

Recording homelessness in health data sets Technical note – October 2017

Homelessness is a powerful indicator of poor health outcomes and high secondary health care costs, but homelessness is currently often missed, or hidden within data sets. Many types of homelessness e.g. living in a homeless hostel, 'sofa surfing'¹ with friends and family, or living in temporary accommodation are 'hidden' because the person or family can give a current address. Threatened eviction (that may later lead to homelessness) also goes unrecorded in data sets. Conversely whilst NFA (No Fixed Abode) picks up many rough sleepers, in many cases it is used inappropriately e.g. for people who are collapsed, or who are foreign visitors - leading to inaccurate data.

The result is that whilst it is known that targeted interventions by health, housing and social care homelessness services can improve outcomes and reduce costs, the NHS is largely blind to these opportunities because we lack a standardised method of recognising and recording homelessness.

As such Pathway and a group of partners are lobbying for the development of a simple, agreed, cross departmental method of documenting housing status similar to that widely used to document self-defined ethnicity (commonly referred to as the '16+1' - as there are 16 of them, plus one code for 'Not Stated'). A worked example of such a data set is provided on page 4 as Figure 1. It should be emphasised that this is just a worked example - many schemas are currently in existence as discussed below.

An alternative would be for all departments to adopt a simple core question like 'Do you think you are homeless now, or are likely to be homeless in the next 6 weeks?' with a yes / no answer, if a 16+1 format was felt to be too complex.

¹ **sofa surfing** in British. noun. (of a homeless person) the practice of staying temporarily with friends and/or relatives while attempting to find permanent accommodation.

From a health perspective housing status menus already appear in several national health care data sets – mental health, community, and more recently the emergency care data set - however the selected codes within these menus are not the same, and in the first two cases the code menus are also too extensive to roll out to the wider health service. Specialist homeless health services also use their own versions of housing status classification, but these are not all the same. Data sets like the National Drug Treatment Monitoring Service (NDTMS) also monitor housing status, but again in a slightly different way. However, research organisations like the University College London Department of Health Informatics (The Farr Institute) have a clear view on what should be included if a core data set was initiated. Herriot Watt University are also just about to publish on this.

Pathway believes that the Homelessness Reduction Act provides an urgent impetus to take action on this problem. Not only does the Act place a new duty on Local Authorities to help prevent the homelessness of all families and single people, regardless of priority need, who are eligible for assistance and threatened with homelessness, it also places a new duty on public bodies to notify a Local Authority if they come into contact with someone they think may be homeless or at risk of becoming homeless. However, NHS bodies will be hampered in meeting this duty, because they currently do not routinely enquire about housing status, and do not have a standardised means of recording it.

Pathway has created connections between the key partners in this work and believes that a core data set could be agreed between these partners within 6 months to 1 year with a relatively small amount of resource. The Department for Communities and Local Government (DCLG) have also already agreed to partner this work stream, as the creation of agreed clear definitions between Local Government and health will obviously be vital to ensuring the duties under the Homelessness Reduction Act are met. Alternatively, this group might agree that the single question route would be preferred option. Ideally some patient facing work would be undertaken to determine patient opinion regarding the preferred method of being asked for housing status information, as well as research regarding training needs. Of course the action of agreeing nationally to a core data set or question does not equate to adoption, and that the publicity, buy-in, training and overall time required to implement a change like this is significant. As such Pathway feels that this project needs a Senior Responsible Officer in the Strategy Department of NHS England and within NHS Digital to be identified immediately, and resource allocated to take this project forward. The partners signing the accompanying letter stand ready to support this work.

NB As an additional note it is worth acknowledging the migration of health services coding to SNOMED in 2018. A lot of the work researching the codes that are available to support this work (including understanding existing gaps) has already been undertaken by Pathway in partnership with NHS Digital.

For more information please contact:

Samantha Dorney-Smith, Nursing Fellow, Pathway samantha.dorney-smith@nhs.net

Professor Andrew Hayward Director of the Institute of Epidemiology & Health Care University College London a.hayward@ucl.ac.uk

Figure 1: Worked example – Accommodation data set

Homeless

- Living rough
- Sleeping in night shelter
- Lives in squat
- Living with friends temporarily
- Living with family temporarily
- Living in homeless hostel, refuge or bail hostel
- Lives in council provided temporary accommodation or bed and breakfast

Housed

- Lives with parents / relatives long term
- Lives in council accommodation
- Lives in housing association accommodation
- Lives in private rented accommodation
- Owner occupier

Housing with support

- Lives in supported home
- Lives in warden controlled accommodation
- Lives in care home

Institution

• Currently resident within institutional setting e.g. prison, hospital, long term treatment setting

Unknown / Other

- Housing status other
- Housing status not known
- Does not wish to declare