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# Impact on the use and cost of other services following intervention by an inpatient pathway homelessness team in an acute mental health hospital

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## Abstract

**Background:** Mental illness in people experiencing homelessness is common and a key reason for attendance at emergency departments and admission to hospital.

**Aims:** This paper describes how the KHP Pathway homeless team impacted use and cost of health and wider services. The Pathway model had never been adopted by a mental health hospital, and there had never been an economic analysis to evaluate service use before and after intervention.

**Method:** Service use was measured using an adapted version of the Client Service Receipt Inventory (CSRI) with a simple before and after design at admission, 3

months and 6 months after discharge from hospital.

**Results:** During the first 3-month follow-up, over half the participants saw a GP, with an increase in the proportion seeing a psychiatrist, social worker and a mental health nurse. Attendance at emergency departments was substantially lower than at baseline. The mean total service cost was £818 at base line and £414 at 3 months.

**Conclusions:** The adapted version of the CSRI demonstrates that patients seen by the Pathway Homelessness Team were supported to use community and scheduled health and care services. The service overcomes barriers, frequently experienced by people experiencing homelessness, in accessing support and community healthcare in the UK.

Keywords: Homeless, inclusion health, exclusion, pathway, service use, service evaluation, in-patient, Inclusion Health Groups

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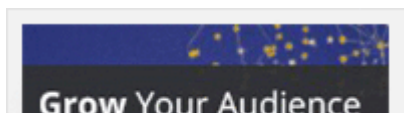
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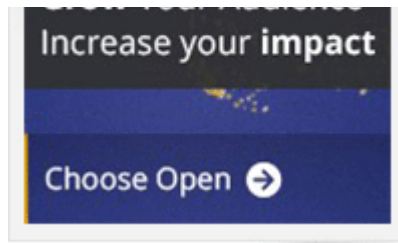
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### Disclosure statement

No potential conflict of interest was reported by the author(s).





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