Mile End Hospital

The Bridge (Block 1)

Community Childrens Nursing Team

Bancroft Road

London

E1 4DG

0759199962

**Local authority housing register team**

**Address**

Dear housing officer

I have asked \_\_\_\_\_\_’s family to this pass this letter on to you as I have concerns that their current housing situation is having a negative impact on their health and that they should be rehoused.

\_\_\_\_\_\_ has a diagnosis of asthma/wheeze. They also have severe allergic rhinitis and eczema. It is my belief that the family’s current housing situation is significantly contributing to their health condition(s) and the amount of medication they are requiring to control them.

The National Review of Asthma Deaths published in 2014 and 2018 identify a number of risk factors for asthma death and below I will explain how several of these and other factors are relevant to \_\_\_\_\_\_\_\_ asthma and other health needs.

**Critically, it was found that over 90% of deaths in children could have been prevented if the pre-existing risk factors had been identified and addressed by the agencies already involved in the child’s care, including health, education, social care and other Local Authority bodies.**

1. **The property is overcrowded.** This will increase dust mites which will cause more inflammation to the airways due to an allergic response causing allergic rhinitis. This will increase the risk of severe exacerbations of asthma/wheeze. Overcrowding also increases the likelihood of catching viral illnesses, which is a trigger for asthma/wheeze.
2. **There is significant damp and mould** which will cause airway inflammation due to breathing in mould spores. This will exacerbate asthma/wheeze and cause these children to have more exacerbations: [www.asthma.org.uk/advice/triggers/moulds-and-fungi](http://www.asthma.org.uk/advice/triggers/moulds-and-fungi)
3. **Reducing humidity in the home environment is essential.** Works should be undertaken to correct any structural issues causing damp, including improving ventilation. A dehumidifier may be needed.
4. **People smoke near the property.** The family are able to smell smoke within their home which is a trigger for \_\_\_\_\_\_ ‘s asthma causing an increased likelihood of an exacerbation and a severe attack.
5. **Asthma can be triggered by stress and anxiety**. They have expressed that their living environment is stressful which will exacerbate their asthma causing more attacks.

We are very concerned that this property is contributing to this child’s asthma/wheeze episodes, increasing the frequency of their attacks, which could lead to a severe life-threatening asthma attack. Due to their ongoing exposure to environmental triggers in their home, we are unable to adequately control their symptoms with the medication we are prescribing.

\_\_\_\_\_\_ has a right to live in a property that is not detrimental to their health. We consider that repairs to the property will be insufficient to protect this child’s health (e.g. in circumstances where overcrowding is an ongoing issue), and so re-housing \_\_\_\_\_ and their family should be prioritised in order to protect \_\_\_\_\_’s future health and well-being.

We consider that there is an urgent need to move and the family’s banding on the housing waiting list should be increased/prioritised due to the conditions at the property and the severe adverse effects it is having. We note that there is duty to provide ‘reasonable preference’ to those who need to move for medical/social reasons or for those occupying insanitary or overcrowded housing.

In the alternative we ask that you exercise your general discretion under the housing allocations policy and grant the family emergency priority and/or make a direct offer of accommodation.

We consider alternative accommodation should be:

• Free from damp and mould, well ventilated

• Has hard-flooring and blinds rather than carpet and curtains

• Does not require \_\_\_\_\_\_\_\_ to have bunk-beds in their room, as these are particularly problematic in house dust mite allergy

• Has its’ own washing machine so bedding can be easily washed at 60C

Please do not hesitate to contact us for additional information if this would be helpful.  We look forward to your response and support.

Yours sincerely

Tori Hadaway

Community children Specialist Asthma Nurse

Professor Grigg Kath Evans

Professor of Paediatric Respiratory Medicine, Director of Children’s Nursing, Barts Health

Queen Mary University of London Clinical Lead for Babies, Children and Young, NHS North East London

Adapt to reflect local asthma/air quality leadership