Bringing together housing and public health
Enabling better health and wellbeing

Wednesday 21 October 2015 | The King’s Fund, London W1G 0AN

About the event

The right home environment is essential to health and wellbeing, throughout the life-course from the early years, through working life and to retirement and beyond. Poor housing, unsuitable housing and precarious housing circumstances affect physical and mental health, and can be a cause and consequence of health inequalities.

At a local level the right home environment is supported and enabled by a diverse range of professions, working primarily in local government, and for housing, care and support providers. Evidence suggests that better integration between the housing, health and public health and social care sectors will enable better health and wellbeing outcomes, and reduce health inequalities.

The recent housing and health Memorandum of Understanding signed by government departments and agencies, sector professional and trade bodies and leading learning networks, sets out an ambition for integration.

Memorandum of Understanding

This conference supports this ambition, and will showcase examples of practice that clearly demonstrate the benefit and value for money gained from such an approach.

Call for integrated policy or practice examples to present at the event

We would like to hear about examples of local policy or practice (evaluated or promising) at this event if it is an example of better integration between housing, health and public health and/or social care, and it fits under one of the categories below:

- promotion of health and wellbeing, through the workforce and/or community centred approaches
- helping improve the economic wellbeing of residents as a means to improving health and wellbeing
- improving conditions and/or suitability of housing in the private sector and its consequences for health
- focussed initiatives improving the lives of vulnerable groups and people experiencing health inequalities
- activity contributing to PHE’s national priorities: alcohol; obesity; dementia; best start in life; tuberculosis.

Oral and poster presentations are welcome.

Oral presentations will be streamed using the life course: start and develop well; live and work well; age well. You will be asked which of these life courses your example is particularly relevant to when you submit your example.
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How to submit your example

2. Enter names and details of the presenters, including contact details.
3. Indicate your preference for the type of presentation: oral or poster.
4. Indicate the type of presentation: policy or practice.
5. Indicate whether your example has been evaluated or is ‘promising’ (further details below).
6. Indicate which of the themes you are submitting under, and which life course stage this is particularly relevant to.
7. Include an abstract of no more than 250 words to describe the intervention (policy or practice) including the following information:

| Brief name | Name or a brief phrase that describes the intervention. |
| Why | Rationale, theory or goals of intervention elements. |
| What and who | Description of the activities and/or processes used in the intervention, and who is involved in delivering |
| How | Description of modes of delivery of the intervention and whether it is provided individually or in a group. |
| Where | Description of the type(s) of location(s) where the intervention will occur, including necessary infrastructure or relevant features. |
| When and how much | Description of the number of times the intervention will be delivered and over what time period |
| Tailoring | If the intervention will be personalised or adapted, description of what, why, when and how. |
| Evidence | Evaluated examples should indicate the evaluation methodology applied and how the example has impacted on health or health behaviours. Promising examples should provide a description of how and by whom the extent to which implementation is consistent with the plan will be assessed, if at all. Examples that include information on value for money will be prioritised |
| Learning and transferability | Description of what you have learnt from this example, and what advice you have for others. |

SOURCE: Revised from HACT/PHE draft standards for evidence: extract from the TIDieR checklist, omitting post-intervention fields and with minor amendments by author for context relevance

Submission deadline

All papers must be submitted by **Friday 24 July 2015**.
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Conference fees

Please note that all selected conference presenters will not be required to pay a fee to attend the conference.

If you submit a paper but are not selected, and you would like to attend the conference you will have to pay a fee, but you will be eligible for a 20% discount.

How your example is reviewed

A panel of reviewers has been drawn from the Memorandum of Understanding national partners. At least three reviewers will consider your submission and will be considering in particular:

- the relevance to the stated ambition of the conference, chosen theme and life course stage
- the content and presentation of the abstract.

Confirming presentations

All submissions will be reviewed by the panel and you will be e-mailed notification of the results of your submission by **Wednesday 5 August 2015**.

*Due to the limited number of time slots available for oral presentations, the panel reserves the right to request that a presenter who submits a preference for an oral presentation, present their work as a poster presentation instead.*