

Hospital discharge

How home improvement services
can help people come home
from hospital safely

A Good Home Network briefing



Introduction

Timely hospital discharge

Timely hospital discharge, supporting a 'Home First' principle (as opposed to discharging to an institution), can be facilitated by health and care teams working closely with home improvement services. This briefing outlines some of the challenges and proposes potential solutions to help professionals working to achieve this. It also reviews how to access funding and identifies key relationships in making this happen.

This briefing is based on the second meeting of the Good Home Network. A more comprehensive account of the meeting can be found at ageing-better.org.uk/good-home-network

What is the Good Home Network?

The Good Home Network is a hub for active learning connecting professionals across England who are exploring ways to improve poor quality homes in their area.

The Centre for Ageing Better set up the Good Home Network, in partnership with Foundations, to help local authorities ensure people in their communities can live independently, safely and with dignity in their own homes.

Find out more:

Visit ageing-better.org.uk/good-home-network or email goodhomenetwork@ageing-better.org.uk



Impact of delayed discharges

Patients who have to stay longer in hospital than they need are at higher risk of picking up an infection or experiencing deteriorating mobility and mental health conditions, which can make it harder to regain independence and mean they may require more care.

These are known as ‘delayed discharges’ and can sometimes occur when a person’s home requires repair or modification to accommodate changing needs or is unsafe for them to return to.

Without these home improvements, people can find themselves confined to a hospital, discharged to a place that is not their home, and/or at a heightened risk of re-admission to hospital.

Despite being a cost-effective solution, the role of home improvement services is sometimes overlooked by those designing hospital discharge processes.

1 <https://www.kingsfund.org.uk/blog/2023/03/hidden-problems-behind-delayed-discharges>

2. NHS England (2023) Acute Daily Discharge Situation Report <https://www.england.nhs.uk/statistics/statistical-work-areas/discharge-delays-acute-data/>

£1.89 billion

The direct costs to the NHS of delayed discharge in 2022/23 have been estimated to be £1.89 billion¹.

234 patients

On average, 234 patients per day are waiting for community equipment and adaptations to housing before they can be discharged from hospital².

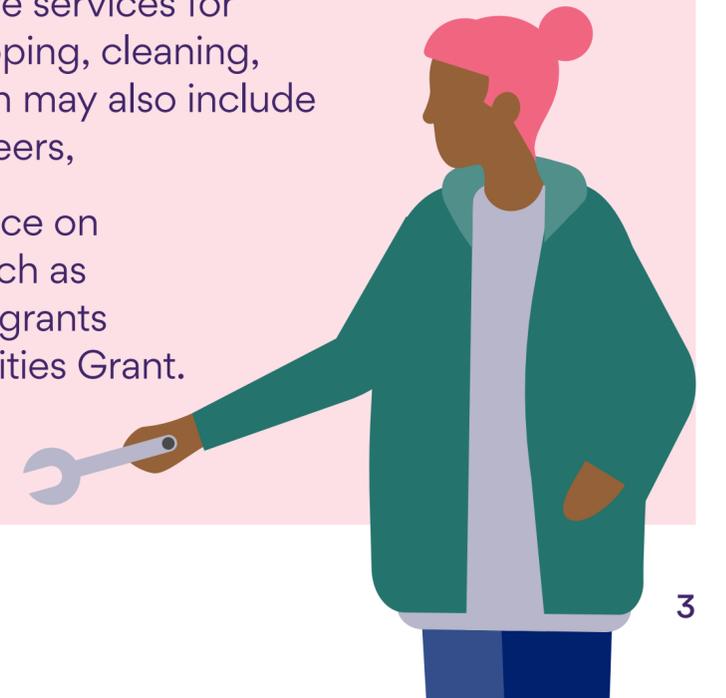


The role of home improvement services

Home improvement services are provided by a range of organisations including local authority housing teams, Home Improvement Agencies, housing providers and voluntary sector organisations. They can help patients return to a home which is safe, warm and meets their needs.

In some areas, home improvement services already work collaboratively with health and social care services to speed up discharge and provide services which may include:

- pre-discharge home health and safety visits,
- assistance with clearing and cleaning which could also include on-going support for hoarding issues from trained support workers,
- handyman services to install aids such as key safes for carers or video doorbells,
- supply and fitting of telecare support,
- referrals to social care services for assistance with shopping, cleaning, hot meals, etc, which may also include support from volunteers,
- information and advice on accessing grants, such as low value discharge grants or the Disabled Facilities Grant.



Accessing and diversifying funding



Challenges

There is an economic case for integrating housing into hospital discharge processes. However, it can still be a challenge for local authorities and home improvement services to access funding from health budgets due to ongoing pressures in the NHS.

There are also issues using existing funding sources. For example, home improvement services that are running elements of a hospital discharge service can struggle to fully use the opportunities for revenue as well as capital spend in the Better Care Fund and the Disabled Facilities Grant.

£9 billion

The £9bn cost of improving the 2.4 million homes in England identified as having one of the most serious health and safety hazards would pay for itself in nine years based on NHS savings⁴.

⁴ BRE (2023) The Cost of Ignoring Poor Housing <https://bregroup.com/press-releases/poor-housing-will-cost-over-135-5bn-over-the-next-30-years-without-urgent-action/>

Solutions

- ✓ Make the business case to Integrated Care Boards for a hospital discharge service that includes home improvement services. Demonstrate the amount of money it is possible to save with quicker discharges and reduced readmissions.
- ✓ Where teams are struggling to make best use of Better Care Fund/Disabled Facilities Grant they should access guidance or get in touch with Foundations for further information and support.
- ✓ Make hospital discharge grants as flexible as possible by including the grant in the local Housing Assistance Policy. This will allow a range of measures to be done at speed and can also meet the aims of reducing or preventing hospitalisation. An example would be a grant that is non-means tested, without a form, has quick turnaround and can fund things like key safes, microwaves and deep cleans.

Developing relationships

Challenges

Key to successful integration is effective relationships across housing, health and care. There should be a shared understanding of what can be offered to patients waiting to return home and how and when to engage most effectively with local services.

Relationships with other professionals such as community-based occupational therapists and social workers are also important. However, establishing and maintaining these connections can prove challenging due to high staff turnover.

On a strategic level, senior housing managers are often keen to be included in conversations on integration and cross-system services but can find it difficult to get 'a place at the table'. Facing differing challenges and priorities can make this collaboration inherently difficult to achieve.

Solutions

- ✓ Be a visible presence – explore possibilities for co-locating in hospital or health settings, make regular presentations to staff, secure slots in meetings to promote the service, thereby building your profile in the hospital and more widely in the community.
- ✓ Identify, create and maintain links with key people – local Integrated Care Boards and others – to help support proposals and access diverse funding sources.
- ✓ Look for opportunities to join cross-system or multidisciplinary groups so that the case for integrating housing with health and social care is heard widely and often.



How to achieve change

- ✔ Look to co-commission services to spread the funding burden and situate hospital discharge services at the centre of housing, health and social care integration. This will improve the chances of having sustainable, integrated and effective services.
- ✔ Identify and nurture champions and changemakers to encourage support and ensure high level buy-in.
- ✔ Promote or share work from other places to demonstrate what good looks like.

- ✔ Keep in touch with developments via the Good Home Network and Foundations to take advantage of any opportunities – for example, these are the sorts of services that the Department for Health and Social Care are encouraging local authorities to provide using the £102 million uplift in Disabled Facilities Grants to enhance agile and responsive services.



Further resources

- Department of Levelling Up, Housing and Communities (2022) Disabled Facilities Grant (DFG) delivery: Guidance for Local Authorities in England. Available at: www.gov.uk/government/publications/disabled-facilities-grant-dfg-delivery-guidance-for-local-authorities-in-england
- Local Government Association (2022) Improving health and wellbeing through housing: A High Impact Change Model. Available at: www.local.gov.uk/publications/improving-health-and-wellbeing-through-housing-high-impact-change-model

- National Housing Federation (2017) Home from Hospital: how housing services are relieving pressure on the NHS. Available at: www.housinglin.org.uk/_assets/Resources/Housing/Support_materials/Home_from_hospital.pdf
- Royal College of Occupational Therapists (2016) Reducing the pressure on hospitals – a report on the value of occupational therapy in England. Available at: www.rcot.co.uk/files/reducing-pressure-hospitals-%E2%80%93-report-value-occupational-therapy-england

- The Health Foundation (2023) Why are delayed discharges from hospital increasing? Seeing the bigger picture. Available at: www.health.org.uk/publications/long-reads/why-are-delayed-discharges-from-hospital-increasing-seeing-the-bigger



For more information please visit ageing-better.org.uk/good-home-network or contact goodhomenetwork@ageing-better.org.uk



Let's take action today for all our tomorrows.
Let's make ageing better.



This briefing is part of our work on **Homes**
and is freely available at ageing-better.org.uk

The Centre for Ageing Better creates change in policy and practice informed by evidence and works with partners across England to improve employment, housing, health and communities. Ageing Better is a charitable foundation, funded by The National Lottery Community Fund.

