



Public Health  
England



**National Institute for  
Health Research**

**School for Public Health Research**

**The Public Health Practice Evaluation Scheme (PHPES)**

Addressing the challenges faced by 'front line' practitioners

## Evaluation of the Sheffield City Council Housing+ programme



**Housing+**

Supporting you,  
your home and your community

**Understanding the impact of Housing+ on the health and wellbeing of council house customers and the way the council delivers its service.**

### Background

Housing+ is a new model for delivering an integrated and enhanced housing service to Council tenants in Sheffield. The Housing+ officer works with a geographically based caseload of between 180 and 330 households. The service involves (as a minimum) undertaking an annual visit which is designed to discuss wider determinants of tenancy sustainability including health, employment, education, home

### Our practitioner partners

The PHPES scheme enables people working in public health, who are introducing innovative initiatives aimed at improving health, to work in partnership with NIHR SPHR to conduct rigorous evaluations of their cost-effectiveness.



NIHR SPHR researchers worked from the University of Sheffield are coproducing the evaluation with Sheffield City Council.

skills, engagement and involvement. Housing+ officers take a holistic approach where the focus is on prevention, dealing with low level issues directly; signposting people to resources within the local community to help prevent problems escalating; and where necessary, referral to other services for more specialist help and support as required. Overall the intervention could be expected to impact on a range of public health outcomes, particularly in relation to implementation of preventive interventions and referrals to appropriate community and health and social care services, contributing to reducing health inequalities.

The aim is to measure the impact of the Housing+ service in terms of any improvements in health and wellbeing of council housing customers and the pathways leading to these changes. Comparisons will be made both to compare the pilot area with the current service and also to measure change longitudinally over two years. This will be achieved by measuring differences in outcomes between the pilot and control areas, and changes in outcomes for all areas over the two years of the evaluation. We will also identify the associated direct and indirect costs and/or savings associated with the intervention.

## Key issues

- The potential role of social housing providers to reduce health inequalities and improve tenant wellbeing has been recognised.
- Housing+ is a new model for delivering an integrated and enhanced housing service
- The evaluation will explore the extent to which changing the organisation and delivery of housing services can impact on tenancy sustainability as well as health and wellbeing.
- The intervention has the potential to improve self-reported wellbeing, social isolation, social capital, fuel poverty, community cohesion, perceived community safety and reduce hospital admissions.

## Key research questions

The overall aim is to measure the impact of the Housing+ service in terms of anticipated and unanticipated changes in health and wellbeing of council housing customers and to understand the pathways leading to these changes.

## Method

An effectiveness and process evaluation employing mixed methods and including an economic appraisal is being conducted. The study involves four components:

1. Documenting the intervention as it is delivered and developing a logic model to map the range of potential pathways and activities.
2. An effectiveness evaluation to quantitatively assess impact by comparing outcomes for clients in the pilot area with those in the rest of the city (via a telephone survey with tenants).
3. A process evaluation to explore aspects of implementation and experiences of staff and clients (through semi structured interviews and focus groups).
4. An economic appraisal to assess costs and wider resource implications including those related to staff training and cost of referral to other services.

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### About PHPES

PHPES projects are:

- **generated by front line practitioners,**
- **designed to provide transferable, robust evidence on the impact of local practice for local practitioners,**
- **developed and delivered in collaboration with NIHR SPHR academics building evaluative capacity in public health practice.**

## Key findings and learnings for practice

- Co-production with Sheffield City Council Housing Staff has contributed to developing the research focus. These stakeholders have also continued to comment on draft documentation as the project progresses.
- Consultation exercises with Housing Officers and Council Housing Tenants contributed to selecting the data collection methods (interviews and focus groups) and developing the interview schedules.

## Public involvement

Community representative views expressed in advisory group meetings have contributed to the direction of the project. Consultation with tenant and resident associations has directly influenced the questions asked by the researchers. Monthly meetings have ensured continued dialogue and information exchange between the researchers and city council.

## What next?

Data from the first year will shortly be analysed and will inform further data collection and analysis in the second year of evaluation.

## SPHR Contact/Find out more

<http://scharr.dept.shef.ac.uk/sphr/our-projects/evaluation-of-the-sheffield-city-council-housing-programme/>



### About NIHR SPHR

The NIHR SPHR aims to build a high quality evidence base for cost-effective public health practices. We work with local practitioners and members of the public, carrying out a wide range of research projects and programmes with a school wide focus on alcohol, ageing well and health inequalities.

### About PHE

Public Health England exists to protect and improve the nation's health and wellbeing, and reduce health inequalities. It does this through world-class science, knowledge and intelligence, advocacy, partnerships and the delivery of specialist public health services. PHE is an operationally autonomous executive agency of the Department of Health.