

## Executive Summary

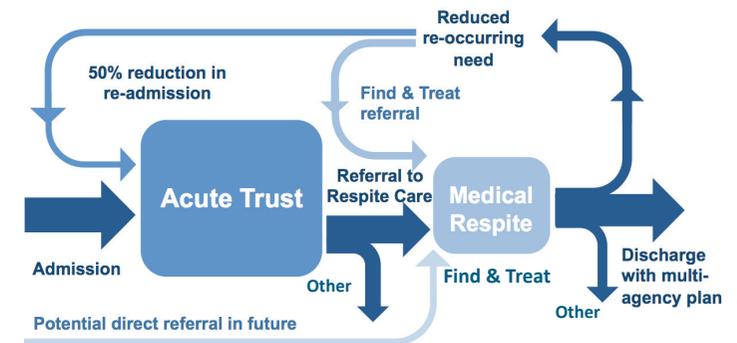
- **Current healthcare arrangements for the homeless are inappropriate; services often fail to meet the health needs of a very vulnerable group; costs are high and outcomes are poor.**
- **Compared to the general population, homeless people have complex health needs; use A&E to access healthcare; are more frequently admitted to hospital; remain for longer; and have high rates of re-admission.**
- **Current arrangements are expensive and result in very poor health outcomes. The failure to deal with the patients' health problems leads to a cycle of admission/discharge/readmission, with some patients attending as many as 30 times per annum.**
- **For the currently homeless, average age of death is 47 for men and 43 for women; suicide rates are very high; tri-morbidity is the norm (tri-morbidity is an entrenched combination of mental illness, substance abuse and physical ill health).**
- **Secondary care costs are 8 times higher than for the non-homeless; because of the severity of health need and cyclical re-admissions.**

**Pathway**, a new charity formed to transform health services for homeless people, has been developing *new models of care*. The first element is a specialist hospital team, initially introduced at UCLH, working with all admitted homeless patients. This team improves healthcare quality while homeless people are in hospital, and develops or refreshes patients' long term care plans. This approach is now being rolled out in other hospitals, based on Pathway's proven approach.

Pathway hospital teams work closely with London's specialist TB outreach "Find & Treat" team.

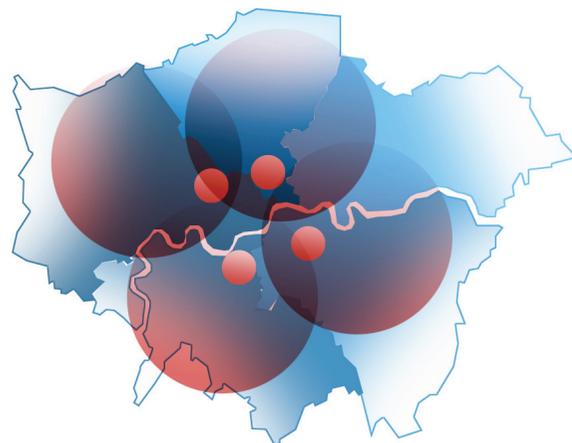
Working with other homelessness agencies, Pathway's close monitoring and evaluation of homeless patients in the acute setting has identified the critical need for a new, more cost effective facility, providing intermediate, convalescent care after a hospital admission for a clinically defined sub-group of homeless patients.

The proposal is to commission a specialist residential service, offering patients a short-term supportive community, providing both medical and other services. The service would be medically led, offer patients a psychologically informed environment with a parallel focus on convalescence/recovery, and planning for move-on. Most patients will stay around 14 days for convalescence, but stays of up to 6 months are anticipated for some cases, including palliative care.



*This service would help shift the focus from acute care alone, creating a more integrated, multi-agency health and social care service for some of the sickest homeless patients.*

- To deliver four medical respite centres for London will require the capital's health service to commit **£30 million over 5 years** (or less than 0.0024% of total annual spending on the NHS in London)
- This feasibility study shows how this investment would actually save the health service money, avoiding **nearly £45 million** of expensive hospital care over the same period



2015 - Cross-London cover through 4 centres

- Access to a medical respite centre would have **saved £682,000 per annum** on beds at one hospital alone, on top of the **£400,000 already saved** through better case management from the Pathway hospital teams
- We estimate that in **inner London alone around 1,000 patients a year would benefit** from a stay in medical respite care following an acute admission
- For an NHS investment of **£1.5 million per annum** per centre, London could significantly improve health outcomes for this relatively small, but highly vulnerable group, at the same time as significantly saving costs of acute care
- Pathway's medical respite centre will deliver **better outcomes for patients** and **save the NHS money**

- Pathway's hospital teams have shown a focus on homeless patients generates significant reduction in bed days (**1,000 bed days per annum saved at ULCH**)
- The medical costs generated by homeless people is significant in London hospitals; **a safe, medically-led intermediate health and social care facility would improve results and reduce costs**
- In 2009 the **cost of each homeless patient admission at UCLH was £3399**. Pathway estimates that in inner London alone over 5,000 homeless people are admitted to hospital as an emergency each year

