Building foundations for health and housing – sharing examples of collaboration

Case study: Housing Options for Older People

(Theme: Collaboration across service design and delivery)

Purpose

This is one case study in a suite of case studies (reflecting different themes) that we are publishing to build on the 'Foundations for Health and Housing' events. These case studies aim to share examples of practice; support future collaboration between colleagues working in housing and health; and highlight practice that is improving health and tackling health inequalities.

What were the primary reasons for developing this work stream?

- Delayed discharge for older people due to housing issues across all tenures.
- Building on the success of Housing Options in Glasgow.
- Strategic drive to develop innovative pathways and options for older people to live independently in the community for as long as possible.

What actions took place and who was involved?

- Establishment of a small team of experienced housing staff (funded by Health and Social Care Partnership [HSCP]) and close collaboration developed with colleagues from hospitals, health and social care, and registered social landlords (RSLs).
- Housing Options for Older People (HOOP) acts as a broker between health, housing and social work to enable customers to return or remain at home, or access alternative accommodation with an appropriate support package.
- Working 'on site' in seven hospitals, seven social work offices and six intermediate care units to offer a personalised service to older people and their families/carers, which takes account of their individual circumstances, housing needs and personal choices.
- Creating pathways for hospital and social work staff to engage HOOP as early as possible to prevent a return to unsuitable accommodation, prevent homelessness and maximise the range of potential housing options.
- Working with social work to identify older people currently living in the community who require assistance to help prevent hospital admission.
- Ongoing delivery of city-wide RSL HOOP awareness programme.

What factors enabled you to take this work forward?

- Close collaboration with RSLs in Glasgow to optimise access to suitable available stock.

- Promotion of mutual benefits: delayed discharge is prevented, customer housing need is met, available stock is appropriately utilised and void rents and days to let are minimised.
- Built on RSL network developed via Glasgow Housing Options with its infrastructure of named contacts in health and social work.
- Extensive data capture, including housing need and demand for older people, to help influence housing design and futureproof the city's new build programme.
- Individual case management supporting older people to articulate their housing need, understand housing options and make informed choices along with their families/carers.
- Innovative leadership at an operational and strategic level within Glasgow HSCP and the Wheatley Group.

What challenges did you experience when delivering on this work?

- The need to promote the importance of considering housing at a much earlier stage than the 72-hour discharge protocol to maximise the older person's housing options.
- Ensuring earliest possible referral from health and social work colleagues to prevent a return to unsuitable accommodation, prevent homelessness and maximise potential range of housing options.
- Complexity of Glasgow's housing landscape: 68 RSLs operate across the city.
- RSLs operate with varying allocation policies. The HOOP team are working in partnership with RSLs to encourage them to prioritise HOOP customers whose housing is unsuitable due to changing medical needs; review their allocation policies to take account of delayed discharge; alert HOOP to suitable void properties; and enable access to new-build, barrier-free accommodation; and identify a link worker in each RSL whom HOOP links with proactively.

What was the outcome?

- Moving older people on from hospital and intermediate care more quickly to suitable housing with an appropriate support package.
- Preventing hospital admissions due to housing issues by providing practical solutions.
- The provision of on-site housing advice in seven hospitals, seven social work offices, and six intermediate care units.
- Strong working relationships developed with hospital- and community-based social workers, discharge coordinators, occupational therapists, physiotherapists, consultants, mental health workers, front door hospital staff, community homeless teams and housing officers.

How has the outcome contributed to health improvement/reducing health inequalities?

It has enabled older people to live independently in the community for longer. It has also empowered older people, along with their families/carers, to make informed decisions about their housing situations, often at a time of great change in their lives.