



Department  
of Health &  
Social Care

# Out-of-Hospital Care Models (OOHCMs) Programme for People Experiencing Homelessness (Financial Years 2021-22 & 2022-23)

*Dashboard for Oxfordshire Test Site (Pathway 2 Step-down Services)*

*National Audit of Specialist Intermediate Care - Findings for the Financial Years 2021-22 & 2022-23*

Production date: October 23<sup>rd</sup> 2023

## Dashboard leads

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# National Audit of Specialist Intermediate Care for People who are Homeless


Financial Years 2021-22 & 2022-23


OXFORDSHIRE (Pathway 2 Step-down Services)

## Key Findings at a Glance for the Financial Years 2021-22 & 2022-23

### Investment and Budget Release

 **£196K** Investment for service delivery in Pathway 2 services per year  
**£161K**


 **£3.7K** Costs per person per accepted  
**£3.1K**

 **£42K** Total NHS budget release for financial years 2021-2023 (re-allocatable resources)


### Overall impact of public investments


- ✓ Providing specialist step-down services for people who are homeless is value for money
- ✓ It frees up resources for the NHS (**£42K**) and other public budgets<sup>1</sup>
- ✓ It improves or prevents a deterioration in health and wellbeing outcomes


### Pathway 2 Outcomes


 **85%** Acceptance rate (51/58 referrals)  
**69%**


### Aggregate Figures for 2021-2023

 **61%** People experienced better or unchanged QALY<sup>2</sup>

 **100%** People reported being treated with dignity and respect

 **98%** People did not sleep rough after leaving step-down

 **25%** Decrease in emergency admissions

 **56%** Decrease in A&E visits



- 10** Beds across 2 houses
- 1** MDT working in and out of the hospital
- 126** People accepted in Pathway 2 step-down services (2021-23)
- 29 days** Length of Stay

<sup>1</sup> More details provided [slide 12](#) and in the [notes](#).

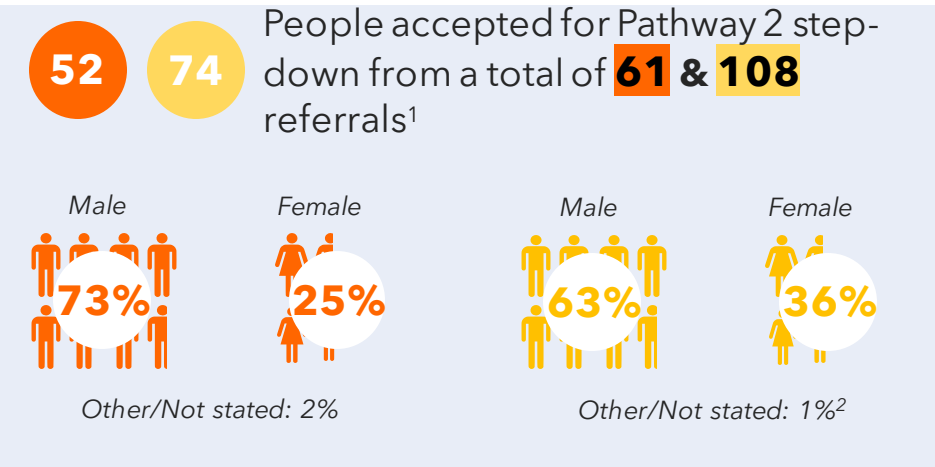
<sup>2</sup> More details provided [slide 8](#) and in the [notes](#).

# National Audit of Specialist Intermediate Care for People who are Homeless

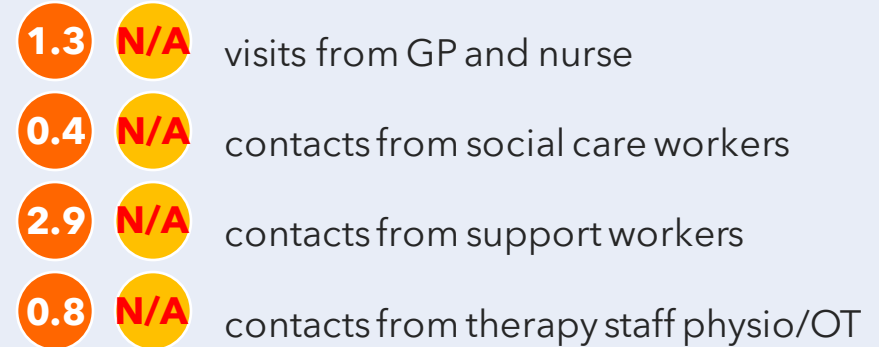
Financial Years 2021-22 & 2022-23

OXFORDSHIRE (Pathway 2 Step-down Services)

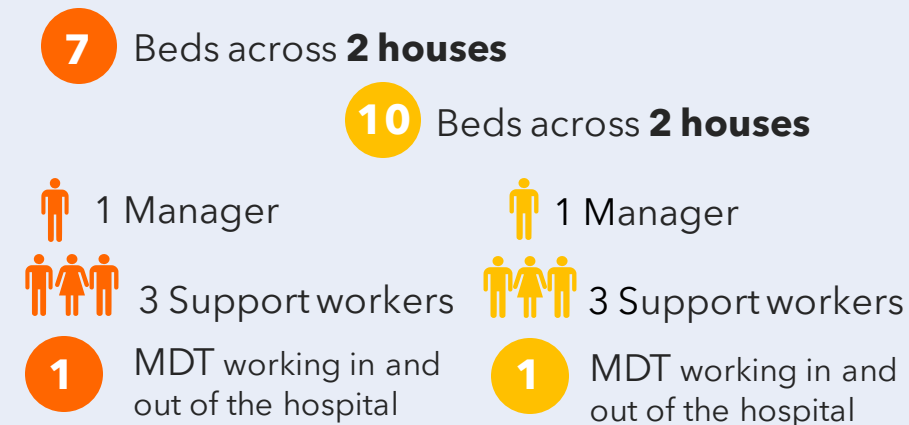
## Patient Demographics & Staffing for the Financial Years 2021-22 & 2022-23



### Average visits per week



### Site Capacity



### Average case load per staff per week



<sup>1</sup> The data collected offer no explanation why 9 people were not accepted by the service

<sup>2</sup> More details provided in [notes](#).





<sup>3</sup> National benchmark for other P2 test site services.

# National Audit of Specialist Intermediate Care for People who are Homeless

Financial Years 2021-22 & 2022-23

OXFORDSHIRE (Pathway 2 Step-down Services)

## Health and Social Care in Step-down

|   |  | Financial Year 2021-2022            | Financial Year 2022-2023            | Status    |  |
|---|--|-------------------------------------|-------------------------------------|-----------|--|
|   |  | All Test Sites P2 vs Oxfordshire P2 | All Test Sites P2 vs Oxfordshire P2 |           |  |
| Social Care   | % Care Act assessments completed against patient numbers       | 43/180<br>30/51                     | 19%<br>59%                          | 64%<br>4% |  |
|    | % Patients having 1 or more visits to A&E (while in step-down) | 8%<br>14%                           | 3%<br>60%                           | ✓         |  |
|    | % Patients having non-elective admissions (while in step-down) | 16%<br>6%                           | 0%<br>41%                           | ✓         |  |
|   | % Patients having elective admissions (while in step-down)     | 3%<br>2%                            | 24%<br>49%                          |           |  |
|  | % Early self-discharge   | 3%<br>0%                            | 9%<br>5%                            | ✓         |  |

✓ Performing well against national benchmark for other P2 test site services



# National Audit of Specialist Intermediate Care for People who are Homeless

Financial Years 2021-22 & 2022-23

OXFORDSHIRE (Pathway 2 Step-down Services)



## Patient Flow

Financial Year 2021-2022

Financial Year 2022-2023

Status

All Test Sites P2 vs Oxfordshire P2

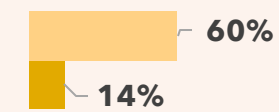
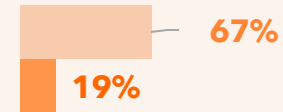
All Test Sites P2 vs Oxfordshire P2

Length of stay in step-down  
(average per person)

**NHSE target for all types of IC 42 days**



% Staying in step-down longer than 42 days



Aggregate information 2021-2023 All Test Sites P2 vs Oxfordshire P2

Waiting time between referral and assessment  
(average per person)



Waiting time between ready to transfer and actual  
transfer into stepdown - less than 2 days (% of  
people)



Performing well against national benchmark for other P2 test site services

## Discharge delays (acute) due to homelessness/no right of recourse to public funds



## Data not available

Information to follow as national statistics have not yet been published for this metric.



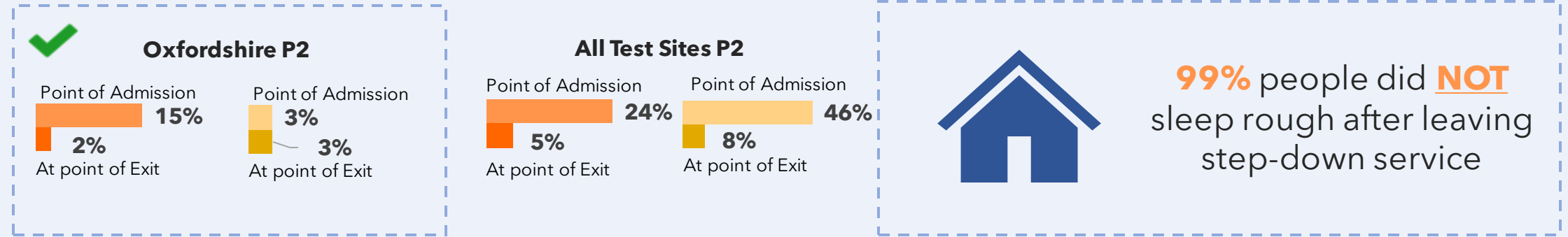
# National Audit of Specialist Intermediate Care for People who are Homeless

Financial Years 2021-22 & 2022-23

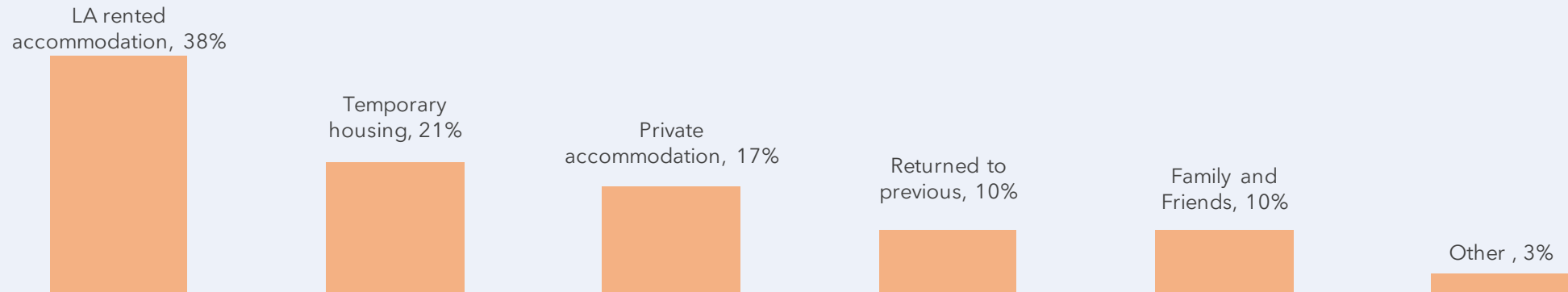
OXFORDSHIRE (Pathway 2 Step-down Services)

## Housing Outcomes Financial Years 2021 - 2022 & 2022 - 2023

### Percentage of people sleeping rough before and after step-down



### Destination after leaving OOHC services in Oxfordshire P2<sup>1</sup> for the Financial Years 2021-2023



✓ Performing well against national benchmark for other P2 test site services

<sup>1</sup> More details provided in the [notes](#).

# National Audit of Specialist Intermediate Care for People who are Homeless

Financial Years 2021-22 & 2022-23

OXFORDSHIRE (Pathway 2 Step-down Services)

## Health Status Outcomes

What people with experience of homelessness said about their HEALTH STATUS when moving out of P2 Step-down compared to when they moved in (includes all audit questionnaire data collected 2021-23)<sup>1</sup>



61%

**People experienced better or unchanged QALY**  
(39% better vs. 22% unchanged vs. 39% worse QALY)



95% reported either equal or less problems with **mobility**



90% reported either equal or less problems with **self care**



88% reported either equal or less problems with **usual activities**



83% reported either equal or less problems with **pain/discomfort**



68% reported either equal or less problems with **anxiety/depression**



<sup>1</sup> More details provided in the [notes](#).



# National Audit of Specialist Intermediate Care for People who are Homeless

Financial Years 2021-22 & 2022-23

OXFORDSHIRE (Pathway 2 Step-down Services)

## Patient Reported Experience Measure (PREM)

What people with experience of homelessness said about their *EXPERIENCE OF CARE AND SUPPORT* while in P2 Step-down: (includes all audit questionnaire data collected 2021-23)<sup>1</sup>

**100%** I was **ALWAYS** treated with respect and dignity while they were receiving care/support.

**95%** I was as involved in discussions and decisions about my care, support and treatment as I wanted to be.

**95%** The staff **ALWAYS** let them know how to contact them if they needed to.

**95%** The length of time they had to wait for my care/support to start was reasonable.

**90%** The appointment/visit times by staff were **ALWAYS** convenient for me.

**65%** I was **DEFINITELY** given enough notice about when my care and support was going to stop.

**95%** The staff that cared for me had been given all the necessary information about my condition.

**90%** When I had important questions to ask the staff - they were **ALWAYS** answered well enough.

**65%** The staff discussed with me whether I needed any further health and social care after the OOHC service.

**95%** I was aware of what we were aiming to achieve.

**85%** I **ALWAYS** had confidence and trust in the staff treating or supporting me

**60%** The staff gave my family or those close to me all the information they needed to help care/support me.

**75%** I was **ALWAYS** involved in setting these aims.

**75%** I **ALWAYS** felt involved in decisions about when my care from the Out-Of-Hospital care service was going to stop.

**60%** Since having care/support from the OOHC service, my ability to maintain social contact has **DEFINITELY** improved.



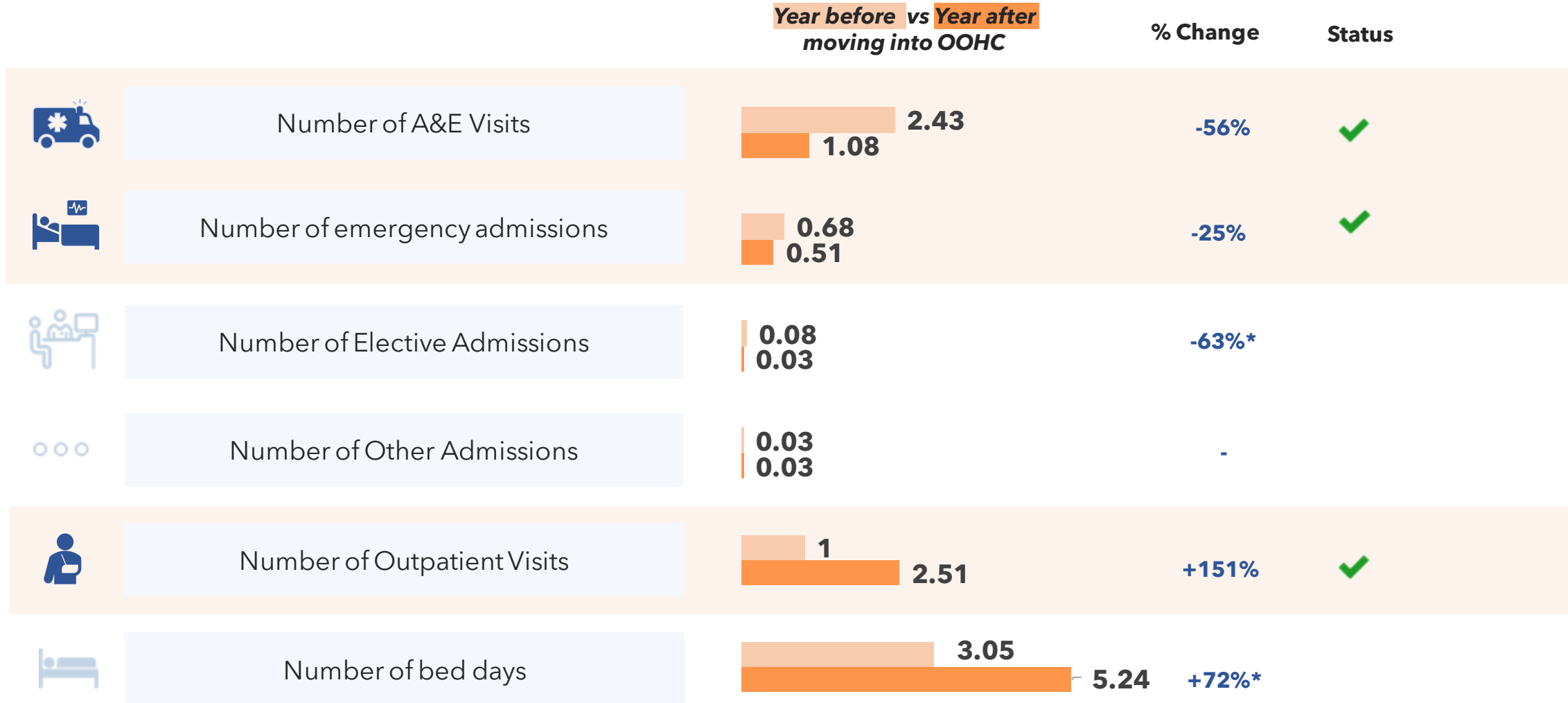
<sup>1</sup> Details on the questionnaire and coding applied are provided in the [notes](#).

# National Audit of Specialist Intermediate Care for People who are Homeless

Financial Years 2021-22 & 2022-23

OXFORDSHIRE (Pathway 2 Step-down Services)

## Annual use of NHS hospital resources per person



\* More details provided in notes

✓ Improved Outcomes



# National Audit of Specialist Intermediate Care for People who are Homeless

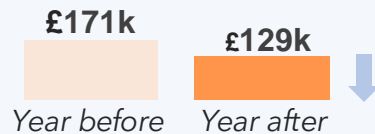
Financial Years 2021-22 & 2022-23

OXFORDSHIRE (Pathway 2 Step-down Services)

## Economic Analysis for the total cohort of 52 clients per year (considering the NHS perspective) <sup>1</sup>

### Key Takeaways

After P2 stay, there has been a decrease in the annual NHS costs (for the 52 clients), amounting to a **56% reduction in A&E visits and 67% in emergency admissions.**



If you invest **£308K of public money** in OOHC service delivery you get more value for money:

✓ **Free up resources for the NHS (£42K)**

### Costs



Costs of A&E Visits

Year before vs Year after moving into OOHC



Costs of emergency admissions



Costs of Elective Admissions



Costs of Other Admissions



Costs of Outpatient Visits



Average annual NHS hospital costs per client



<sup>1</sup> The calculation does not account for service delivery cost for financial years 2021-22 and 2022-23 respectively (£196K and £161K).

#### **Economic analysis for the total cohort of clients per year (considering the broader public perspective)**

*Use or resources data collected from self-reported questionnaires for 2021-23*



## **Data not available**

**Self-reported information on the following use of resources:  
housing, emergency and non-emergency healthcare, mental health,  
drug and alcohol misuse, social care, and criminal justice.**



# National Audit of Specialist Intermediate Care for People who are Homeless

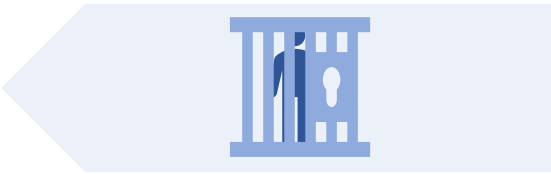
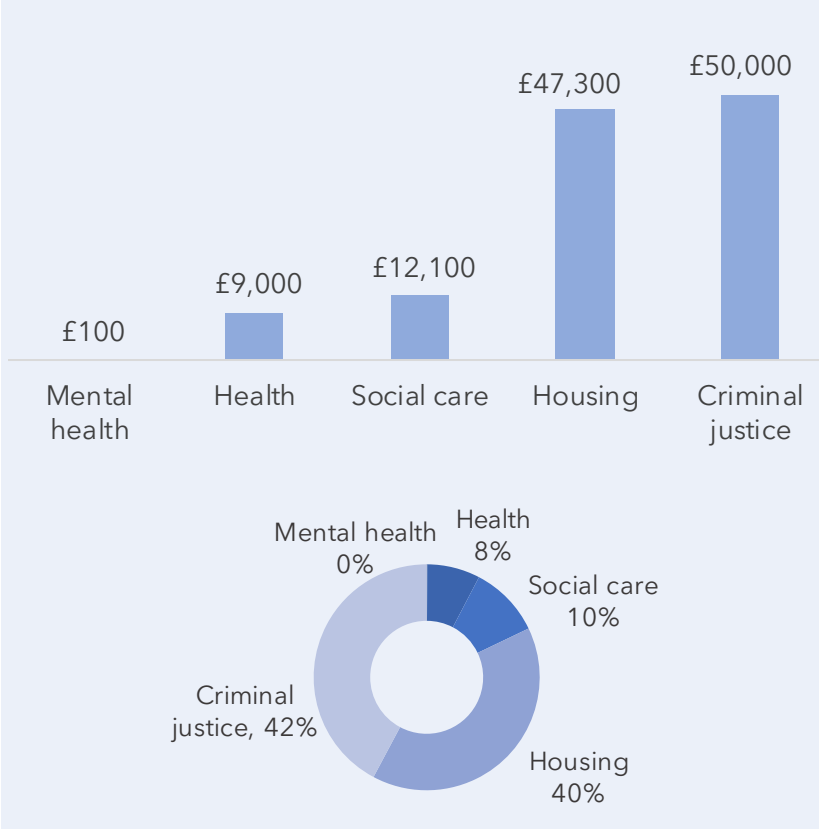
Financial Years 2021-22 & 2022-23

OXFORDSHIRE (Pathway 2 Step-down Services)

## Economic Analysis of Mr. J.D. Case Story (considering broader public perspective)

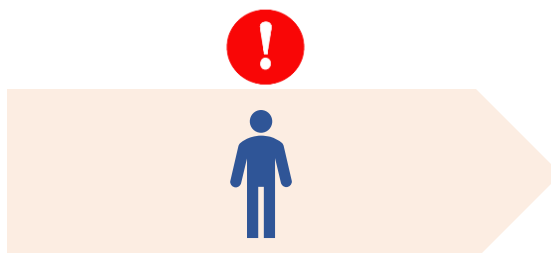
### Year before moving in OOHC

Total annual public costs: **£118,500**



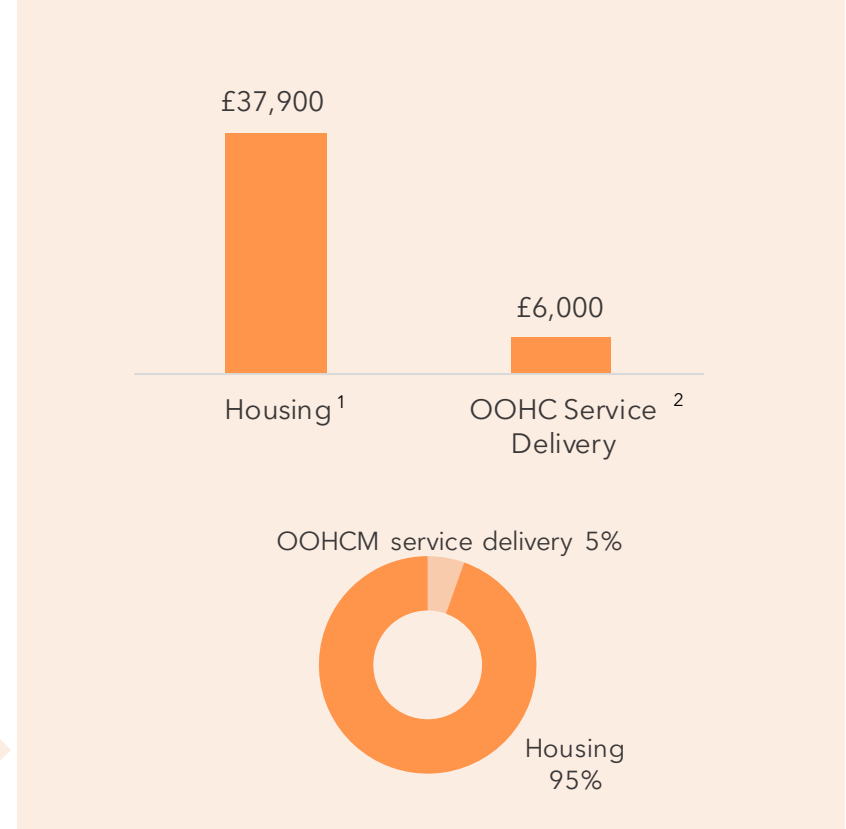
**If you provide specialist OOHC you can do more with public money: free up **£74,600** per person who is homeless in one year**

**With the same investment, you can provide support for three people instead of just one, securing improved outcomes for each of them.**



### Year after moving out of OOHC

Total public costs: **£43,900**



**!** Limited to one case story

1, 2 More details on housing and OOHC service delivery are reported in the [notes](#)



# National Audit of Specialist Intermediate Care for People who are Homeless

Financial Years 2021-22 & 2022-23

OXFORDSHIRE (Pathway 2 Step-down Services)

## Audit Summary



### Service implementation

- **Fidelity:** A high fidelity model with in-reach services and residential step-down support.
- **Mobilisation:** Rapid – additional service operational by March 2021
- **Acceptability:** Well-received by People Experiencing Homelessness (PEH), providers and commissioners
- **Implementation costs** are within national averages
- **Capacity & Demand:** Services scaling for 23/24 to increase capacity to match demand



### Evaluation Outcomes

- **Staffing:** Caseloads are lower than national averages, with regular visits from the nurses and GPs
- **Patient flow:** Lower average length of stay compared to national stats
- **Housing outcomes:** Fewer patients sleep rough after leaving OOHCM
- **Health status and patient outcomes:** Majority report positive outcomes, with lower self-care and mobility problems on leaving, and that they were treated with respect and dignity in step-down
- **Economic Analysis:** Case study indicated an increase value for the public budgets



### Audit and evaluation

- **Data:** Includes a combination of investment costs, audit, patient experience and economic data (with linkages to local NHS information) and individual case stories.
- **Co-production:** Involvement of peer researchers and Experts by Experience in data collection and service development
- **Appropriateness:** Evidence produced has been recognized by PEHs, providers, and commissioners.
- **Adoption:** Data collection and evidence production is well-received by the organization, and evidence produced was successfully used to support service sustainability.
- **Feasibility** successfully tested

## Challenges

- **PREM:** more support and information to family or those close to PEHs; More support to maintain social contact after leaving step-down.
- **Sustainability:** Need to move toward longer term, more sustainable funding sources to secure continuous service delivery and audit/evaluation.

More data for the site (and the national programme) are accessible via the online integrated management dashboards <https://www.lse.ac.uk/cpec/research/OOHCM/integrated-management-dashboards>

# National Audit of Specialist Intermediate Care for People who are Homeless

Financial Years 2021-22 & 2022-23

OXFORDSHIRE (Pathway 2 Step-down Services)

## Notes

### Key findings



**Health outcome:** QALY (quality adjusted life year) score moving out of step down (compared with when they moved in).  
Average QALY when they moved in step down: **0.68 (SD 0.30)**  
Average QALY after moving out of step down: **0.75 (SD 0.22)**

### Patient demographics



**Patient average age: 44, Range: 18 - 76**  
**Patient Ethnicity split:** %Asian or British Asian: **4%**; %Black or Black British: **2%**; %Mixed: **0%**; %Chinese or other ethnic group: **0%**;  
%White: **81%**; %prefer not to say: **13%**.

### Housing Outcomes



Destination after OOHC services: Sample size = **30**

Additional data on destination after OOHC services from local audit data (rather than self-completed questionnaire as reported in the housing outcomes page)

| Housing Type on Discharge | Temp | Supported | LA rented | Other | Private rented | Returned to previous | Family/friends | Hostel |
|---------------------------|------|-----------|-----------|-------|----------------|----------------------|----------------|--------|
| %                         | 22   | 16        | 8         | 22    | 12             | 2                    | 20             | 0      |

### Health Status Outcomes



- These figures relate to questionnaire data collected across the lifetime of the programme covering 2021/2022/2023.
- Traffic lights decided by the team based on observations
- Sample size = **35**

### PREMs



- Experience of care was captured using the same PREM measure adopted in the National Audit of Intermediate Care.
- These figures relate to questionnaire data collected across the lifetime of the programme covering 2021/2022/2023.
  - The following responses were given a value of 1: 'Yes', 'Yes - always', 'Yes - definitely', 'I did not need to be asked', 'I did not want or need them to', 'I am not concerned about this'
  - The following responses were given a value of 0: 'No', 'Yes - sometimes', 'Yes - to some extent', 'No, but I would have liked them to'
- Sample size = **20**
- Traffic lights decided by the team based on observations

# National Audit of Specialist Intermediate Care for People who are Homeless

Financial Years 2021-22 & 2022-23

OXFORDSHIRE (Pathway 2 Step-down Services)

## Notes

### Resource use



Questionnaire data on use of resources for the broader public perspective is not available for this site

### Hospital Resources



We see an overall decrease in number of hospitalisations (both planned and unplanned). Also, we see an increase in bed days as a potential positive for patients who are homeless due to preventing early self-discharge, where people frequently leave before treatment completed.

### Economic Analysis



Per person costing data were calculated from local hospital data collected between 2021 and 2022 for **52** clients. Intervention cost data includes step-down accommodation costs (e.g. management, security) for provision of Pathway 2 services.

### Economic Analysis: Case Story



**Further Details on the case:** The person is an alcohol dependent for 30 years, previously diagnosed with EUPD and complex PTSD, who has the highest number of convictions in England - is not necessarily representative of all cases using the OOHM service. (Costs prior to entering the service are largely attributed to arrests by police, and includes one night in prison. For patients who do not share these circumstances, the difference in costs incurred before and after OOHM service is likely to be smaller).

Following OOHM service, Mr J.D.'s housing situation (for the first 12 weeks, and presumed to continue) is stable at one location (care home - safe, needs met, Making friends, DoLS and money management in place) as opposed to the instability from before, which was a constant cycle through rough sleeping, sofa-surfing, and temporary homelessness service providers.

**Rationale:** To better understand the full costs of service provision for Mr J.D. without OOHM and the potential saving for the broader public perspective when accessing appropriate OOHM; to look at benefits in terms of shifting costs from urgent / emergency to recovery and prevention

Note: Limited to one case study. Future analysis should consider longer term impacts on both costs (for broader public budgets) and outcomes for the cohort of OOHM clients.

**OOHCM service delivery** Includes costs relating to step-down accommodation, staff costs (including social care and mental health care) and project management.

**Housing** includes social care support given by care home staff.