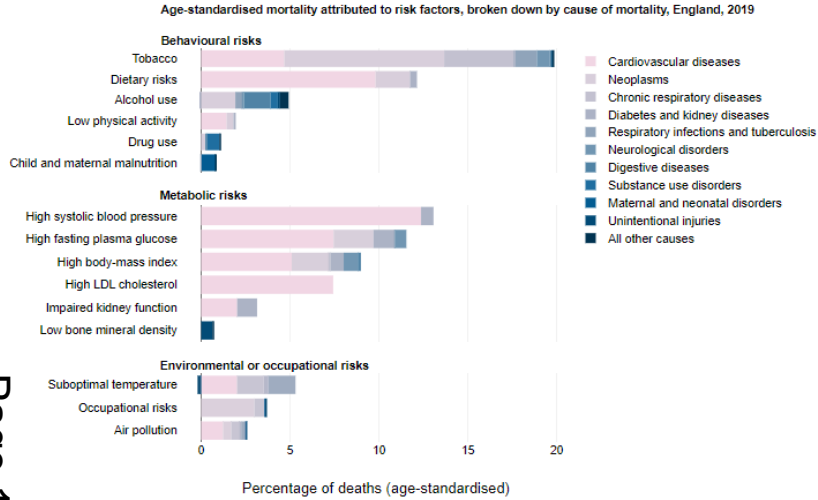
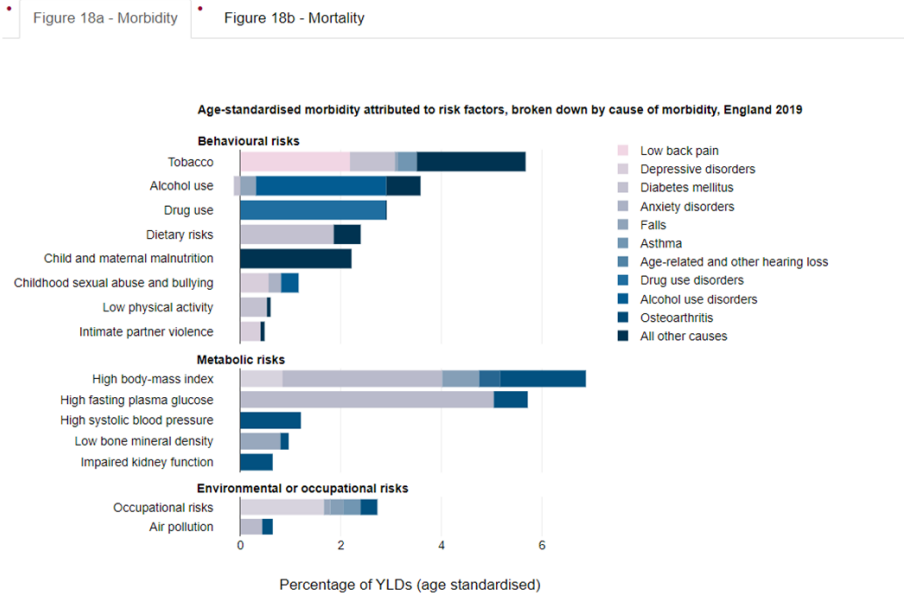


Figure 2: Morbidity

Figure 18 – Leading risk factors



Source: Source: Global Burden of Disease Collaborative Network. Global Burden of Disease Study 2019 (GBD 2019) Results. Seattle, United States: Institute for Health Metrics and Evaluation (IHME), 2020. Download data

APPLICATION OF ADDITIONAL DESIGNATED RURAL AREA STATUS IN RELATION TO CORE STRATEGY POLICY SP3

Housing & Health Advisory Committee - 7 February 2023

Report of: Deputy Chief Executive and Chief Officer - People & Places

Status: For Approval

Also considered by:

- Cabinet - 9 February 2023

Key Decision: No

Executive Summary: Additional designations under Section 157 of the Housing Act 1985 (“Designated Rural Areas”) have been conferred within the District via the [Housing \(Right to Buy\) \(Designated Rural Areas and Designated Regions\) \(England\) Order 2022](#) (“the Order”).

Approval is sought to apply the additional Designated Rural Area status conferred by the Order, in relation to Core Strategy Policy SP3 (Provision of Affordable Housing).

This report supports the Key Aim of: The Housing Strategy 2022-2027, the Core Strategy 2011 and the emerging Local Plan 2040.

Portfolio Holder: Cllr. Kevin Maskell

Contact Officer: Sharon Donald, Ext. 7131

Recommendation to Housing & Health Advisory Committee:

That comments on recommendation (a) are passed to Cabinet.

Recommendation to Cabinet:

To approve the additional Designated Rural Area status conferred by the [Housing \(Right to Buy\) \(Designated Rural Areas and Designated Regions\) \(England\) Order 2022](#), as set out in Appendix A, in relation to Core Strategy Policy SP3 (Provision of Affordable Housing).

Reason for recommendation: To ensure our ability to secure affordable housing contributions from smaller sites is maximised, whilst not impacting our rural exceptions housing programme.

Introduction and Background

- 1 Paragraph 64 of the National Planning Policy Framework (NPPF) allows local authorities to seek an affordable housing contribution on small development sites (9 units and under) located within Designated Rural Areas (designated under Section 157 of the Housing Act 1985). For sites located outside of Designated Rural Areas, the NPPF states that affordable housing contributions can only be sought on major developments. Major development is defined as 10 or more units or where the site area is larger than 0.5 hectares. Core Strategy Policy SP3 (Provision of Affordable Housing) originally set a requirement for all new housing developments to provide affordable housing on a sliding scale (either on site provision or a financial contribution), however as the NPPF postdates the adoption of the Core Strategy we are much more limited in what contributions we can seek and can only seek contributions in line with the NPPF.
- 2 With regards applying a lower threshold for affordable housing contributions on sites located within Designated Rural Areas, in March 2015 Cabinet resolved to apply a lower threshold of 6 to 9 units to sites located in those Designated Rural Areas in force at that time. This related to locations within Areas of Outstanding Natural Beauty and contributions have been sought on this basis ever since. The lower threshold does not apply to sites located within Designated Rural Areas that come forward for Rural Exceptions Housing under Core Strategy Policy SP4).
- 3 In December 2021, Cabinet approved an application being made to the Secretary of State for Levelling Up, Housing and Communities, seeking the designation of additional areas.
- 4 The application has been successful and on 12 December 2022, the [Housing \(Right to Buy\) \(Designated Rural Areas and Designated Regions\) \(England\) Order 2022](#) (“the Order”), comes into force. The status of each of the District’s 31 Parishes is shown in Appendix A.
- 5 Approval is sought to update the March 2015 Cabinet resolution, whereby the lower site threshold of 6 to 9 units is applied in all Designated Rural Areas, set out in Appendix A. This will ensure our ability to secure affordable housing contributions from smaller sites is maximised, whilst not impacting our rural exceptions housing programme.
- 6 The primary purpose of Designated Rural Area status is to restrict the consequences of the Right to Buy. It allows restrictive covenants to be put in place so that social housing can only be sold on to someone who has been living or working in the parish for 3 years. Alternatively the landlord may require the tenant to offer the home back to them if the tenant wishes to sell within 10 years of buying.
- 7 Designated Rural Area status assists the Council’s rural exceptions housing programme, because sites within these Areas are not permitted to be developed as First Homes Exceptions Sites. This exclusion helps to ensure

sites will continue to only come forward for rural exceptions housing under Core Strategy Policy SP4. This will ensure the delivery of genuinely affordable housing to meet identified local housing needs.

Other options Considered and/or rejected

Leave as current and do not apply the additional areas conferred within the Order in relation to Core Strategy Policy SP3. This would prevent the District Council from maximising S106 contributions from smaller sites in the additional areas. Rejected.

Key Implications

Financial

The District Council will be able to seek Section 106 affordable housing contributions from a wider pool of application sites. Section 106 commuted sum payments will be used as set out in the Affordable Housing SPD 2011.

Legal Implications and Risk Assessment Statement.

None.

Equality Assessment

The decisions recommended through this paper have a remote or low relevance to the substance of the Equality Act. There is no perceived impact on end users.

Net Zero Implications

The decisions recommended through this paper have a remote or low relevance to the council's ambition to be Net Zero by 2030. There is no perceived impact regarding either an increase or decrease in carbon emissions in the district, or supporting the resilience of the natural environment.

Conclusions

Application of the additional Designated Rural Area status conferred by the Order, in relation to Core Strategy Policy SP3 (Provision of Affordable Housing), will ensure our ability to secure affordable housing contributions from smaller sites is maximised, whilst not impacting our rural exceptions housing programme.

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Appendices

Appendix A - Table showing Designated Rural Area status, by Parish.

Background Papers

Informative Paper

[Housing \(Right to Buy\) \(Designated Rural Areas and Designated Regions\) \(England\) Order 2022](#)

Sarah Robson

Deputy Chief Executive and Chief Officer - People & Places

Appendix A**Designated Rural Areas (DRA) under S157 Housing Act 1985**

Parishes wholly inside a DRA from 12/12/22	Parish DRA status prior to 12/12/22
Badgers Mount	Partial coverage – locations within AONB only
Brasted	Partial coverage – locations within AONB only
Chiddingstone	Partial coverage – locations within AONB only
Cowden	Full coverage
Crockenhill	Partial coverage – locations within AONB only
Eynsford	Partial coverage – locations within AONB only
Farningham	Partial coverage – locations within AONB only
Fawkham	No coverage
Halstead	Partial coverage – locations within AONB only
Hever	Partial coverage – locations within AONB only
Knockholt	Partial coverage – locations within AONB only
Leigh	Partial coverage – locations within AONB only
Penshurst	Full coverage
Seal	Partial coverage – locations within AONB only
Sevenoaks Weald	Partial coverage – locations within AONB only
Shoreham	Partial coverage – locations within AONB only
Sundridge with Ide Hill	Full coverage

The DRA status of the following Parishes remains unchanged:

Parishes wholly outside a DRA:

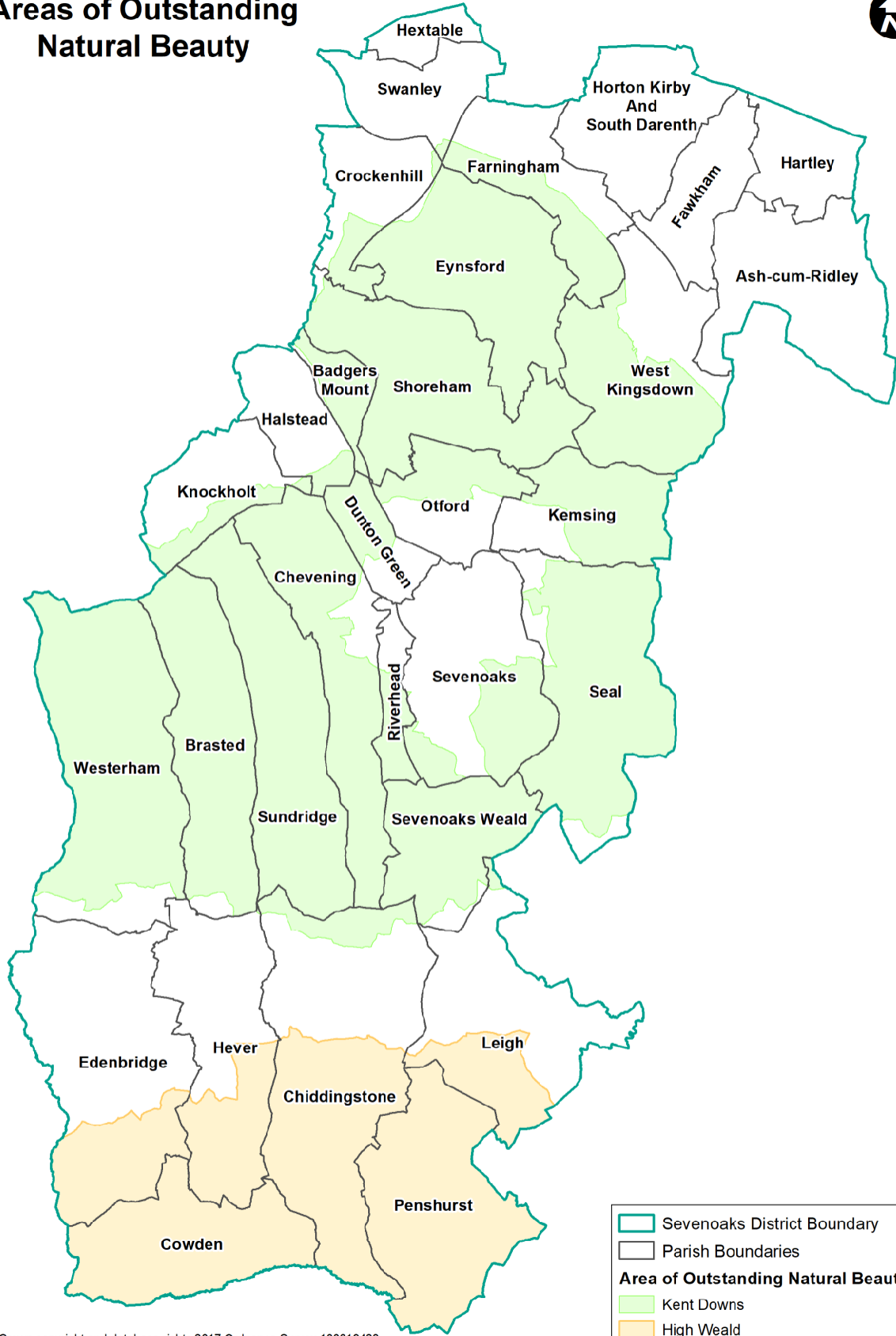
- Ash Cum Ridley
- Hartley
- Hextable
- Horton Kirby and South Darent

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Parishes partly within a DRA (i.e. applying only to those areas located within an AONB):

- Chevening (except most of the developed area and some land south of the M26)
- Dunton Green (only the rural north)
- Edenbridge (only the rural south)
- Kemsing (only the rural north and east)
- Otford (only the northern half)
- Riverhead (only the rural south)
- Sevenoaks (only the rural south east and south west)
- Swanley (only a very small rural area near the M25)
- West Kingsdown (only the rural west and south)
- Westerham (except the extreme south)

Areas of Outstanding Natural Beauty



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PILOT ENERGY EFFICIENCY SERVICE - SCOPING REPORT

Housing and Health Advisory Committee - 7 February 2023

Report of: Sarah Robson, Deputy Chief Executive and Chief Officer People and Places

Status: For consideration

Key Decision: No

Executive Summary:

At the Housing and Health Advisory Committee on 22 November 2022, the Portfolio Holder (Housing and Health) set out an outline concept for a Council service to provide an Energy Efficiency Advisory Service to residents which would assist in reducing energy costs and carbon emissions, whilst providing an income to the Council.

In discussion with the Head of Housing and Private Sector Housing Team Leader, a draft scoping report is now provided.

This report supports the Key Aim of: Housing Strategy 2022-2027

Portfolio Holder: Councillor Kevin Maskell

Contact Officer: Sharon Donald, Housing Strategy Manager, Extension 7131

Recommendation to Housing & Health Advisory Committee:

- a) To consider the details of the scoping report; and
- b) To endorse continued examination of options and costs/potential income associated with providing an Energy Efficiency Advisory Service to residents

Reason for recommendation:

To consider and comment upon the initial scoping report prior to further exploration and evaluation of an Energy Efficiency Advisory Service.

Introduction and Background

- 1 As the cost of living rises for households across the country, growing energy prices disproportionately impact those on lower incomes. With two thirds (66%) of adults in Britain reporting a cost of living increase, rising energy prices are a growing factor affecting household budgets.
- 2 Whilst many households are aware that their homes are not energy efficient, advice on the most beneficial and cost effective ways to improve energy efficiency is often required. There is a lot of advice available but residents can be concerned that what is being promoted may not be suitable or indeed the best option for their home.
- 3 It is therefore suggested that the Council consider offering a 'one stop' Energy Efficiency advisory service to Sevenoaks residents.

Pilot Energy Efficiency Service

1 Scope of Pilot

To offer an advisory service to residents of Sevenoaks, to include:-

- inspection of property and use of Thermal Imaging Camera to identify potential areas where energy efficiency measures can be put in place;
- To provide a report and energy efficiency recommendations;
- To provide information on possible grant funding and check eligibility;
- For large scale improvements - identify contractors through an approved framework;
- To consider the use of the Handy Person Service for minor improvements;
- To provide a holistic service and signpost to other agencies including HERO.

2 Further Scoping Work Required

Prior to formulating a draft service for consideration, further thought will need to be given to the following:-

- What reliable advice is already available and easily accessible?
- What can a Council-led service offer over and above any free advice that is available?
- Estimate of costs to the Council including the costs of:-
 - Visiting properties
 - Preparation of reports
 - Use of Thermal Imaging Camera
 - Officer Time - including administration, signposting to other agencies/contractors
- Evaluation of potential cost benefit for the Council to procure further Thermal Imaging Cameras (estimated cost per camera = £3,000)

Other options Considered and/or rejected

This is a scoping report and further options will be considered as the exploration of the above continues.

Key Implications

Financial

As above.

Legal Implications and Risk Assessment Statement

Legal implications of providing advice to residents will need to be considered.

Equality Assessment

The decisions recommended through this paper have a remote or low relevance to the substance of the Equality Act. There is no perceived impact on end users.

Net Zero Implications

If such a service was proven to be viable, it would have a positive influence on Net Zero implications.

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Appendices

None

Background Papers

None

Sarah Robson

Deputy Chief Executive and Chief Officer - People and Places

HOME STRAIGHT SERVICE

Housing and Health Advisory Committee - 7 February 2023

Report of: Sarah Robson, Deputy Chief Executive and Chief Officer People and Places

Status: For information

Key Decision: No

Executive Summary:

This report provides information on the Home Straight Service, an initiative to help those with Hoarding Disorder. The service is provided as part of Town and Country Housing Association's Home Improvement and Support Team and is funded at a district/borough level with six Councils selecting to fund the service for the residents in their area.

This report supports the Key Aim of: Housing Strategy 2022-2027

Portfolio Holder: Councillor Kevin Maskell

Contact Officer: Sharon Donald, Housing Strategy Manager, Extension 7131

Recommendation to Housing & Health Advisory Committee:

- a) To note the details of the report and information regarding the Home Straight Service
- b) To endorse a report being presented, for information, to the Housing and Health Advisory Committee (7 February 2023)

Reason for recommendation:

The report is for information only.

Introduction and Background

- 1 The Home Straight Service is part of Town and Country Housing Association's Home Improvement and Support team that also includes a Hospital Discharge Team including Health and Housing Coordinators and a Handy Person Service.
- 2 The Home Straight Service began in Tunbridge Wells almost 5 years ago following observations made by Health and Housing Coordinators that many patients had cluttered or hoarded properties that needed to be cleared to provide a safe home environment for them to be discharged to.
- 3 Following on from the inception of the service in Tunbridge Wells, Sevenoaks District Council joined the following Councils' in accessing this service:-
 - Dartford Borough Council
 - Gravesham Borough Council
 - Thanet District Council
 - Folkestone and Hythe District Council
 - Dover District Council

4 Hoarding Disorder

Hoarding Disorder leads to an ongoing difficulty with discarding possessions, regardless of value or the space to accommodate them. This difficulty is due to a perceived need to save items and the distress associated with disposing of items, regardless of value.

Although hoarding is more common in older adults (55-94 years), it appears to begin at 11-15 years, and starts to cause significant impairment when people are in their 30's.

Hoarding Disorder leads to an accumulation of possessions that overfill and clutter living areas, making these areas difficult to use or move around in and leading to cramped, unmanageable or unhealthy living spaces. In extreme cases, items can become piled floor to ceiling and cover almost all surfaces.

As well as creating dangerous living conditions, this excessive need to accumulate possessions can have a detrimental impact on relationships, and the ability to function in daily life. It can make a person feel ashamed or frustrated at their continued need to acquire items, embarrassed at how they live, isolated from their family and friends as well feeling unable to invite people to their home.

Whether a person's hoarding disorder is mild or severe, just thinking about parting with possessions can be emotionally distressing whilst the beliefs

attached to seemingly worthless items can make trying to discard them be overwhelming with feelings of anxiety, guilt, or sadness.

As the number of items filling a home grows, so too do the health hazards. Despite the mess, clutter, and disorganisation, some people with hoarding disorder do not always recognise a problem in their behaviour. Rather, it may fall on friends or family members to point out the dangers and push for you to make a change.

Local Authorities have always tried to work with householders to identify ways to reduce or eliminate hoarding. Previously, and where the resident was not engaging, Local Authorities have in general served notices on the owner or occupier in an attempt to deal with the immediate problem. However, it was recognised that this often did not deal with underlying issues and the potential for the situation to worsen again.

5 Dedicated Home Straight Officer

Through Town and Country Housing Association's Home Improvement and Support Service, a dedicated Sevenoaks Home Straight Officer has been appointed. Using the Better Care Fund to do so has enabled us to provide this dedicated service for Sevenoaks residents which is flexible and personalised, offering support for those with hoarding behaviours.

The service supports customers in their homes, aiming to address and reduce the risks connected to hoarding. The Home Straight Officer works with customers to declutter homes enabling people to live more safely, providing support to help create happier and healthier lifestyles, while improving physical and mental wellbeing.

This service offers a holistic approach and looks to deal with other potential services customers may require in order to remain in their own home safely such as adaptations and lifelines, which can also be funded through the Better Care Fund.

Working in partnership across the Council, the Home Straight Officer can signpost to other support such as HERO for benefit advice, or the Housing Team if alternative housing needs to be considered. The Home Straight Officer works in partnership with other agencies such as Social Services to provide ongoing support and AGE UK and any other organisations that may be applicable to each individual customer.

Hoarding is a complex issue and the Home Straight Officer is often met with challenges around the delivery of the service. These may include customers cancelling appointments due to anxiety or ill-health or due to hospital appointments or admissions.

Agenda Item 11

The Home Straight Officer will ensure that the process is carefully managed; will go at the customer's pace; involve a mental health professional, maintain a steady presence and balance respect, compassion and gentleness with knowledge and insight and ensure that the customer has the correct ongoing support.

6 Home Straight Referrals

Referrals are accepted into the service from sources including community, health or Housing organisations and can be made through the following contacts:-

Freephone number: 0800 028 3172

Email to HomeStraight@tch.org.uk

Other options Considered and/or rejected

The service is endorsed by other Kent local authorities who had been offering this service prior to our engagement of a Home Straight Officer and, at the time of the Council accessing the Home Straight service, no other agencies delivered this level of provision.

Key Implications

Financial

The resource is provided by the Home Straight Officer who is employed via Town and Country Housing Association and is funded through the Better Care Fund which is allocated to the Council annual. The current contract for the Home Straight service will be reviewed prior to it expiring on the 31 August 2023.

Legal Implications and Risk Assessment Statement

None.

Equality Assessment

The decisions recommended through this paper have a remote or low relevance to the substance of the Equality Act. There is no perceived impact on end users.

Net Zero Implications

The decisions recommended through this paper have a remote or low relevance to the council's ambition to be Net Zero by 2030. There is no perceived impact regarding either an increase or decrease in carbon emissions in the district or supporting the resilience of the natural environment.

Appendices

Appendix A - Home Straight Referrals Data - October 2022

Background Papers

None

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Deputy Chief Executive and Chief Officer - People and Places

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Referring Organisations	Number of referrals received	Unsuccessful/ Not eligible for service/ non engagers	Number of Open referrals	Closed referrals with successful outcome	Cases that involved Hoarding	Case that involved Filthy and Verminous as defined in the Public Health Act	Cases that involved help with Living skills
West Kent Housing Association	5		5		4		1
Orbit Housing Association	0						
Moat Housing Association	0						
Social Services	15	2	6	7	7		3
Town and Country Health and Housing Service	13	2	7	4	8		
Social Prescribers	12	4	2	6	4		1
Community Mental Health	1			1	1		
SDC Private Sector Housing	8		6	2	6	1	
Community Hospital	2	1		1			
Creating Positive Opportunities	1			1	1		
Occupational Therapy	1		1		1		
GP	1		1		1		
Totals	59	9	28	22	32	1	5

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Housing and Health Advisory Committee Work Plan 2022/23 (as at 24/01/23)

14 June 2023

12 September 2023

21 November 2023

23 January 2024

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