

Finding a safe home after hospital:

Case study research on supported housing and healthcare partnerships

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**NATIONAL
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Executive summary

This research explores existing evidence on the impact of housing-related delayed hospital discharges and the important role that supported housing can play in preventing delays and alleviating pressure on the NHS. Drawing on a series of case studies, this report showcases how the NHS and supported housing providers are working together to remove barriers to finding a safe home and support people leaving hospital at the right time for their recovery.

How do housing challenges affect people leaving hospital?

The evidence demonstrates that a lack of supported housing and suitable homes for people to move into when they're ready to leave hospital is a factor preventing people from being discharged. Longer hospital stays can be detrimental to recovery and people's health. This creates more strain on oversubscribed NHS waiting lists, preventing people from accessing treatment that they need.

Longer stays in hospital can result in poorer health outcomes for people once they leave hospital, as well as an increase in their care needs.³ Delayed discharges from hospital also cost the NHS more money. For mental health inpatient settings, we know there were 109,029 days of delayed discharge because patients were waiting for supported housing in 2023/24⁴, costing the NHS an estimated £71m.⁵

Savings could be made to the public purse of between **£53-£65 million per year.**

7,239

additional hospital bed days due to a lack of supported housing in September 2024.

In September 2024, waiting for supported housing was the single largest reason for delayed discharges from mental health inpatient settings. This equated to 7,239 additional hospital bed days, making up 17% of all delayed discharge days in September.¹

In acute trusts, the average number of patients per week who had a hospital stay longer than 14 days and a delayed hospital discharge due to housing-related reasons has more than tripled since 2021, from 49 to 153 patients per week in 2024.²

As well as offering improved health and wellbeing outcomes for individuals discharged from hospital, supported housing also costs significantly less on average than a stay in hospital, even with more intensive care and support packages that come at a higher cost (such as for individuals with a learning disability and autistic people). When considering the average costs of rent, care and support for different client groups in supported housing, we estimate that if we had enough supported housing to make sure everyone in a mental health setting could leave hospital at the right time for their recovery, savings could be made to the public purse of between £53-£65 million per year (see [appendix](#) for further detail).



How are housing and health providers helping people leave hospital?

The innovative services featured in this research were all driven by a pressing need to reduce delays to hospital discharge due to housing. These services reduce costs, alleviate resource pressures, and prevent people needing to be in hospital longer than needed. Many of the schemes also aimed to address repeated readmissions from people who were discharged when they did not have a home that met their needs, including those discharged to the streets.

Often starting out as a pilot, they were driven by individuals determined to try something different to address the issues that they were seeing. This led to new partnerships across sectors, with Integrated Care Boards (ICBs) and housing associations at their heart but with local authorities and other voluntary sector organisations often playing a critical role. Through building trust in each other's expertise and capabilities, a willingness to take risks, and a shared vision and strategy, the partners we spoke to felt they were able to deliver a higher quality service and better outcomes for the people they support.

There is evidence of the positive impact these schemes have on the NHS and local systems, including significant cost savings, reduced readmissions and reduced use of more expensive private sector mental health beds. This was alongside often life-changing impacts for the people supported to leave hospital into a home that meets their needs.

However, there were some common challenges faced by the partnerships delivering these schemes. Many felt that difficulties securing long-term revenue funding and capital grant funding poses a barrier to the sustainable future of the schemes and their capacity to meet future demand. A lack of local affordable housing options affected some of the schemes' ability to move people on from short-term supported housing when they were ready.

Our recommendations

Any hospital discharge should not only consider a person's health and care needs, but also their need for a secure, safe and affordable home. To achieve this:

- **Integrated Care Boards and housing providers should work together** to remove barriers to safe, appropriate housing so people leaving hospital can leave at the right time for their recovery.
- **The government should set a national strategic direction** for health and housing providers to work together. Integrated Care Systems, local and combined authorities and housing providers should agree a local assessment of need and plan for how this need will be met.
- The government's upcoming **National Housing Strategy and NHS 10 Year Plan should integrate health and housing**. If this happens, we can make sure that policy looks beyond just the numbers of new homes and assesses local need to plan and deliver the right homes in the right places.

There is a pressing need for greater capital investment in supported housing, as well as secure, long-term revenue funding for hospital discharge schemes. Decisions about funding should consider how services are funded during and after discharge from hospital, to deliver better value for money in the longer term.

- **Capital grants need to be sufficient** to ensure schemes, including Specialised Supported Housing, are financially viable, affordable for residents and value for money for the benefits system.
- The **£300 million Housing Transformation Fund announced should be reinstated**.
- The planned **longer term financial settlement for local authorities should be used to drive better strategic planning** and long-term commitments on revenue funding for supported housing.

