Most hospitals have systems in place for assessing and recording patients’ personal circumstances, but not usually their housing circumstances.

You may wish to consider expanding your existing assessment to include information about patients’ housing circumstances. This will help you to decide any action that needs to be taken to make sure their home is safe to return to, and will support their recovery.

Checklist 1:
Questions for assessing patients’ housing circumstances
This checklist suggests some questions that you could incorporate into your standard discharge questionnaire. It also sets out some actions that you could take in response to the answers you receive. It is important that the hospital has access to resources and information available to deal with any housing related concerns or issues that may arise.

1) Questions relating to the patient’s housing arrangements

- Owner occupier
- Living with relatives or others
- Living in private rented accommodation

Landlord or agent name and contact details

- Living in social housing (i.e. housing association or council housing)

Landlord name and contact details

- Living in sheltered housing or extra care with a scheme manager

Scheme manager name, contact details and working hours

- Living in a care home

Main contact name and contact details

- Homeless/No fixed abode
2) Questions relating to the suitability of the patient’s housing

In some instances, new aids or adaptations may be needed to enable people to get around and recover at home. In other instances, long-standing problems with housing can suddenly become a threat to health, safety or recovery.

The questions in the table below are intended to assist you to identify whether there are any housing-related issues that make a patient’s home unsafe or could impede their recovery. You may be able to find the answer to these questions by:

- Asking the patient, their relatives or carers.
- Asking the landlord, scheme manager or housing support worker.
- Speaking to the patient’s GP, community nurse, or social worker.

<table>
<thead>
<tr>
<th></th>
<th>YES</th>
<th>NO</th>
<th>INITIALS</th>
</tr>
</thead>
<tbody>
<tr>
<td>a)</td>
<td>Can they get into and out of their home?</td>
<td></td>
<td></td>
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<tr>
<td>b)</td>
<td>Is their home warm enough? Is the heating working adequately?</td>
<td></td>
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<tr>
<td>c)</td>
<td>Is their home in reasonable repair? Are there any outstanding repairs needed?</td>
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<tr>
<td>d)</td>
<td>Are they able to use all the facilities without the need for additional aids, adaptations, improvements or assistive technology (Telecare)?</td>
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<td>e)</td>
<td>Are they able to manage everyday tasks such as shopping, gardening, taking the dog out etc?</td>
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<td>f)</td>
<td>Will the patient have contact with one or more people on a frequent basis?</td>
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<td>g)</td>
<td>Is their current home still able to meet their needs (with adaptations, care and support if required)?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>h)</td>
<td>If homeless, what access to temporary accommodation and/or support services is required to meet their needs?</td>
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</tbody>
</table>
3) Actions you could take

If the answer to any of the above questions is no, you may want to:
• Arrange a home assessment.
• Talk to the patient and their relatives or carers about what they can do.
• Contact the landlord or scheme manager to ensure the repairs are completed, and possibly to negotiate other changes such as adaptations.
• Investigate local agencies that can offer a variety of support (see Factsheet 1).
• Make information available about other temporary or permanent housing options (see Factsheet 2).

Taking all the above into account, in your view is it safe for the patient to return to their home or, if homeless, to find temporary accommodation?

If no, what actions are you going to take?

4) End of life scenarios

If your patient is coming close to the end of their life, they may need assistance to enable them to die in the place of their choice.

As well as medical and statutory services, a variety of agencies help families to make temporary arrangements such as making a downstairs room into a bedroom or making equipment available quickly. These include home improvement agencies, other local agencies offering support, such as Age UK, and national agencies with a local presence such as the British Red Cross.

Having prior knowledge of what your local services can offer will enable you to respond quickly in these situations (see Factsheet 1).

Have you approached residents to find out about their wishes in relation to end of life care? How are you going to help them to fulfil their wishes?

For further information on end of life care in a specialist housing setting see the learning resource pack for care and support staff, End of Life Care in Extra Care Housing.