



## Executive – supplement: fuel poverty and health task group appendix

**Monday, 11 April 2011 at 7.00 pm**

Council Chamber, Brent Town Hall, Forty Lane,  
Wembley, HA9 9HD

### Membership:

#### Lead Member Councillors:

#### Portfolio

John (Chair)	Leader/Lead Member for Corporate Strategy and Policy Co-ordination
Butt (Vice-Chair)	Deputy Leader/Lead Member for Resources
Arnold	Lead Member for Children and Families
Beswick	Lead Member for Crime Prevention and Public Safety
Crane	Lead Member for Regeneration and Economic Development
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J Moher	Lead Member for Highways and Transportation
R Moher	Lead Member for Adults, Health and Social Care
Powney	Lead Member for Environment, Planning and Culture
Thomas	Lead Member for Housing and Customer Services

**For further information contact:** Anne Reid, Principal Democratic Services Officer  
020 8937 1359, [anne.reid@brent.gov.uk](mailto:anne.reid@brent.gov.uk)

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**The press and public are welcome to attend this meeting**

# Agenda – supplement: fuel poverty and health task group appendix

Introductions, if appropriate.

Apologies for absence and clarification of alternate members.

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This report sets out the findings and recommendations of the Fuel Poverty and Health Task Group that are being presented to the Executive for approval. The report has been considered and endorsed by the Health Partnerships Overview and Scrutiny Committee.

**Ward Affected:**  
All Wards;

**Lead Member:** Councillor  
**Contact Officer:** Andrew Davies, Policy and Performance  
Tel: 020 8937 1609  
andrew.davies@brent.gov.uk

**Date of the next meeting:**            **Date Not Specified**



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## **Fuel Poverty and the impact it has on health**

### **Health Partnerships Overview and Scrutiny Committee Task Group**

**February 2011**

#### **Membership:**

Councillor Janice Long (Chair)

Councillor Margaret McLennan

Councillor Wilhelmina Mitchell Murray

Councillor Claudia Hector

Councillor Michael Adeyeye

Councillor Reg Colwill

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## Chair's Foreword – Councillor Janice Long



As I write this foreword the UK is experiencing an extended cold spell for the second year running. It's currently -1° Celsius in Harlesden – bitterly cold, and has been for some days now. Whilst many of us can escape the bitter temperatures by retreating to our warm homes, for a significant number of people in Brent this just isn't possible because they are in fuel poverty.

In simple terms fuel poverty is “the inability to afford to adequately heat the home”. There could be many reasons for this, including low income, the size of the home and under occupancy, the price of fuel and energy inefficient homes. Our task group has looked at the causes of fuel poverty and the impact that it is having on health in Brent. We've also investigated the work that is being done to tackle fuel poverty in our borough, with particular focus on how the local health service is involved in this work.

It has been demonstrated in various research projects that fuel poverty and its consequences can have a major impact on physical and mental health and well being. Fuel poverty affects how people are able to cope with COPD and other respiratory problems. Flare ups of these illnesses can be exacerbated by the general state of the home, such as cold homes, cleanliness, clutter, living in one room and other social factors such as diet. These are issues associated with poverty, not just fuel poverty. There are knock on effects on general life as people become more confined to their home, or one room. They go out less, exercise less and therefore their health and wellbeing can deteriorate.

Although there is much good work happening to address fuel poverty in Brent, the task group believes that more could be done particularly working with the local NHS. Engaging health services on this issue is crucial to make the links between fuel poverty and the impact on health. Reducing fuel poverty will benefit local people and all public service providers in Brent and the task group hopes that the local NHS will actively engage on fuel poverty initiatives in the future.

We've made a number of recommendations that relate to the local NHS – both North West London Hospitals NHS Trust and NHS Brent. The task group would like the local NHS to work with Energy Solutions, a local charity working to reduce fuel poverty, to develop a referral pathway for patients who are suspected of being in fuel poverty. One of the things that struck me during the review was the frontline staff, who are working with people in their homes, will come across people in under-heated, damp accommodation on a regular basis – people who are likely to be in fuel poverty. They need a place to refer those clients for appropriate advice and support and in Brent we have to come up with a way of making this happen. A referral pathway is the first step to take with this.

Throughout the review the importance of partnership working was stressed to the task group. Tackling fuel poverty cannot be the responsibility of one organisation – it has to be addressed in a collaborative way by the council, NHS, voluntary sector, housing landlords and the private sector. Experiencing the weather that we are currently reinforces my view that this is an issue that needs urgent attention if the health and wellbeing of many of our residents isn't going to be further affected.

Councillor Janice Long  
6<sup>th</sup> December 2010

## Executive Summary

It has been demonstrated in various research projects that fuel poverty and its consequences can have a major impact on physical and mental health and well being. Brent Council's Health Partnerships Overview and Scrutiny Committee established this task group to look at the effect that fuel poverty has on peoples' health in Brent.

Fuel poverty is "the inability to afford to adequately heat the home". A household is said to be in fuel poverty if it needs to spend more than 10% of its income on fuel. In 2008, the number of households in fuel poverty in the UK was estimated to be around 4.5 million which is approximately 18% of all households. It has been difficult for the task group to quantify the number of households in Brent in fuel poverty. Data released by government has a significant time lag and by most estimates, likely to be below the true level of fuel poverty in the borough. Although the true amount of fuel poverty in Brent is uncertain, 20% has been a common figure that the task group has heard.

The impacts of fuel poverty on health and wellbeing are multiple. Fuel poverty and the affect of a cold home can lead to or exacerbate the following health conditions and social issues:

- Heart attack and stroke
- Chronic obstructive pulmonary disease (COPD) and respiratory infections
- Asthma
- Worsening arthritis
- Falls and other accidents
- Mental health problems
- Heat or eat choices
- Children's education can suffer as a result of asthma attacks or recurrent respiratory infections leading to days off school

Work is taking place in Brent to tackle fuel poverty. We are fortunate to have a local charity, Energy Solutions that works on fuel poverty issues in our borough. As well as providing fuel debt advice, Energy Solutions will carry out home visits to check whether people are eligible for grant funding to pay for fuel poverty mitigation measures, such as cavity wall insulation or loft insulation. The task group heard many positive things about Energy Solutions, but it is also aware of how stretched their resources are. Changes to grant funding allocations, which are detailed in the report, could lead to increased demand for Energy Solutions services – there will be less funding to spend on fuel poverty mitigation, meaning that more people could fall into fuel debt or suffer the health and wellbeing consequences of being in fuel poverty.

The task group's recommendations are split into four main areas –

- advice and information
- improving energy efficiency of the housing stock and reducing fuel bills
- working with landlords; and
- working with the NHS

Although there is good work happening to address fuel poverty in Brent, the task group believes that more could be done. Engaging the local NHS on this issue is crucial to make the links between fuel poverty and the impact on health. Reducing fuel poverty will benefit local people and all public service providers in Brent and the task group hopes that the local NHS will actively engage on fuel poverty initiatives in the future. Indeed, the task group believes that NHS investment in schemes to tackle fuel poverty could ultimately lead to cost savings if fewer people suffer ill health as a result of living in warmer homes. At this time of

unprecedented financial pressure, the task group believes that effort should be made to invest in ill health prevention to reduce spending on treatment.

In order for this to happen buy-in to fuel poverty work is needed from the top of the local NHS, as well as the council. The task group is recommending that the council works with partners to produce an affordable warmth strategy in order to develop a coherent and focussed plan to tackle fuel poverty in the borough. In addition to this, the Local Strategic Partnership will be encouraged to take up fuel poverty as one of its areas of work to bring together the council, the local NHS and voluntary sector to work through ways to better use resources to tackle this problem.

There are two other areas where the task group hopes action can be taken. The first is in relation to a comprehensive referral network for people in fuel poverty. The task group was told that many frontline NHS and council staff see people in their homes who are likely to be in fuel poverty. Knowing where to refer those people for help is crucial. The task group is recommending that partners work with Energy Solutions to try and put in place a comprehensive referral network so that staff can confidently refer people they suspect of being in fuel poverty to a place where they will receive informed advice and guidance.

Secondly, the task group is keen that the council does all it can to encourage landlords to ensure their properties are as fuel efficient as possible. This doesn't just require enforcement, but can be done in other ways. The task group has recommended that the council continues to require landlords to provide properties with at least a D rating under the Energy Performance Certificate system before it is used for temporary accommodation or housing for people placed by the council. The task group wants the council to demonstrate its commitment to improving the standard of accommodation in Brent, starting with the private sector accommodation it uses.

Above all the report makes clear that tackling fuel poverty cannot be the responsibility of one organisation – it has to be tackled in a collaborative way by the council, NHS, voluntary sector and private sector. The task group hopes that organisations in Brent can work together to address this issue that is having such a detrimental impact on the lives of many local people.

## Recommendations

The task group's recommendations are:

**Recommendation 1** – The task group recommends that Energy Solutions and Brent Council's Voluntary Sector Team work with advice providers in Brent to develop a consistent and co-ordinated fuel debt advice service in Brent.

**Recommendation 2** – The task group recommends that Brent Council's Housing Policy Team works with Energy Solutions and local RSLs to help broker an agreement for Energy Solutions to be compensated for providing fuel debt advice for housing association tenants in Brent.

**Recommendation 3** – Recommendation 3 – The task group recommends that officers in the council's Environmental Projects and Policy Team work with Energy Solutions to monitor the emerging funding and policy environment in relation to fuel poverty, so that Brent is able to respond to new funding opportunities if they become available post April 2012.

**Recommendation 4** – The task group recommends that the council does not arrange for installation of pre-payment energy meters in its properties or properties used for temporary accommodation and instead refers the tenants and residents that request this service to Energy Solutions for advice on energy efficiency and fuel debt.

**Recommendation 5** – The task group recommends that officers in the council's Environmental Projects and Policy Team works with officers from NHS Brent and North West London NHS Hospitals Trust to resurrect the planned fuel poverty and health campaign and implement this in Brent.

**Recommendation 6** – The task group recommends that the council continues to require landlords to provide properties with at least a D rating under the Energy Performance Certificate system before it is used for temporary accommodation or housing for people placed by the council. This standard should be enforced even if pressure on private sector properties increases as a result of changes to housing benefit rules, and if the council needs to use properties outside of Brent to place people.

**Recommendation 7** – The task group recommends that Brent Private Tenants Rights Group presents the findings from its mystery shopping of landlords to the appropriate overview and scrutiny committee to see if the council should be taking additional action as a result of this work.

**Recommendation 8** – The task group recommends that NHS Brent and GPs work to include a question on fuel poverty in their screening of over 75s, to help track the extent of the problem and to refer them to appropriate advice. This could be done on a trial basis and if successful rolled out across the borough.

**Recommendation 9** – The task group recommends that staff from NHS Brent and North West London NHS Hospitals Trust work with Energy Solutions, supported by the council, to develop an appropriate referral pathway for patients who are suspected of being in fuel poverty. The referral pathway should involve as wide a range of organisations as possible and could build on the Hot Spots scheme that already exists in Brent. Energy Solutions should be appropriately funded by the NHS for facilitating a referral network.

**Recommendation 10** – The task group recommends that North West London NHS Hospitals Trust investigates the possibility of running fuel poverty advice sessions with Energy Solutions at their respiratory clinics. Energy Solutions should be funded to carry out this work.



**Recommendation 11** – The task group recommends that Brent Council, with partners, develop an affordable warmth strategy for Brent to enable the borough to develop a coherent and focussed plan to tackle fuel poverty within existing resources.

**Recommendation 12** – The task group recommends that Brent Council considers the feasibility of undertaking a stock condition survey in order to produce a more accurate picture of fuel poverty in the borough and a basis from which to chart measures put in place to tackle it.

**Recommendation 13** – The task group recommends that Brent’s Local Strategic Partnership hosts a fuel poverty event to begin to address the wider issues outlined in this report and to promote the partnership approach involving the council, NHS and voluntary sector to bring more people out of fuel poverty.

## **Introduction**

Brent Council's Health Select Committee (now known as the Health Partnerships Overview and Scrutiny Committee) established a task group to look at the effect that fuel poverty has on peoples' health in Brent. It has been demonstrated in various research projects that fuel poverty and its consequences can have a major impact on physical and mental health and well being. There are also specific factors in Brent that led members to select this topic, such as the high proportion of housing in the private rented sector (where the proportion of households in fuel poverty is highest), the relative deprivation of the borough, particularly income deprivation and the general health inequalities that exist in Brent – there is a nine year difference in life expectancy between males in Harlesden in the south of Brent and Northwick Park in the north. Members were interested to know how fuel poverty contributes to health inequalities in Brent.

This work is part of a wider scrutiny project in North West London that is looking at the relationship between housing and health inequalities. Funding has been provided by the Centre for Public Scrutiny to support this work, and Brent's report will be used in a tool kit to assist other councils carrying out housing and health inequalities scrutiny reviews. The other boroughs taking part in this work, and their work areas were:

- Health and the Built Environment – Hounslow and Hammersmith and Fulham
- Fuel Poverty/Energy Efficiency – Brent and Ealing
- Overcrowding – Kensington and Chelsea and Westminster
- Overcrowding and its impact on children's educational – Hillingdon

Given that this was part of a wider review looking at the links between housing and health, it was important that fuel poverty was picked up as an issue.

## **Review methodology**

In order to carry out their review the fuel poverty and health task group:

- Carried out a review of literature and discussions with housing and health providers on the links between fuel poverty and health;
- Reviewed the means (i.e. grants and income maximisation advice) currently available to both residents and landlords to promote energy efficiency and reduce fuel poverty, of the various agencies involved, and what the take up of these services are;
- Reviewed fuel poverty and affordable warmth strategies currently in place and best practice examples;
- Discussed fuel poverty and health with local energy agencies;
- Held discussions with housing departments and providers on the actions used to promote energy efficiency in social and council housing, and how private sector households in fuel poverty are targeted and reached;
- Discussed with GPs and local health service providers referrals to advice on fuel poverty and affordable warmth. They also considered hospital admissions data for illnesses connected to cold homes and fuel poverty, including the costs to the health service of these admissions;
- Consulted with residents by carrying out a survey to learn more about the effects of fuel poverty on peoples' health and wellbeing.

The task group interviewed the following people during their work:

- Jeff Bartley, Environmental Projects and Policy Manager
- Matt Sheen, Energy Solutions
- John Palmer, Sustainability Manager, North West London Hospitals NHS Trust

- Tony Hirsch, Head of Housing Policy
- Jacky Peacock, Executive Director, Brent Private Tenants Rights Group
- Maria Buxton, Respiratory Physiotherapist Consultant, North West London Hospitals NHS Trust
- Margaret Magee, Annalisa Tonge, Monica Bowles and Sandra Henry – Short Term Assessment, Rehabilitation and Reablement Service, North West London NHS Hospitals Trust
- Perry Singh, Assistant Director Housing Needs/Private Sector Housing and Phil Mitchell, Head of Enforcement Service, Private Housing Services
- Simon Bowen, Acting Director of Public Health

### **Task group membership**

The task group members were:

- Councillor Janice Long (chair)
- Councillor Margaret McLennan
- Councillor Wilhelmina Mitchell Murray
- Councillor Claudia Hector
- Councillor Michael Adeyeye
- Councillor Reg Colwill

The task group was supported by Andrew Davies, Policy and Performance Officer.

### **National Context**

#### **Definition of Fuel Poverty**

In simple terms, fuel poverty is “the inability to afford to adequately heat the home”<sup>1</sup>. A household is said to be in fuel poverty if it needs to spend more than 10% of its income on fuel. However, it is worth noting that there is some debate about the most appropriate definition of fuel poverty, dependent on which version of income is used to calculate prevalence. For example, the Greater London Authority has found that when using a ‘residualised’ measure of income (a measure of income which excludes housing costs) the incidence of fuel poverty in London rose to 24% or 760,000 households in 2008, which is considerably more than the government’s ‘full income’ definition which gives a rate of 10%.<sup>2</sup> Despite the different definitions when the task group refers to fuel poverty it is talking about households spending 10% of their income on fuel (which is the government’s definition).

#### **Number of households in fuel poverty**

In 2008, the number of households in fuel poverty in the UK was estimated to be around 4.5 million, a rise of around 0.5 million from 2007. This represents about 18% of all households. The UK figure is based on latest figures for England and Scotland, along with extrapolated estimates for Wales and Northern Ireland, which are both based on earlier figures.<sup>3</sup>

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<sup>1</sup> National Energy Action definition

<sup>2</sup> ‘Fuel Poverty in London: Figures and Tables illustrating the challenge of tackling fuel poverty’, Greater London Authority, September 2008, p16

<sup>3</sup> Annual report on fuel poverty statistics 2010 – Department of Energy and Climate Change

**Table 1 - Fuel Poverty in England and the UK**

Fuel poverty (millions of households)	1996	1998	2001	2002	2003	2004	2005	2006	2007	2008
<b>England (all)</b>	5.1	3.4	1.7	1.4	1.2	1.2	1.5	2.4	2.8	3.3
<b>Vulnerable households</b>	4	2.8	1.4	1.2	1	1	1.2	1.9	2.3	2.7
<b>UK (all)</b>	6.5	4.75	2.5	2.25	2	2	2.5	3.5	4	4.5
<b>Vulnerable households</b>	5	3.5	2	1.75	1.5	1.5	2	2.75	3.25	3.75

### **What causes fuel poverty?**

There are four main causes of fuel poverty. They are:

- Low income
- Size of home and under occupancy
- Price of fuel or the inability to access cheaper fuel
- Energy inefficient homes

#### *Income*

Given that fuel poverty is linked to deprivation it is unsurprising that there is a heavy concentration of fuel poverty amongst lower income households, with the lowest 30% of income households accounting for nearly 90% of fuel poverty in England. In recent years, increasing fuel prices have led to a gradual rise in the rate of fuel poverty amongst the higher income deciles. Historically households in these deciles were only fuel poor because of a very high modelled bill, through under occupying their dwelling, or having a very inefficient dwelling, price rises in recent years now mean that there are more fuel poor observed in the higher income deciles.

#### *Size of home and under occupancy*

The small number of occupants in a house compared to the size of a house often leads to fuel poverty. The government has identified that households in the worst degree of fuel poverty tend to occupy accommodation that is significantly large in area, especially single, elderly people. Under occupancy occurs mainly where children have left home or a spouse has died leaving one person in a house larger than necessary for their needs, but where they are often reluctant to move.

#### *Impact of rising fuel prices*

The biggest contribution to increasing fuel poverty between 2007 and 2008 was rising fuel prices. Although incomes nationally rose between 2007 and 2008, this rise was at a slower rate than between 2006 and 2007, possibly influenced by the economic slowdown. This is likely to continue into 2009, putting greater pressure on households to remain out of fuel poverty, particularly if the cost of energy continues to increase. Prices have risen at a rate well above that of income since 2004 and this has caused fuel poverty to rise from around 1.2m households in England to 3.3m in 2008.

Between 1996 and 2005, prices for domestic energy had risen more slowly than general inflation. However, between 2004 and 2009, annual price increases for energy outstripped general price increases. For example, in 2006 the RPI put general inflation at around 3% but domestic energy prices increased by nearly 25% contributing to the rises in fuel poor households. Fuel prices are also predicted to rise through 2010/11. For example, Scottish

and Southern Energy is upping its gas tariff by 9.4% for its 3.6 million customers from 1<sup>st</sup> December 2010, with other energy providers likely to do the same.<sup>4</sup>

### *Energy efficiency*

In addition to raising household incomes and looking at the costs of energy bills, it is also very important to improve the energy efficiency of the home. Heat is lost from the home in a number of ways:

- 35% is lost from a standard home through walls.
- 25% is lost through roofs
- 15% through floors
- 15% through doors
- 10% through windows.

There are a number of measures that can be installed in the home to reduce heat loss and lower energy bills including:

- Draught proofing
- Cavity wall insulation
- Loft insulation
- Double/secondary glazing
- In addition, installing a high efficiency boiler and controls will also help to reduce costs.

Households living in private rented accommodation have higher likelihood of living in fuel poverty – 16% of households in private rented accommodation are in fuel poverty compared with 11% in other tenures. However, the housing tenure with the greatest number of people in fuel poverty is owner occupied housing. Two thirds of households in fuel poverty own their own home.<sup>5</sup> Fuel poverty is also more likely to affect older people. The charity National Energy Action (NEA) estimates that 50% of the fuel poor are over 60 years old.<sup>6</sup> Action to tackle fuel poverty should be aimed at older owner occupiers and the private rented sector in order to have the biggest impact.

### **Effects of fuel poverty**

Fuel poverty has a number of detrimental effects which can't be understated. A low income household may try to maintain a comfortable temperature in their home, but could fall into fuel debt as a result. Being in debt to energy companies and dealing with the consequences of this can lead to stress for the individuals concerned.

Fuel poverty has a physical impact on the condition of homes if householders try to minimise their fuel bills. Inadequate heating can lead to some or all of the following problems:

- Condensation, dampness and mould growth
- Deterioration of the property
- Increased maintenance and repair costs
- Reduction of the asset value of the property

There is little doubt that cold housing is a health risk. The Marmot Review, "Fair Society, Healthy Lives", neatly summarises the importance of a warm home. The review says that

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<sup>4</sup> The Guardian – 29<sup>th</sup> October 2010

<sup>5</sup> Fair Society, Healthy Lives – The Marmot Review

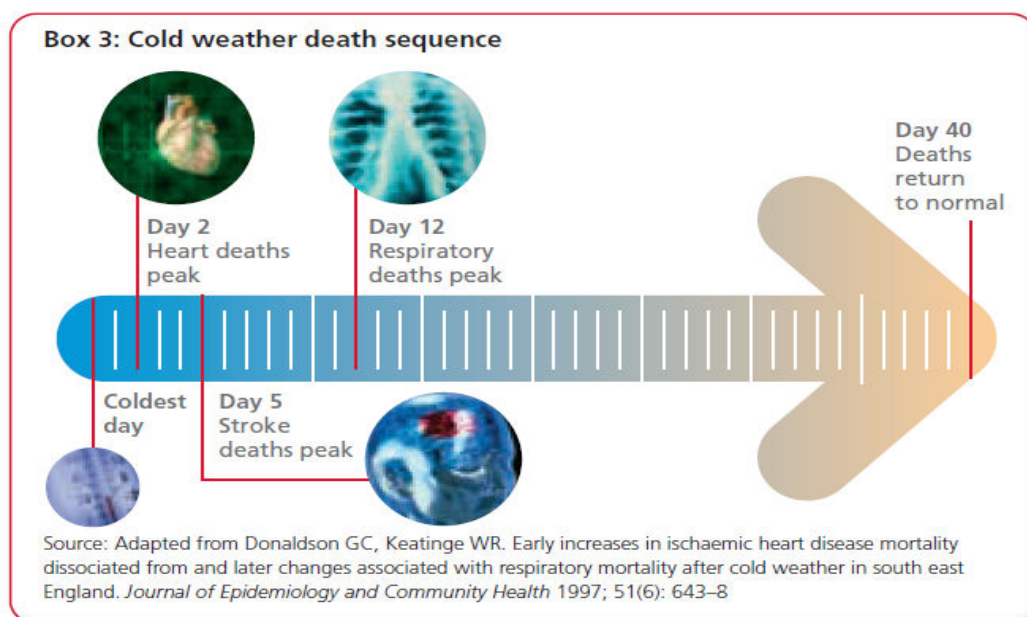
<sup>6</sup> National Energy Action presentation at Ealing Council – May 2010

cold is believed to be the main cause of extra winter deaths that occur each year between December and March. Winter deaths continue to happen in the UK despite government policies to reduce the number of cold homes and prevent the risk of ill health due to cold among families with children, older people and those with a disability or long-term illness.<sup>7</sup> Between December 2008 and March 2009 there were 36,700 additional deaths in England and Wales.

Most winter deaths are unnecessary and preventable. Much colder countries than the UK, such as Finland and Russia, have lower levels of excess winter mortality. Compared with colder countries, at the same outdoor temperature living rooms in the UK are colder and bedrooms are less likely to be heated.<sup>8</sup>

The main illnesses associated with fuel poverty are cardio vascular disease and childhood asthma. North West London NHS Hospitals Trust reports that during the winter months (October to March) admissions for the illnesses associated with the cold are around 300 a month higher than the average during the summer months. Whilst not all of them will be connected to cold homes or fuel poverty, winter has the greatest proportional effect on respiratory disease.

The chart below shows what happens following a cold snap, and the impact it has on respiratory conditions in the days immediately following the coldest day in a given spell. As can be seen, the full impact of cold weather can take over a month to work itself through, with death rates only returning to normal levels 40 days after the coldest day.



The impact of illnesses and the social effects associated with fuel poverty are set out below:

- **Heart attack and stroke** - Blood pressure rises in the elderly following exposure to temperatures below 12°C. The risk of heart attacks and strokes increases with increasing blood pressure.
- **Chronic obstructive pulmonary disease (COPD) and respiratory infections** - Temperatures below 16°C are thought to lower resistance to respiratory infections.

<sup>7</sup> Fair Society, Healthy Lives – The Marmot Review

<sup>8</sup> Fuel Poverty and Health – A guide for primary care organisations, and public health and primary care professionals

Damp leads to growth of mould and fungi that can cause respiratory infections. The cold impairs lung function and is an important trigger of broncho-constriction in COPD.

- **Asthma** - Damp leads to growth of moulds and fungi that can trigger attacks. The cold impairs lung function and is an important trigger of broncho-constriction in asthma.
- **Worsening arthritis** - Cold, damp environments worsen the symptoms of arthritis.
- **Falls and other accidents** - A cold home increases the risk of falls amongst elderly people. There is also an increased risk of accidents due to loss of strength and dexterity in the hands.
- **Mental health problems** - Cold and damp housing has also been associated with increased mental health problems. Stress levels can increase due to fuel debt and other financial problems. People can become more socially isolated. Householders that are economising are less likely to socialise outside of their homes, while they may also be embarrassed to invite their friends into a cold, damp home. Such isolation can lead to depression and is also a risk factor for coronary heart disease.
- **Heat or eat?** - Choices may need to be made between spending on healthy food and on fuel bills, with the result being poor diets or a cold home. This can eventually lead to increased long-term health risks of cancer and coronary heart disease.
- **Children's education** - School days can be lost as a result of asthma attacks or recurrent respiratory infections, and in many cold homes only some rooms are heated, resulting in children not having a quiet space in which to concentrate on homework. This in turn can lead to reduced academic achievement and potentially excluding them from a range of life opportunities.

Research has been carried out which has shown that improvements in housing conditions have a positive impact on health and wellbeing, including lower rates of mortality, improved mental health and lower rates of contact with GPs. Significant improvements in health-related quality of life were found in a randomised controlled trial of home insulation, which concluded that targeting home improvements at low-income households significantly improved social functioning and both physical and emotional well-being (including respiratory symptoms). It has been argued that the decent homes standard has been one of local governments' biggest public health programmes in recent years, improving the thermal comfort of thousands of homes.<sup>9</sup>

### **Fuel Poverty in Brent**

Housing is responsible for 30% of carbon emissions in Brent<sup>10</sup> and so improving energy efficiency is important for the environment as well as to improve living conditions and the health and wellbeing of local people. The housing stock in Brent is made up of the following tenures<sup>11</sup>:

- Owned outright – 25%
- Buying on a mortgage – 31%
- Renting from the council – 9%

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<sup>9</sup> Professor Michael Marmot – LGA Conference November 2010

<sup>10</sup> Shaping the Future of Housing in Brent – Housing Strategy 2009-2014

<sup>11</sup> Mori, Place Survey, 2008-09

- Renting from a Housing Association/Trust – 12%
- Rented from a private landlord – 20%

The Marmot review identified households in private rented accommodation as being more likely to be living in fuel poverty, this issue is particularly important for Brent, which has a relatively high number of properties in the private rented sector. Additionally, 56% of households are either owner occupiers or in the process of buying their home, using a mortgage. People who own their homes can often end up in fuel poverty, particularly older people in large, under occupied homes. The decent homes standard that applies to council properties and RSL properties has led to an improvement in the fuel efficiency and comfort of these properties. In Brent, the vast majority of social housing meets the decent homes standard.

Fuel poverty is closely linked to deprivation. The risk of a household being in fuel poverty rises sharply as income falls.<sup>12</sup> Whilst areas of Brent are relatively affluent, parts of the borough continue to experience high levels of deprivation. Brent is ranked 53<sup>rd</sup> out of 354 boroughs in the Index of Multiple Deprivation (IMD) 2007 (1 = Most Deprived, 354 = Least Deprived). This means that Brent is in the 15% most deprived local authorities in the country. Brent is also the most deprived borough in North West London.

Income deprivation is a major issue in Brent which will be contributing to fuel poverty in the borough. Brent has one of the lowest average annual incomes compared to the rest of London. In 2009 the average household annual income for Brent residents was £31,430; this was a decrease from the 2008 figure of £33,026. Brent has the 3<sup>rd</sup> lowest average income levels in London and there are 21,504 households in Brent (20.4%) that have an average annual income of £15,000 or less.<sup>13</sup>

Specific data on fuel poverty in Brent has been published by the Department for Energy and Climate Change. The latest figures are from 2008. As can be seen in the table below, 12.7% of households in Brent are said to be in fuel poverty, the third highest in London. This has increased from 10.2% in 2006.

**Table 2 - % of Households in Fuel Poverty (2008)<sup>14</sup>**

Local Authority	% of households in Fuel Poverty
Newham	13.7%
Hackney	13.5%
Brent	12.7%
Haringey	12.7%
Islington	12.5%
Barking and Dagenham	12.1%
Waltham Forest	12.0%
Camden	11.9%
Kensington and Chelsea	11.7%
Westminster	11.6%

Although these are the official fuel poverty statistics, the task group heard from a number of witnesses that there could be as many as 20% of households in the borough affected and it is likely that this is an underestimation.

<sup>12</sup> Fair Society, Healthy Lives – The Marmot Review

<sup>13</sup> Brent Evidence Base 2010

<sup>14</sup> Department of Energy and Climate Change Fuel Poverty Statistics



## Households with low SAP ratings

The Standard Assessment Procedure or SAP rating is used to give a measure of the overall energy efficiency of a dwelling. The higher the SAP rating the more energy efficient the dwelling will be. The information that Brent has on SAP ratings is a little out of date as a housing stock condition survey hasn't been carried out in the borough for some time. However, the Private Sector Housing Strategy: 2005-2010 contains comprehensive information on SAP ratings from 2003.

In 2003, the average SAP rating for Brent was 52. An estimated 7.4% of dwellings had a SAP of below 30. Owner-occupied (no mortgage) dwellings showed the lowest mean SAP rating, the highest being for RSL dwellings. However, according to the Brent Council Environment Report: 2005-2009, the SAP rating for BHP properties had improved to 65.<sup>15</sup>

Typically the older the dwelling, the lower the SAP rating. Dwellings built pre-1964 had an average SAP of around 50. The highest mean SAP is found in dwellings built post-1964. Most properties in the borough were built prior to 1964.

SAP ratings vary between different types of households. Households living in the least efficient homes (that is in a home with a SAP rating of 30 or less) tended to:

- live alone – 37.8% of the least efficient homes contain only one person, whereas only 27.5% of all households are single person households.
- be elderly – 31.9% of the least efficient homes only contain elderly people, 16.9% of all households are only older people.
- have special needs – 13.2% of the least efficient homes contain someone with a special need compared with 10.6% of all households.
- have low incomes – the average gross earned income of households in the least energy efficient homes is £17,355 compared with £23,028 for all households<sup>16</sup>.

Energy Solutions have provided the council with estimated SAP ratings for private sector housing in Brent up to 2010. These do not differentiate between properties in the private rented sector and those that are owner occupied.

**Table 3 – Estimated SAP ratings for private sector dwellings in Brent**

Year	SAP Rating
April 2006	56
April 2007	58
April 2008	59
April 2009	59.4
April 2010	68

SAP ratings in the borough appear to be improving although there is a significant increase from 2009 to 2010 which is being investigated to ensure this is accurate, and if it is, to understand why there has been such an improvement.

<sup>15</sup> Brent Council's Environment Report: 2005-2009

<sup>16</sup> Brent Private Sector Housing Strategy: 2005-2010

## Key Findings

### Fuel Poverty Services in Brent

It has been difficult for the task group to establish a reliable figure for the number of people living in fuel poverty in Brent. Statistics on fuel poverty are either unreliable or out of date – the government has produced information (table 2 above), but although the data was released in 2010 it relates to 2006. Councils survey residents each year for NI 187 – “Tackling fuel poverty: Percentage of people receiving income based benefits living in homes with a low and high energy efficiency rating”, but nobody interviewed by the task group thought that this data was robust or accurate. As many as 20% of Brent’s population could be in fuel poverty and this may even be an underestimation of the problem. The survey carried out for the task group shows that over 30% of respondents consider themselves to be in fuel poverty (see appendix 2). The areas of Brent most likely to be affected by fuel poverty are likely to be the most deprived areas of the borough. However, there will be pockets of fuel poverty across Brent. For example, older people living in larger houses in the north of Brent that are under-occupied – in crude terms, “asset rich, cash poor”.

The fuel poverty and energy action charity National Energy Action believe that there are four key steps to eradicating fuel poverty. They are:

- Income maximisation
- Price of energy
- Energy efficiency
- Working with landlords

The task group has investigated the efforts that are being made in Brent to eradicate fuel poverty, focussing on these four areas.

### Income maximisation

Many people interviewed by the task group believed that raising income is crucial to tackling fuel poverty, especially for elderly people living on fixed incomes. If people are entitled to benefits they should be claiming them. However, around £4.5bn income related benefits went unclaimed by pensioners in the UK in 2008/09 and almost half of owner occupiers in the UK didn’t claim the pension credit they are entitled to.<sup>17</sup> It has been suggested to the task group that an income maximisation project focussing on the over 75s would help some of the most vulnerable people in the borough to heat their homes adequately in winter.

Often people need advice to enable them to claim the benefits they’re entitled to. Brent Council has contracted its fuel poverty advice work to Energy Solutions. Energy Solutions is based in Brent and has a charitable section which delivers energy advice and fuel poverty services to local residents and a separate consultancy business which delivers a range of professional services related to energy efficiency and sustainability across North West London. Housing and Community Care and Environment and Neighbourhood Services provide funding to Energy Solutions for their work on fuel poverty. There is one member of staff working full time on fuel poverty issues, plus one part time member of staff. Three other members of the staff provide additional administrative, strategic and fundraising/accounting support as required for the delivery of the fuel poverty services. Energy Solutions uses established links and partnerships to refer clients to the local Job Centre Plus or the DWP/Pension Service for a free benefit entitlement check to ensure their incomes are

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<sup>17</sup> Joseph Roundtree Foundation Website – [www.poverty.org.uk](http://www.poverty.org.uk)

maximised. This is an important part of the debt advice service. It is interesting to note that of those people on benefits who responded to the task group's fuel poverty survey only 21% had received a benefits entitlement check (see appendix 2).

Energy Solutions has established a fuel debt advice service for vulnerable people living in Brent. The service is open to residents of all tenure and occupancy types. Energy Solutions helps people to secure debt right offs, advocate on the client's behalf with utility suppliers where disputes around billing and metering arise and ensure people are on the most appropriate billing tariff for their circumstances. They will also help people switch from electric to gas heating – electric heating can be three times more expensive. Since April 2010 Energy Solutions has been in contact with over 500 residents about their fuel bills or energy use, carried out 217 home visits and secured over £23,000 of fuel debt write offs.

The task group was informed by Energy Solutions that attempts to work with other organisations that may provide fuel debt advice, such as the Brent Citizens Advice Bureau, had not been successful. Fuel debt advice is a specialist area of advice and Energy Solutions would be keen to engage other advice providers to work with them to provide a more co-ordinated and consistent service in Brent. The task group agrees with this and recommends that Energy Solutions works with Brent Council's Voluntary Sector Team to engage other advice providers on this issue and develop a co-ordinated fuel debt advice service for Brent.

**Recommendation 1 – The task group recommends that Energy Solutions and Brent Council's Voluntary Sector Team work with advice providers in Brent to develop a consistent and co-ordinated fuel debt advice service in Brent.**

Housing associations have been keen to take up the fuel debt advice provided by Energy Solutions for their tenants. However, to date, it has not been possible to agree a service level agreement to ensure that Energy Solutions are compensated for this work (Energy Solutions will not charge the client). Energy Solutions would like to develop an SLA with interested RSLs and the task group would encourage this. The task group recommends that the Housing Policy Team helps to broker an agreement between Energy Solutions and local RSLs for the provision of fuel debt advice for housing association tenants in Brent.

**Recommendation 2 – The task group recommends that Brent Council's Housing Policy Team works with Energy Solutions and local RSLs to help broker an agreement for Energy Solutions to be compensated for providing fuel debt advice for housing association tenants in Brent.**

### **Grant funding**

When the task group began their work looking at fuel poverty in Brent, there were two main grants available to people wishing to improve the energy efficiency of their home:

- Warm Front provides grants for heating and insulation to people in receipt of certain qualifying benefits. Warm Front is a national scheme and operates with central annual budget which is allocated on a first come first serve basis.
- London Warm Zones provide insulation and heating and is available free to people classed as being in the "priority group". For all other clients, classed as the 'Able to Pay' (ATP), the scheme provides a range of energy efficiency services at heavily discounted rates. Warm Zones is 50% funded by EDF Energy under their CERT obligation funding and 50% by the GLA's Target Funding Stream (TFS). The Warm Zone grant allocation for Brent is spent each year and there is always a waiting list of people wanting heating and insulation measures. Energy Solutions has negotiated successfully with other west London boroughs in the scheme to spend their funding, where it is known there will be an underspend. Up to June 2010, 2,600 homes in

Brent had benefited from a Warm Zones grant, most of it spent on cavity wall insulation and loft insulation. More homes have benefited from cavity wall insulation in the north of the borough than the south.

It is worth noting that neither Warm Front or Warm Zones are emergency services, should heating systems fail altogether. There is also a national shortage of heating and insulation installers which leads to a back log of improvement works.

Energy Solutions administer these grants in Brent. Most, but not all of the people advised by Energy Solutions live in the private sector, either in their own home or in rented accommodation. Referrals generally come from word of mouth although Energy Solutions target people living in the private rented sector and landlords to encourage them to take up the grants available for improvements to the home. However, despite this we know that take up of grants among tenants renting in the private sector is very low. Around 4-5% of the Warm Zones jobs carried out each year in Brent are in this sector, the rest carried out in properties owned by the occupier.

The Government's Comprehensive Spending Review confirmed that funding for Warm Front would be cut from £340m per year to £110m per year, although the scheme will run until 2012/13. This will obviously affect the amount of funding that will be available in Brent and will be detrimental to those in fuel poverty who are eligible for this grant, but will miss out on improvements to their home as a result of this reduction. Warm Zone funding will come to an end in April 2012. Energy firms will be expected to provide grant funding to replace reductions in Warm Front funding through the Energy Company Obligation and the introduction of the Green Deal in 2012 to improve energy efficiency and warmth of homes, but it is not clear how much money will be available. Energy companies are also required to put in place carbon reduction programmes, but this is different to alleviating fuel poverty.

There is a greater number of grants available to reduce carbon emissions rather than tackle fuel poverty. Bringing people out of fuel poverty can, in some cases, actually lead to higher CO2 emissions and it is not the same as carbon reduction. For instance, if a household is brought out of fuel poverty by increasing their income they may use more domestic energy because they can afford to do so. This will increase their CO2 emissions. This is why income maximisation work needs to dovetail with projects to improve the energy efficiency of homes in Brent.

The task group is concerned that Warm Zone and Warm Front funding won't be adequately replaced by the Green Deal, which is likely to be the major national energy efficiency scheme. Although energy suppliers will have separate obligations to fund programmes for the most vulnerable and fuel poor, exact details have not been decided nor is it clear how this will translate into borough wide schemes. Therefore, the task group recommends that officers, working with Energy Solutions, monitor this emerging situation so that Brent is able to respond to any funding sources that become available post April 2012 for domestic energy efficiency / fuel poverty projects.

**Recommendation 3 – The task group recommends that officers in the council's Environmental Projects and Policy Team work with Energy Solutions to monitor the emerging funding and policy environment in relation to fuel poverty, so that Brent is able to respond to new funding opportunities if they become available post April 2012.**

### **Price of energy**

As stated above, the biggest contribution to increasing fuel poverty in recent years has been rising fuel prices. Fuel poverty dropped significantly from 1996 to 2004 (table 1) because of work done to help raise incomes (for example, the introduction of the minimum wage). Since then, fuel poverty has increased as fuel prices have risen significantly above the level of

inflation. Using different methods of paying for energy could help residents to save money and alleviate fuel poverty.

The task group was informed by a number of people interviewed that pre-payment meters were one of the most expensive ways to pay for energy, but they are common in the private rented sector in Brent. Unfortunately many are installed at the request of tenants to help them budget, perhaps unaware that they are more expensive than a normal meter. Nationally the number of people in fuel poverty using a pre-payment meter has fluctuated in recent years. In 2003 and 2004 the rate of fuel poverty was greatest amongst those paying for their electricity and gas by pre-payment meters. However, in 2005, fuel poverty rates amongst households using pre-payment meters were similar to those amongst households paying via standard credit for both gas and electricity. This remained the case in the period between 2005 and 2008 for electricity and in the period 2005 to 2007 for gas. In 2008, those households on gas pre-payment meters again had a slightly higher rate of fuel poverty (23 %) than those on standard credit (20%).<sup>18</sup>

Organisations such as Energy Solutions will work with residents to secure the most appropriate method of payment and try to reduce bills where possible, including switching away from pre-payment meter. The task group was told that pre-payment meters are not used in Brent Housing Partnership properties or private sector properties used by the council for temporary accommodation, but tend to be more widely used in privately rented HMOs so it is easier for tenants to split their fuel bills. The task group was pleased to learn that the council insists that properties have regular gas and electric meters when they are being used for temporary accommodation and hopes that this policy continues.

The energy supply industry and campaigning agencies disagree over the link between prepayment meter use and fuel poverty. The industry maintains that prepayment is simply one of a wide range of payment options – one that is appropriate and beneficial to certain consumers. Charities such as NEA take the view that a payment method that incurs additional costs and encourages rationing is a choice made out of necessity.<sup>19</sup>

Despite the conflict between the energy industry and campaigners we know that households paying for their energy by direct debit are less likely to be in fuel poverty than those paying by prepayment meter (just over 10% of households that pay for their energy using direct debit are in fuel poverty, compared to 23% for those using gas prepayment meter).<sup>20</sup> And whilst budgeting may be easier when using a pre-payment meter, the disadvantages such as the meter being set to collect arrears before fuel can be supplied, outweigh the benefits. The task group would like the council to advise tenants not to switch to pre-payment meters on budgeting grounds because of the cost, and to seek advice on paying for energy and income maximisation from Energy Solutions instead.

**Recommendation 4 – The task group recommends that the council does not arrange for installation of pre-payment energy meters in its properties or properties used for temporary accommodation and instead refers the tenants and residents that request this service to Energy Solutions for advice on energy efficiency and fuel debt.**

The fuel poverty survey results showed that only just over half of respondents had changed their energy supplier to reduce the cost of their bill, a relatively easy way of saving money by looking for the best deals on domestic energy. Additionally, more than 35% of respondents are not using the cheapest payment methods for their fuel – direct debit or online billing. Again, these are relatively simple ways of saving money that don't require significant

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<sup>18</sup> Annual report on fuel poverty statistics 2010 – Department of Energy and Climate Change

<sup>19</sup> National Energy Action Website – Debt and Disconnection

<sup>20</sup> Annual report on fuel poverty statistics 2010 – Department of Energy and Climate Change

investment by council's or other statutory organisations – they are heavily advertised by the energy firms themselves. It is a concern that many people are still not taking advantage of the best deals available to reduce their energy costs.

### **Energy efficiency**

One of the key aims of climate change mitigation work is to encourage households to change their behaviour and use less energy. Brent Council has been working with the Local Government Improvement and Development who have funded a scheme to provide energy meters to householders to enable them to monitor their energy consumption. By providing people with evidence of their energy use they are more likely to take action to reduce it. This device has helped participants reduced their energy consumption by around 15% because they are more energy conscious and recognise ways to save energy. The task group believes that behaviour change is as important as infrastructure improvements.

Brent council did have plans to run a campaign on the link between fuel poverty and health, to raise awareness of the issue. However, this is now on hold as the funding for this was to come from Performance Reward Grant, which has been removed by the coalition government. This task group is disappointed by this. Given that improvements to health benefit all public services the task group believes that health service partners as well as the council should consider running this campaign jointly. The campaign would have cost £???? to fund, and the council should work with local health partners to see if it can be resurrected, perhaps through the Health and Wellbeing Steering Group. The task group recommends that the council works with colleagues in the health sector (NHS Brent and North West London NHS Hospitals Trust) to resurrect the fuel poverty and health campaign and implement it if possible.

### **Recommendation 5 – The task group recommends that officers in the council's Environmental Projects and Policy Team works with officers from NHS Brent and North West London NHS Hospitals Trust to resurrect the planned fuel poverty and health campaign and implement this in Brent.**

Improving the energy efficiency of the existing housing stock is huge and expensive problem. Around 90% of properties that will be standing in 2050 have already been built – therefore retro fitting existing properties is crucial to mitigate climate change and improve the energy efficiency of properties. There is a shortfall in grant funding to carry out all the improvements that are needed, whilst solutions to tackle hard to treat housing, such as external cladding, are prohibitively expensive for many households. Regeneration areas may benefit from energy efficiency measures, especially new build properties, but this will only account for a small proportion of properties in Brent. Retro fitting properties in the rest of the borough is a significant issue.

Many properties in Brent are not suitable for some of the more common energy efficiency measures particularly properties classified as “hard-to-treat”. For example, homes with solid walls cannot be fitted with cavity wall insulation. There are also a large number of flats in the Brent, which often have flat roofs and therefore loft insulation cannot be installed. The task group was informed that around 60% of properties in Brent are classed as “hard to treat”. Making changes to the fabric of privately rented homes to improve energy efficiency is not possible without the landlord's permission, which isn't always easy to obtain. There has been more progress in improving the energy efficiency of homes in the public sector than in the private rented sector. Brent Housing Partnership and RSLs have made significant investments in their properties under the Decent Homes Standard. Generally the public sector is more aware of its obligations to provide appropriate thermal comfort in homes than landlords in the private sector. However, the link between social housing and deprivation is well established, so whilst the energy efficiency of their properties may be higher than in the private sector, social housing tenants are vulnerable to rising fuel prices. Income

maximisation is important for social housing tenants to ensure they don't fall into fuel poverty.

Planning standards are generally focussed on carbon reduction rather than reducing fuel poverty. Planning regulations ensure that new build properties meet modern energy efficiency standards, but we know that new-build properties are in a considerable minority in the borough. Whilst it is important they meet the latest standards, new build properties will not resolve Brent's fuel poverty issues.

There are projects in Brent that are working with residents to give them advice on energy efficiency and refer them to appropriate support when needed. Brent Hot Spots, managed by Energy Solutions is a good example of this. Brent Hotspots aims to ensure more low income households in Brent have warm safe homes and can cope with the increasing cost of energy bills. Hot Spots is a cross-referral initiative which operates by engaging front line practitioners, such as the fire service, benefit agencies and social care agencies, as referrers of vulnerable and hard-to-reach households primarily into sources of energy efficiency assistance and advice, income maximisation and home safety services.

The task group was informed that Energy Solutions had tried to involve the local NHS in Hot Spots without success to date. This is unfortunate given the number of vulnerable people seen on a regular basis by health visitors, district nurses, GPs and hospital staff. Involving the NHS in Hot Spots would strengthen the links between energy efficient warm housing and better health and is something the task group feels should be pursued. It should be noted that in interviews with frontline health care staff they were often frustrated at not knowing where people could be referred for advice if they were unable to adequately heat their home. Involvement in Hot Spots could help to resolve this issue.

Fuel poverty is a priority for the Brent Private Tenants Rights Group. BPTRG are hoping to secure funding for a fuel poverty campaign coordinator. They are backing the approach and campaign used by Friends of the Earth, who are arguing for better use of Energy Performance Certificates in privately rented homes to raise awareness of energy efficiency and fuel poverty. Friends of the Earth are promoting the idea that any property rated F or G on their Energy Performance Certificate (i.e. the lowest energy efficiency rating) should not be rented privately, although for this to become law primary legislation from parliament would be required.

Brent Private Tenants Rights Group believe that only a small number of private sector tenants in Brent are aware of the grants that are available to them to improve their homes. Of the private tenants that do apply for grants, BPTRG believe that the majority are elderly and living in regulated tenancies (i.e. tenancies that have been running since before 1989). These people are not expecting to move and so are more likely to apply for the grants on offer. People with short hold tenancies may feel that it isn't worth applying because they won't be in the property long enough to receive the benefit. There are also fears over security of tenancy. Some tenants fear rent increases as a result of improvements to property, not realising that housing benefit will cover the rise in many cases.

### **Working with landlords**

Brent's private rented sector has increased considerably in recent years. There are around 20,000 privately rented properties in Brent, which accounts for approximately 20% of properties in the borough. Working with landlords as a group has become more difficult due to the increase in the number of non professional landlords, who because of easy access to buy-to-let mortgages have been able to become landlords in far greater numbers.

Encouraging landlords to think about fuel poverty and the impact that this has on their tenants is a challenging issue and one that isn't unique to Brent. This situation isn't helped

by the fact that grant funding for fuel poverty related improvements are only available to the tenant and not to the landlord. It is the tenant's responsibility to apply for funding, but they need the landlord's permission to carry out any work on the property.

The task group was told that many tenants won't access the available funding for a variety of reasons, including:

- Tenants are worried about the consequences if they apply for funding and approach their landlord for permission to alter the property. They fear a rent increase, because of improvements that will be made to the property, or possibly eviction because they have suggested the property is substandard.
- Not all tenants are aware of the grants that are available to them.
- Tenants are unaware of their rights which are protected in legislation and won't approach their landlord about making improvements to their property.

There are separate incentive schemes that aim to encourage landlords to improve the quality of their property. Landlords can claim a £1,500 tax credit for work on their home via a scheme known as the 'Landlords Energy Saving Allowance (LESA). However, £1,500 isn't regarded as a big enough incentive and it relies on landlords declaring income from rented homes in the first place. Landlords don't personally benefit from any improvement in a way that owner occupiers do when they improve their homes, either through reduced energy bills or a warmer home. Take up of this offer is low across the country.

Specific work with landlords to address energy efficiency in the private rented sector is one of the council's Environmental Projects and Policy Team's objectives, but this work has been delayed because of the loss of PRG. This work will now begin in 2011/12.

Energy Performance Certificates are a requirement for all rented properties (except HMOs) and provide information on the energy efficiency of the property. An EPC has to be available for tenants to see before they move into a property, but often tenants will have to ask to see this. Brent Private Tenants Rights Group believe that very few landlords offer to show tenants the EPC prior to them accepting the property, and it is doubtful that many tenants know they have a right to see it. If the legislation around EPCs was rephrased so that landlords had to produce the EPC when advertising the property, prospective tenants would have a much better idea of the sort of property they will be renting and the likely energy bills.

The task group was encouraged that the council insists that properties used for temporary accommodation are rated at least D on their Energy Performance Certificate. However, as pressure for affordable private sector accommodation increases as changes to benefit rules take hold, the council may feel that it has to compromise on this to secure accommodation for homeless families and for families that can no longer afford to remain in their current rented property. However, the task group believes that the council needs to be setting standards for private landlords to adhere to and recommends that the D rating remains a condition of use for homeless accommodation in the private rented sector, to ensure landlords maintain their properties with a reasonable level of thermal comfort. This should be the case even if the council uses properties outside of Brent because of the impact of the changes to the housing benefit rules.

**Recommendation 6 – The task group recommends that the council continues to require landlords to provide properties with at least a D rating under the Energy Performance Certificate system before it is used for temporary accommodation or housing for people placed by the council. This standard should be enforced even if pressure on private sector properties increases as a result of changes to housing benefit rules, and if the council needs to use properties outside of Brent to place people.**



It is Trading Standards responsibility to enforce the EPC regime, but the task group was informed that they don't regard it as a priority. Brent Private Tenants Rights Group would like to start mystery shopping landlords to see if they have their EPC. If a landlord can't produce an EPC they could be reported to Trading Standards because they are breaking the law. The task group supports BPTRG in this work and hopes that the council is able to support this initiative. The task group recommends that once BPTRG has carried out their mystery shopping it reports the results to the appropriate overview and scrutiny committee for members to consider the findings and decide whether the council should be taking more action, via Trading Standards, against landlords for not having Energy Performance Certificates.

**Recommendation 7 – The task group recommends that Brent Private Tenants Rights Group presents the findings from its mystery shopping of landlords to the appropriate overview and scrutiny committee to see if the council should be taking additional action as a result of this work.**

Enforcement is an issue in Brent, as the number of privately rented homes has increased but the number of enforcement officers has fallen. All of the work Private Housing Services does is reactive as they do not have the capacity to carry out proactive work around energy efficiency and thermal comfort. Around 900 referrals are received by Brent Private Housing Services each year, the majority of them connected to cold and inadequate heating.

Local authorities have the power to tackle deficiencies in properties, including poor insulation and ventilation. The 2004 Housing Act gave councils the powers to tackle poor housing, setting out statutory minimum standards that are required in the private sector. Additionally, the Housing Health and Safety Rating System helps evaluate the potential risks to health and safety from deficiencies identified in dwellings.

The task group is realistic about enforcement services – it does not anticipate the council being able to invest extra resources into Private Housing Services to enable proactive enforcement for hazards in the private rented sector. This is not feasible in the current financial climate where spending on services is to reduce. However, as the enforcement service is reactive it is important that tenants are aware of their rights, that they are able to report perceived hazards to the council and that they are able to seek advice from organisations such as Energy Solutions. Enforcement is important, but it is not going to be the solution to all fuel poverty issues in Brent.

### **Fuel Poverty and health**

There is a great deal of evidence that that fuel poverty has a detrimental impact on health. National Energy Action states that people living in fuel poor households are likely to suffer from a number of serious health and wellbeing issues, such as heart attack and stroke, COPD and respiratory infection, asthma, worsening arthritis and they are more likely to suffer falls and other accidents in the home.<sup>21</sup> Fuel poverty and cold homes is also thought to contribute to mental health problems, children's absence from school because of increases in asthma and illness, which obviously has an impact on educational attainment. Child poverty is also an issue associated with cold homes, because of the link to general poverty.

The task group heard a range of views about the relationship between fuel poverty and ill health. The group spoke to a Respiratory Physiotherapist from North West London NHS Hospitals Trust during their work. Her view was that COPD and other respiratory problems are not normally caused by the cold, but that temperature affects how patients are able to cope with those diseases. Flare ups can be exacerbated by the general state of the home, such as the temperature, cleanliness, clutter, living in one room and other social factors such

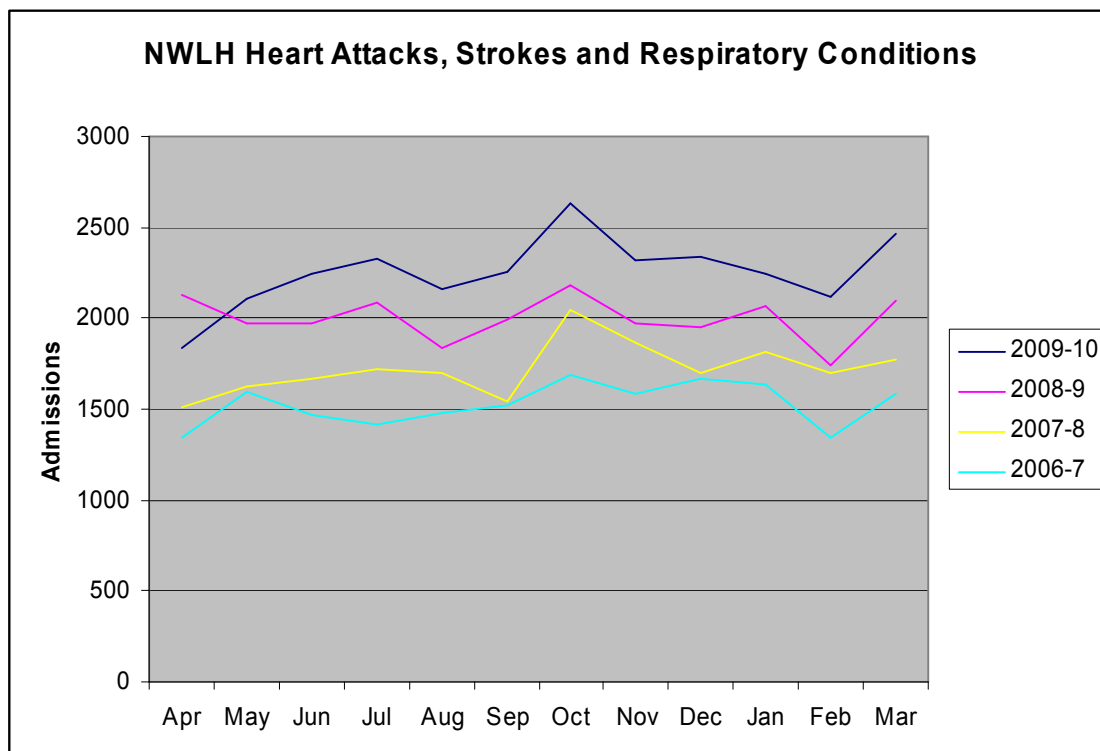
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<sup>21</sup> National Energy Action presentation at Ealing Council – May 2010

as diet – i.e. issues associated with poverty, not just fuel poverty. There are knock on effects on general life as people become more confined to their home, or one room. They go out less, exercise less and therefore their health and wellbeing can deteriorate. The Respiratory Physiotherapist believes that damp conditions in the home are worse for respiratory conditions than cold, but both are symptoms of fuel poverty. What is difficult to assess is whether flare ups of respiratory conditions that result in hospital admission are as a direct result of temperature (hot or cold), although it is likely to be a contributing factor.

An important point was made to the task group by the Respiratory Physiotherapist - the majority of her patients are living in homes that aren't helping their condition, i.e. they're cold and damp and they are also living in the most deprived parts of Brent. This is further anecdotal evidence of the link between deprivation and ill health. A large proportion of patients also smoke, which is the single largest preventable cause of death and illness, responsible for over 80,000 deaths per year in England.<sup>22</sup> The health impact of fuel poverty needs to be seen in the context of the borough's deprivation and other factors that influence health and wellbeing, such as smoking.

Data from North West London NHS Hospitals Trust shows that admissions from heart attacks, strokes and respiratory infections to NWL Hospitals peak in October and March (see graph below). During the winter months (October to March) admissions for the three illnesses associated with the cold are around 300 a month higher than the average during the summer months. When the human body cools down, the blood thickens. As a result it becomes harder to pump leading to issues such as stroke and heart attack. How many of the people admitted are living in fuel poverty is unknown, but it is striking that there is such an increase during winter months.



As mentioned earlier in this report, excess winter mortality rates in the UK are worse than a number of European counties that experience colder winters – the only exception to this is Ireland (see Table 4 below). There will be many reasons for this, but fuel poverty is likely to

<sup>22</sup> Brent Tobacco Control Strategy 2010-2013

be one of them. European countries could be more prepared for winter, including having adequate insulation in homes, so that people are living in warmer conditions than in the UK.

**Table 4 – Excess winter mortality as % increase over non-winter deaths<sup>23</sup>**

Country	Excess winter mortality as % increase over non-winter deaths
Ireland	21%
<b>England</b>	<b>19%</b>
<b>Wales</b>	<b>17%</b>
<b>Scotland</b>	<b>16%</b>
Mean	16%
Austria	14%
Belgium	13%
France	13%
Denmark	12%
Netherlands	11%
Germany	11%
Finland	10%

Data on excess winter deaths in Brent has been published by the Association of Public Health Observatories. As Table 5 below shows, excess winter deaths in Brent are below the England value. Although this is encouraging (and could be the result of having a lower proportion of older residents than other areas), the council and partners should not be complacent about the effect of cold homes and fuel poverty. It should also be noted that data relates to the years 2004-2008. They do not include the winter of 2009/10.

**Table 5 – Excess winter deaths in Brent**

Profile Year	Data Year	Local value	England value	Local count per year
2009	Aug 04 - Jul 07	11.3	17.0	57
2010	Aug 05 - Jul 08	10.0	15.6	17

The task group was interested in how local NHS staff view fuel poverty and whether it is ever considered when treating patients. A range of views and opinions were received in interviews which suggests that in Brent awareness is patchy. As expected, those staff that spend time in peoples' homes often encounter households living in less than ideal conditions, displaying signs that are consistent with fuel poverty such as living in one room, heating only one room and leaving the rest of the house unheated and physical signs such as damp. Front line staff report that in their experience it was mainly elderly single people who were in fuel poverty. This is in line with national statistics on fuel poverty. Staff also believed that people living in their own homes in fuel poverty were harder to help than those living in local authority or RSL accommodation, because staff could contact the landlord relatively easily if they came across problems with social rented properties.

However, despite being aware of fuel poverty and significant numbers of people living in poor quality accommodation, frontline staff are not sure where to turn in order to try to help

<sup>23</sup> National Energy Action website

people who need advice on their housing and energy situation. None of the frontline staff interviewed were aware of Energy Solutions or the Brent Hot Spots scheme. Some staff reported housing problems to social workers, but this can be time consuming and social workers may not be best placed to assist with housing and energy issues. At other times the landlord was contacted to try and ensure problems were dealt with. Despite the concern of front line staff, they have such big caseloads that there simply isn't time for them to follow up housing related problems.

The task group was told by a number of people that partnership working between the council, health sector and voluntary sector on fuel poverty issues could be better, but there is common ground. North West London NHS Hospitals Trust and NHS Brent recognise this is an issue, but has committed little funding and few resources to tackling it. The council considers fuel poverty to be a significant issue and it is a separate strand in our climate change strategy; we also fund Energy Solutions to carry out its fuel poverty work, although there is a need to do more.

There are issues that the task group would like to see acknowledged and addressed. North West London NHS Hospitals is not addressing fuel poverty with patients admitted with illnesses associated with cold, although there are staff within the trust who are keen to work on this issue (notably the trust's head Respiratory Nurse). There is also no referral pathway for people who are in fuel poverty and have been admitted to the one of the trust's hospitals with a cold related illness.

The situation with regard to primary care and knowledge of fuel poverty is more complex. GPs are to become commissioners of health services, but their engagement in this issue isn't clear. The task group used a Brent GP practice to distribute a questionnaire on fuel poverty, but one of the GPs at the practice had acknowledged that although housing often comes up in patient consultations, fuel poverty is seldom mentioned. She suggested that in screenings for over 75s a question on heating/fuel poverty could be added to help track the extent of the issue and also to refer people for advice if necessary. The task group supports this idea and recommends that all Brent GPs considers this.

**Recommendation 8 – The task group recommends that NHS Brent and GPs work to include a question on fuel poverty in their screening of over 75s, to help track the extent of the problem and to refer them to appropriate advice. This could be done on a trial basis and if successful rolled out across the borough.**

There are projects in Brent that bring together fuel poverty advice and health services. Energy Solutions have run fuel poverty advice sessions at health clinics organised by the Harness GP cluster. These have taken place at immunisation clinics, general health check clinics and baby clinics. In the past the advice sessions were held on a regular basis, but funding and staff time has been an issue more recently and so their regularity has decreased. This is the sort of initiative that the task group would like to see more of. However, it may require a financial commitment from the health service, which to date, hasn't materialised. Funding for current advice sessions comes from the Energy Solutions regular grant funding.

Plenty of people such as housing officers, those delivering meals on wheels, GPs, district nurses and health visitors have the opportunity to identify excess cold in the home or signs of fuel poverty. It would be useful if households could be referred somewhere that they will be able to receive help for their problem. Energy Solutions would be the obvious place, but this would require a financial input from the NHS to pay for this service. Although the NHS is under intense financial pressure investment in fuel poverty prevention could ultimately become a saving if it results in fewer hospital admissions. The task group would like NHS Brent and North West London Hospitals to work with Energy Solutions, supported by the council, to develop an appropriate referral pathway, at least as a pilot, to see how fuel

poverty and health issues can be addressed. The Hot Spots scheme is already in place from which to build a referral pathway. A referral pathway should involve as wide a range of partners as possible so that there is a better chance that those who need help are identified and referred.

**Recommendation 9 – The task group recommends that staff from NHS Brent and North West London NHS Hospitals Trust work with Energy Solutions, supported by the council, to develop an appropriate referral pathway for patients who are suspected of being in fuel poverty. The referral pathway should involve as wide a range of organisations as possible and could build on the Hot Spots scheme that already exists in Brent. Energy Solutions should be appropriately funded by the NHS for facilitating a referral network.**

The task group heard a number of practical suggestions that could be implemented to address fuel poverty. One suggestion that could be taken forward by North West London Hospitals would be to run fuel poverty sessions at chest / COPD clinics, where large numbers of patients with respiratory problems could be reached in one go. The task group recommends that this is taken forward, again on a trial basis.

**Recommendation 10 – The task group recommends that North West London NHS Hospitals Trust investigates the possibility of running fuel poverty advice sessions with Energy Solutions at their respiratory clinics. Energy Solutions should be funded to carry out this work.**

### **Addressing fuel poverty**

The task group heard from the witnesses that it interviewed and through considering examples of good practice effective ways of addressing fuel poverty that could be replicated in Brent. What is clear is that the causes and effects of fuel poverty have an impact across a range of services and it cannot fall to one organisation to tackle this in isolation. It is clear to the task group that the council, NHS Brent, North West London NHS Hospitals Trust and the local voluntary sector all have a crucial role to play in addressing fuel poverty. Much good work is already happening in Brent – Energy Solutions were praised by those the task group interviewed, but there needs to be better partnership working between the council, the voluntary sector and the local NHS on this issue.

First and foremost, the task group recommends that the council and partners to prepare an up to date affordable warmth strategy for Brent. Brent does have a Fuel Poverty Strategy, but it was developed in 2005 and a number of people interviewed felt that it is out of date and needs to be refreshed. Having an up to date strategy will enable the borough to develop a coherent and focussed plan to tackle fuel poverty within existing resources. The strategy should also include some of the information that the task group has already identified as being useful to benchmark progress in tackling in fuel poverty, such as up to date SAP ratings – Islington has a thorough Affordable Warmth Strategy that includes information on the percentages of households in fuel poverty broken down into numerous categories including ward, housing tenure, housing age, type of housing, number of residents, ethnicity and support needs.<sup>24</sup> Any strategy would also need to be developed in partnership with the local NHS and voluntary sector partners.

**Recommendation 11 – The task group recommends that Brent Council, with partners, develop an affordable warmth strategy for Brent to enable the borough to develop a coherent and focussed plan to tackle fuel poverty within existing resources.**

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<sup>24</sup> Islington Affordable Warmth Strategy 2009 (see - [http://www.islington.gov.uk/DownloadableDocuments/Environment/Pdf/AWS\\_web\\_version.pdf](http://www.islington.gov.uk/DownloadableDocuments/Environment/Pdf/AWS_web_version.pdf) for more information)

It is important that any affordable warmth strategy has an accurate baseline from which to monitor progress. Islington has carried out a stock condition survey which has provided detailed information on SAP ratings in the borough. Harrow has also comprehensive data on SAP ratings, plus targets for improvement (see appendix 1). As well as improving energy efficiency, if these targets are met the council will be working towards reducing fuel poverty. The task group recommends that Brent looks into the feasibility of a stock condition survey in order to produce a more accurate picture of fuel poverty in the borough and a basis from which to chart measures put in place to tackle it. The stock condition survey will also provide information that can be used to target fuel poverty work, such as that in the Islington Affordable Warmth Strategy.

**Recommendation 12 - The task group recommends that Brent Council considers the feasibility of undertaking a stock condition survey in order to produce a more accurate picture of fuel poverty in the borough and a basis from which to chart measures put in place to tackle it.**

One of the ways that fuel poverty could be given greater prominence in Brent would be to include this issue on an LSP agenda. This approach was used in Slough to raise the profile of fuel poverty with a wide range of partners. If the LSP in Brent was to take up this issue it would bring together the council, PCT, Hospital Trust, fire service, and the voluntary sector to work on the issue. As has been stated previously, although work is happening across Brent to tackle fuel poverty, the links with health aren't as strong as they could be. Other practical arrangements don't yet exist, such as an effective referral network from hospital or GP to places where people can seek assistance for fuel poverty issues. Bringing these issues to the attention of a range of decision makers in Brent could focus organisations on the effects of fuel poverty.

Slough set up an LSP sponsored workshop event to bring together people with an interest in fuel poverty. Brent could do the same, inviting representation from Age Concern, Energy Solutions, Brent Council Environmental Health, Sustainability, Housing Service Strategy/Grants, NWLH Hospitals, NHS Brent commissioning and public health to start addressing the wider issues associated with fuel poverty and developing a referral network. Ultimately, if work addressing fuel poverty is to gain greater momentum than it already has then it will need to become a priority for the leaders of the council, PCT and hospital trust. This is why the LSPs influence could be really crucial.

**Recommendation 13 – The task group recommends that Brent's Local Strategic Partnership hosts a fuel poverty event to begin to address the wider issues outlined in this report and to promote the partnership approach involving the council, NHS and voluntary sector to bring more people out of fuel poverty.**

## **Conclusions**

The fuel poverty and health task group is encouraged that there is much good work going on in Brent to tackle fuel poverty. Having an organisation such as Energy Solutions in our borough is clearly a good thing and the group wishes that more could be done to support their work. What is clear is that despite concerns about fuel poverty and the impact on health, commitment to addressing it across the NHS is patchy. However, Brent is in a fortunate position that it has networks in place for the NHS to buy into, such as Hot Spots. Developing a resourced referral network would be the task group's first priority.

It is also important that the progress of the Brent's fuel poverty work can be tracked. The need for an accurate baseline for SAP ratings in the borough is clear, to help monitor the impact of initiatives and also target those initiatives in the right areas and to the right people. An affordable warmth strategy would provide the framework from which to take forward fuel poverty work in the future.

The task group believes that implementing a comprehensive referral network for people in fuel poverty will help to address the problems in Brent. Frontline staff need to know where to refer people who are living in a cold home and are unable to afford to adequately heat it. The task group is recommending that partners work with Energy Solutions to develop the referral network, but this requires partnership working and proper engagement from the council and NHS. Importantly, Energy Solutions needs to be fully resourced to do this work.

Above the task group is convinced that tackling fuel poverty cannot be the responsibility of one organisation – it has to be tackled in a collaborative way by the council, NHS, voluntary sector and private sector. The task group hopes that organisations in Brent can work together to address this issue that is having such a detrimental impact on the lives of many local people.

## Appendix 1

### SAP Ratings – Harrow

Note: SAP rating is a standard assessment procedure for measuring the energy efficiency of housing. Scores range from 0 to 100. Higher scores are better.

Sector	% of housing stock	Average SAP rating		
		Current	2015 target	2020 target
Owner occupier	77	49	69 solid walls 83 cavity walls	91
Council owned	6	65		
Housing Association	4.4	?		
Private renting	12	49		
Other	0.6	?		

	2008/09	2009/2010	2010/2011	2009/2010
SAP less than 35	20.14%	Target 18%	Target 15%	Actual XX%
SAP greater than 65	14.48%	Target 16%	Target 20%	Actual YY%



## Appendix 2

### Housing and Health Inequalities Scrutiny Review

#### Fuel Poverty in Brent Questionnaire

During the review the task group published a fuel poverty questionnaire and placed it on the council's consultation tracker from 17<sup>th</sup> September 2010 until the 8<sup>th</sup> October 2010 for people to fill in. It was also sent to all members of the Brent Citizens Panel and the Brent Local Involvement Network. Copies were also distributed at the Beechcroft Medical Centre in Wembley Park and the Church of the Ascension in Wembley. A total of 136 questionnaires were returned. Although this is not a representative survey, it does provide some interesting points on fuel poverty in Brent. The results are analysed below.

#### 1. Do you live in Brent?

	Number	Percentage
<b>Yes</b>	132	97.1%
<b>No</b>	4	2.9%
	136	

**Comment** – Although four people who responded to the survey did not live in Brent, their results have been included in the questionnaire analysis.

#### 2. What type of housing do you live in?

	Number	Percentage
<b>Owner occupied (including buying with a mortgage)</b>	91	67.9%
<b>Private rented accommodation</b>	17	12.7%
<b>Renting from the council (Brent Housing Partnership)</b>	11	8.2%
<b>Renting from a Registered Social Landlord</b>	7	5.2%
<b>Other</b>	8	6%
	134	

**Comment** – The proportion of homes owned outright or being bought with a mortgage in Brent is 56%, whilst renting from the council accounts for 9% of homes, renting from an RSL

12% and renting from a private landlord 20%<sup>25</sup>. The numbers in the survey are not in line with these percentages, with those owning their own property or buying using a mortgage over represented and those renting (in all sectors) under represented.

### 3. Do you live in a:

	Number	Percentage
House	96	70.6%
Flat	33	24.3%
Bungalow	1	0.7%
Maisonette	4	2.9%
Other	2	1.5%
	136	

**Comment** – The number of people living in a house is over represented in this survey, with the actual number of houses in the borough accounting for 54% of homes compared to 46% for flats.<sup>26</sup> This information is almost 10 years old and the likelihood is that since the 2001 census the percentage of flats has increased in Brent.

### 4. How many bedrooms does your property have?

	Number	Percentage
1	18	13.3%
2	18	13.3%
3	63	46.6%
4	29	21.5%
5+	7	5.2%
	135	

**Comment** – The relatively high number of three and four bedroom properties can be accounted for because of the high proportion of respondents who live in a house.

### 5. How many people live in your home?

<sup>25</sup> Mori Place Survey 2008/09

<sup>26</sup> 2001 Census

	Number	Percentage
1	39	28.8%
2	35	25.9%
3	22	16.3%
4	18	13.3%
5	11	8.1%
6+	10	7.4%
	135	

**Comment** - The average household size in Brent in 2007 from an independent study was 2.7 persons per house, an increase from 2.5 found in a similar survey in 2005<sup>27</sup>. However, the largest proportion of households in Brent are single person households, although their number is falling.

#### 6. What is your postcode?

Postcode	Number	Percentage
HA0	19	14.8%
HA1	2	1.6%
HA3	15	11.7%
HA9	64	50%
NW2	5	3.9%
NW6	1	0.8%
NW9	10	7.8%
NW10	10	7.8%
SW6	1	0.8%
SE14	1	0.8%
	128	

**Comment** – The large number of correspondents from the HA9 postcode area is explained by the number of respondents from the Beechcroft Medical Centre in Wembley Park. 72 patients filled in the survey, the majority of whom lived in the HA9 postcode area.

<sup>27</sup> Mayhew Associates, *Brent population estimation, household composition and change, 2007*  
<http://intranet.brent.gov.uk/bv1nsf.nsf/24878f4b00d4f0f68025663c006c7944/3f1e2c9bf9112e428025742e003b2b5b!OpenDocument>

**7. In order to keep warm in your home, especially in the winter, do you? (Some respondents ticked more than one answer):**

	<b>Number</b>	<b>Percentage (out of 136 respondents)</b>
Only have the heating on in one room	29	21.3%
Use electric fires, fan heaters, oil filled radiators or bottled gas heaters rather than central heating	22	16.2%
Have the curtains closed in the daytime to keep the heat in	29	21.3%
Block ventilation passages to prevent drafts	28	20.6%
Wear lots of clothes or use blankets and hot water bottles to stay warm	54	39.7%
Other (please state)	44	32.4%

**Comment** – The answers to this question demonstrate that people will use a variety of methods to keep warm, with many respondents indicating they did more than one of the above to stay warm, especially in winter. One answer was almost twice as common as the others - clearly more people wear lots of clothes, use blankets or hot water bottles than anything else. Having said that, a good proportion of respondents didn't answer this question at all indicating they do not have any issues with warmth in their homes. Of those that indicated "other", use the central heating was the most common response.

**8. Have you or any of the people you live with suffered from the following illnesses, which are associated with fuel poverty and cold homes? (Some respondents ticked more than one answer):**

	<b>Number</b>	<b>Percentage (out of 136 respondents)</b>
Heart attack	11	8.1%

Chronic obstructive pulmonary disease (COPD) e.g. chronic bronchitis or emphysema	9	6.6%
Respiratory infections	20	14.7%
Asthma	27	19.9%
Worsening arthritis	31	22.8%

**Comment** – Worsening arthritis was the most common response, but this could be to do with age as well as fuel poverty. Information the task group has received in its interviews suggests fuel poverty, but particularly damp, will exacerbate these conditions but may not directly cause them.

**9. If you receive benefits, have you ever received a benefits entitlement check to ensure that you are receiving all of the benefits you are entitled to?**

	Number	Percentage
<b>Yes</b>	21	21.6%
<b>No</b>	76	78.4%
	97	

**Comment** – The response to this question is worrying, suggesting more could be done to ensure people are maximising their incomes. This is crucial if people are to move out of fuel poverty. Some of those interviewed by the task group believe that income maximisation is more important in addressing fuel poverty than improving the energy efficiency of the home. People have to have the means of paying their energy bills and this is something that the task group should consider in their recommendations.

**10. If the answer to Q9 above was yes, which organisation carried out your benefits entitlement check?**

	Number	Percentage
Brent Council	15	65.2%
Citizens Advice Bureau	1	4.3%
Age Concern Brent		

Warm Front		
Other (please state)	7	30.4%
	23	

**Comment** – It is difficult to draw conclusions from this question as the number of respondents was so low. “Others” included family members and “the DHSS”.

**11. Have you ever changed energy supplier to reduce the cost of your energy bill?**

	Number	Percentage
<b>Yes</b>	64	51.6%
<b>No</b>	60	48.4%
	124	

**Comment** – Whilst it is encouraging that just over 50% of respondents have changed their energy supplier to reduce the cost of their bill, almost 50% haven't. This is a relatively simple way of reducing energy costs and again, could we be doing more to make people aware of this option?

**12. How do you pay your energy bills?**

	Number	Percentage
Pre payment meter	9	6.8%
Cash or cheque	19	14.4%
Debit or credit card	20	15.2%
Direct debit	77	58.3%
Paperless billing online	7	5.3%
	132	

**Comment** – Pre payment meter is the most expensive method of paying for energy and these are generally found in HMOs. The low number of respondents from the private rented sector may explain the low number of people using a pre payment meter. Direct debit and paperless billing is the cheapest way to pay for energy, accounting for over 60% of respondents. However, more than 35% of respondents are using more expensive payment methods and this is a worry.

**13. Have you changed the way you pay for energy to reduce your energy bill? For example, switching to pay by direct debit**

	Number	Percentage
No	69	60.5%
Yes	45	39.5%
	114	

**Comment** – Of those that answered this question, many indicated that they had switched to paying by direct debit. The majority had not switched the way they paid, some saying that they had always paid by direct debit.

**14. Have you ever carried out alterations to your home to make it more energy efficient, such as cavity wall insulation or draft proofing or installing a new boiler?**

	Number	Percentage
No	63	50.8%
Yes	61	49.2%
	124	

**Comment** – Of those that responded positively to this question, the most common work carried out on the home was the installation of loft insulation, double glazing and new boilers. Four people said they had had cavity wall insulation on their home.

**15. If you have carried out alterations to your home, did you receive a grant for this work?**

	Number	Percentage
No	78	82.1%
Yes	17	17.9%
	95	

**Comment** – Most people had not had any grant funding to do their work. Of those that had one person had their grant from Warm Front and one person from Warm Zone.

**16. If you live in private rented accommodation, has your landlord ever upgraded your house to improve energy efficiency?**

	Number	Percentage
<b>No</b>	26	72.2%
<b>Yes</b>	10	27.8%
	36	

**Comment** – It is difficult to draw conclusions from this question. The majority of those that answered it also indicated on their return that they did not live in private rented accommodation.

**17. A household is said to be in fuel poverty if it has to spend more than 10% of its income on fuel to sustain satisfactory heating. On the basis of this definition, do you think your household is in fuel poverty?**

	Number	Percentage
<b>Yes</b>	38	32.5%
<b>No</b>	73	62.4%
<b>Don't know</b>	6	5.1%
	117	

**Comment** – According to Department of Energy and Climate Change statistics, in 2006 10.2% of households in Brent were fuel poor.<sup>28</sup> This was the third highest in London behind Kensington and Chelsea and Westminster. According to this survey, over 30% of respondents consider themselves to be in fuel poverty. Although this is a self selecting survey and not statistically robust, it is surprising that a significant number of respondents consider themselves to be in fuel poverty when compared to government statistics. This 30% figure is more in line with the estimates of those interviewed and also reflects the levels of general poverty in Brent, with which fuel poverty is closely associated. Income levels in Brent are relatively low (3<sup>rd</sup> lowest in London) and over 21,500 households in Brent have an annual income of less than £15,000 per annum. Against this background it is likely that fuel poverty is higher than 10.2% although the true figure is not known.

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<sup>28</sup> Department of Energy and Climate Change – Local Authority Fuel Poverty Levels 2006