Hospital Discharge Service

This is personalised, practical housing advice and resettlement support from Shelter. Our service helps hospitals and health professionals to plan – for both a safe return home and the best possible health outcomes.

Enquiries

Oliver Gray Head of Business Development Oliver_Gray@shelter.org.uk

Shelter



Cathy's story

Cathy* suffers from osteoporosis which affects her mobility, and she also has poor vision, memory and hearing problems.

After a fall in her home, Cathy was admitted to hospital and then discharged to a nursing home. During this time, an independent home assessment deemed her home unsafe.

We met Cathy several times at the nursing home to discuss the safety issues around her home environment. After gaining her trust, we supported her by arranging new flooring (to prevent further falls), fitting new kitchen cupboards (to improve food safety), and bringing in an electrician to repair worn out wiring (to reduce fire risk) at her own home. In addition, we checked that Cathy was receiving all her entitled benefits.

Overall, our intervention reduced three key risk factors that might have led to potential homelessness issues or hospital re-admission: fire, injury and food safety.

Today, Cathy remains independent in her own home with support from carers.

Why a Hospital Discharge Service is so vital

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Healthwatch England estimates that over 6,000 patients remain in hospital longer than clinically necessary which obviously places a severe burden on the entire health system. Furthermore, a fifth of people discharged from hospital in the last three years felt they were not fully involved in decisions concerning hospital treatment and planning discharge.¹

That's why we offer a specialist service to give clients the housing advice, support and guidance they need to make sure they're discharged into suitable accommodation which enables them to recover. It offers patients a planned discharge which involves the individual and meets their personal needs, makes the most of their entitlements and integrates local community services.

Shelter addresses the social determinants that can lead to physical and emotional health problems, hospital re-admissions or homelessness.

According to the Department of Health's Hospital Evaluation of the Homeless Discharge Fund, 69% of homeless people had suitable accommodation to go to when discharged, but this figure rose to 93% in projects which combined NHS and housing staff. (2)



What our Hospital Discharge Service does

We offer a wide range of advice and support built on our experience of working with any type of hospital in-patient with a housing need, no matter how complex.

Specialist housing advice and support for patients

We work closely with hospital staff to identify patients who need help to address complex housing needs that might risk affecting their future health. They refer patients to us and then we deliver specialist housing advice complemented by intensive resettlement support.

Advice and advocacy

We provide specialist housing advice to clients in differing circumstances – and support, where appropriate. This results in clients being informed of their housing options from a trusted housing expert. Where necessary we advocate on a client's behalf to facilitate pathways into housing e.g. liaising with a Local Authority or engaging with a private landlord.

Resettlement support

Some clients require support to resettle into their accommodation after being discharged from hospital. Where support is required we work with the client to develop a support plan with clearly defined goals aimed at helping them to stay healthy and keep their home. Support is carried out as part of home visits during which we help the client to build resilience and independence.

Support interventions include:

 One-to-one support to promote recovery and wellbeing



- Volunteer befriending to support clients with practical tasks like picking up shopping
- Group work learning such as tenant rights and responsibilities, health and wellbeing, budgeting



- Home furnishing support to access furniture and white goods to make their house a home
- External and internal referrals to other services to support clients to address any underlying issues
- Hardship and grant funds, where available, to support client with resettlement costs



Patient circumstances	Advice areas
Priority homeless: patients who are eligible for statutory services	 Applications to Housing Options and Housing Associations Benefits, debt and welfare
Non priority homeless: patients who are not eligible for statutory services	Crisis accommodationPRS access schemesBenefits, debt and welfare
Unsuitable accommodation: patients who have existing housing but who cannot be discharged to it.	 Applications to Housing Options and Housing Associations about changing/adapting their accommodation
Risk of homelessness: patients who have existing housing but who are experiencing issues which place it at risk.	 Specialist Shelter Legal Services advice to deal with rent arrears Specialist fuel debt and fuel poverty advice Benefits and welfare advice



How we achieve change

Our Hospital Discharge Service supports clients to access local services and build the skills, knowledge and confidence they need to address the problems they face. We help people achieve sustainable outcomes which promote independent living and reduce their need for statutory services.

We aim to:

Improve health and wellbeing

- Reducing the need for clients to readmit to hospital after discharge
- Ensuring clients have an address so that aftercare appointments can be coordinated and GPs registered with
- Ensuring accommodation is suitable for the needs of the client and promotes their recovery
- Addressing the risk of homelessness

Create economic stability

- Maximising income through assessing benefits and specialist debt management
- Budgeting skills learning sessions

- Accessing hardship and grant funds
- Making affordability checks on properties
- Supporting clients to access and set up a tenancy
- Helping clients make a home they want to keep through access to home furnishings and white goods
- Client advocacy and representation to Local Authorities and landlords
- Motivating households to operate within statutory orders and incorporating requirements into daily routines

Address Ioneliness

- Helping clients identify and plan how they can work towards their work and/or social aspirations with help from local community agencies
- Providing clients with volunteering and peer mentoring opportunities upon service exit



With the assistance of a Shelter Homeless Patient Advisor, 25% of patients were assisted to return home,

16% of patients were placed in dedicated Hospital Discharge Accommodation,

38% of patients were placed in supported accommodation. (3)

Above all, the improvement Shelter made in hospital patient flow reduced the bed days used for homeless patients – saving 338 bed days (£169,000). (4)

For the first time in seven years I truly believe that we are offering a remarkably collaborative approach to service provision for the vulnerable in our society.

Hospital staff, Sheffield

"Shelter have proved to be an excellent partner. They have been clear about what they can deliver and have delivered consistently throughout our relationship. They communicate well and offer great insight."

(Mark McPherson, Director of Strategy, Partnership and Innovation at Homeless Link – partnered Shelter on the London Plus project)

Shelter helps millions of people every year struggling with bad housing or homelessness through our advice, support and legal services. And we campaign to make sure that, one day, no one will have to turn to us for help.

We're here so no one has to fight bad housing or homelessness on their own.

Please support us at shelter.org.uk

Shelter 88 Old Street London EC1V 9HU 0300 330 1234

shelter.org.uk

1. Healthwatch special enquiry 'Safely Home' 2015.

- 2. Evaluation of the Homeless Hospital Discharge Fund, Homeless Link, 2015
- 3. Shelter, 2016, Outcomes survey, Unpublished dataset
- 4. Evaluation of the Homeless Hospital Discharge Fund, Homeless Link, 2015

Registered charity in England and Wales (263710) and in Scotland (SC002327) To protect the identity of Shelter's clients, models have been used in photographs. OBR-905.

