Health Assessments

Every year we receive many housing transfer applications based on medical needs, i.e. cases where residents wish to move to another property because of their medical problems and consider their current home to be unsuitable.

In order to assess each medical case correctly, all medical applications are assessed by independent health advisors. Once the health advisor has assessed the case they will notify us of their recommendation which will be considered by the lettings team. We will inform the applicant of the decision, if a medical priority has been awarded.

We have published examples of cases where a medical priority has been awarded and some where a medical application has been refused. This will give you a better understanding of the type of medical applications we receive and how they are assessed.

Referrals of applications for a health priority 1 July 2011 – 30 September 2011

Number of assessments at all stages

		%
Initial assessments	**369**	**85%**
1st stage appeals	54	12%
2nd stage appeals	11	3%
Total	**434**	**100%**

Results of initial assessments

		%
Initial assessments	**369**	**100%**
Emergency	0	0%
Extenuating	24	7%
No award	178	48%
Rejected	8	2%
Cancelled	85	23%
Still outstanding	74	20%

Results of 1st stage appeals

		%
1st stage appeals	**54**	**100%**
Up to emergency	0	0%
Up to extenuating	3	5%
No change	16	30%
Down to extenuating	0	0%
Down to no priority	0	0%
Withdrawn	0	0%
Still outstanding	35	65%

Results of 2nd stage appeals

		%
2nd stage appeals	**11**	**100%**
Up to emergency	0	0%
Up to extenuating	0	0%
No change	7	64%
Down to extenuating	0	0%
Down to no priority	0	0%
Withdrawn	0	0%
Still outstanding	4	36%

Cases yet to be assessed include ones where we are waiting for information.

Cases that have been cancelled are where there has been a change in the applicant's circumstances so they no longer require a medical assessment.

Still outstanding includes requested 3rd party information.

Total number of assessments and awards

		%
Total combined assessments	**434**	**100%**
Emergency	0	0%
Extenuating	27	6%

Referrals of applications for a health priority 1 October 2011 – 31 December 2011

Number of assessments at all stages

		%
Initial assessments	**336**	**81%**
1st stage appeals	66	16%
2nd stage appeals	12	3%
Total	**414**	**100%**

Results of initial assessments

		%
Initial assessments	**336**	**100%**
Emergency	0	0%
Extenuating	31	9%
No award	158	47%
Rejected	13	4%
Cancelled	65	19%
Still outstanding	69	21%

Results of 1st stage appeals

		%
1st stage appeals	**66**	**100%**
Up to emergency	0	0%
Up to extenuating	8	12%
No change	16	24%
Down to extenuating	0	0%
Down to no priority	0	0%
Withdrawn	0	0%
Still outstanding	42	64%

Results of 2nd stage appeals

		%
2nd stage appeals	**12**	**100%**
Up to emergency	0	0%
Up to extenuating	0	0%
No change	5	42%
Down to extenuating	0	0%
Down to no priority	0	0%
Withdrawn	0	0%
Still outstanding	7	58%

Cases yet to be assessed include ones where we are waiting for information.

Cases that have been cancelled are where there has been a change in the applicant's circumstances so they no longer require a medical assessment.

Still outstanding includes requested 3rd party information.

Total number of assessments and awards

		%
Total combined assessments	**414**	**100%**
Emergency	0	0%
Extenuating	39	9%

Case Types

We have given some examples of cases where a health assessment has taken place to give you an idea of how a priority may be awarded. We keep in mind the nature of the health problem and whether the home they live in is suitable.

REJECTED

Applicant recently had a caesarean section.
This is a common operation for which full recovery is expected. It is not a long term substantial illness or disability. The applicants housing would not be a factor so we would not consider it for an assessment.

Applicant's asthma is made worse by other family members cigarette smoke
This is a lifestyle rather than a medical issue. The applicant will suffer from asthma wherever they live and unless the family members stop smoking in the home it will continue to be an issue. We would not consider this for an assessment.

NO PRIORITY

Applicant complaining of back pain. Currently lives in a 2 bed, 3rd floor flat with 2 children under 10.
An OT (occupational therapist) assessment took place. The flat is served by a lift and is on one level with no internal stairs. Therefore the flat is deemed as suitable and no priority is awarded.

Applicant has asthma. Currently lives in a 3 bed, 3rd floor un-lifted flat with spouse and 4 children.
The evidence provided gave the medication the applicant was on and the doctor who assessed the case felt that the Asthma is currently well controlled. There are no reasons why the applicant cannot manage the stairs. Therefore no priority is awarded.

Applicant in 30s diagnosed with arthritis. Current home is a 2 bed 1st floor flat.
An OT assessment took place. The applicant was able to get into their own home and move around it unassisted. Therefore no priority was awarded.

Applicant claims to suffer from recurrent chest infections. Current home is a 1 bed, 4th floor lifted flat.
Current illness is relatively minor in nature and is treated by standard medication. They have a lift. Therefore no priority is awarded.

EXTENUATING

Applicant is in their late 50s and suffering from severe osteo-arthritis. Current home is on the ground floor with four steps to the front door.
This illness is long term and getting around will get harder with time. They cannot manage the four steps so cannot get in or out of the home. A home with no steps inside or outside is needed. It does not have to be ground floor provided there is a lift. Therefore extenuating priority is awarded.

10 year old child with congenital heart defect and epilepsy. Currently resides with his parents in his grandparent's house. The house is overcrowded to the extent that there is no room for essential medical equipment.
Space is required for the medical equipment for this illness which is severe and long term. The house is not suitable and so extenuating priority is awarded.

4 year old child with cerebral palsy. Currently lives in a two bed flat with parents and 2 siblings.
An OT assessment took place. They confirmed that the current home cannot be adapted. Therefore the home is not suitable for the child and extenuating priority is awarded.

Mother of 40 shares bedroom with daughter. One son. She has enduring mental health problems, including bi-polar disorder. Currently lives in 2 bed home.
The nature of her mental illness is such that she needs her own bedroom and the overcrowding would affect her mental state. The home is unsuitable because they need an extra bedroom therefore extenuating priority is awarded.

EMERGENCY

Applicant in their 30s has undergone below-knee amputation because of bone tumour and is currently undergoing chemotherapy. Family home is an un lifted maisonette above the ground floor, with bathroom and toilet upstairs.
Applicant cannot get upstairs so the hospital will not be able to release them as the home is unsuitable. Therefore emergency priority is awarded.

Applicant in their mid 20s has inoperable cancer, currently undergoing radical radiotherapy with care from a known hospice. Current home is on the 3rd floor and un-lifted.
The hospice cannot release them as the home is unsuitable and emergency priority is awarded.