



Housing LIN

Connecting people, ideas and resources

Viewpoint 116

Why closing the gap between health and housing will alleviate pressure on the NHS

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Introduction

The NHS is under immense pressure, with more than six million people on a waiting list for treatment.¹ Yet while much of the debate focuses on clinical capacity, some of the most effective solutions sit outside the healthcare system itself.

In my first year at Tunstall Healthcare, I have seen first-hand how closely housing and health outcomes are connected. Safe, supportive housing options can unlock the key to independence, effectively support managing long-term conditions and help avoid hospital admissions.

However, healthcare and housing providers often operate independently, creating inefficiencies for patients across the country. More frustratingly, the data shows ongoing gaps in how individual needs are being identified and assessed, resulting in unoptimised resource allocation and potential harm to the people receiving care or support.

If we are serious about delivering a more preventative model of care and reducing pressure on the NHS, closing the gap between health and housing must become the priority.

The challenges at play

The connection between housing providers and healthcare is well established, yet the gap between demand and provision continues to widen. As more people are living longer, the need for supported housing is growing, but older people can face more complex health conditions, mobility limitations and age-related care needs which can mean further considerations are needed beyond housing.

At the same time, housing providers are facing significant financial and operational pressures² that limit the ability to expand provision and commissioning - at the potential harm of the people in need of support.

This growing imbalance has consequences far beyond the housing sector. When suitable housing is unavailable, people are often left without the foundations they need to live independently, placing greater pressure on families and emergency services.

Housing is not separate from health or care, it is fundamental to both. If we want more people to live well for longer, we need to create the conditions that support independence, confidence and connection - helping people remain in control of their lives while reducing avoidable demand on health and care services.

(1) British Medical Association, NHS backlog data analysis, May 2026:
<https://www.bma.org.uk/advice-and-support/nhs-delivery-and-workforce/pressures/nhs-backlog-data-analysis>

(2) Local Government Association, Social Housing Research, March 2026:
<https://www.local.gov.uk/about/news/social-housing-finances-show-improvement-significant-challenges-remain-almost-half>

At the same time, fragmentation between care and housing systems remains a significant challenge. Despite sharing many of the same objectives, organisations often operate with separate funding streams, governed by different councils and using different software or technology. This can make it difficult to coordinate support around an individual, particularly when multiple parties are involved.

The result is that many people become stuck between hospital care and independent living. Delayed discharges continue to place pressure on hospital capacity, while others experience avoidable deterioration due to delays in care packages and limited resources.

As the NHS continues its shift towards prevention and community-based care, housing must be recognised as a vital part of the solution. As set out in the NHS 10 Year Health Plan, the future of health and care depends on shifting from hospital to community and also from analogue to digital. Housing has a critical role to play in delivering these ambitions, providing the foundation for people to live independently and have easy access to coordinated support close to home.

Supporting independence through connected care

If we want to support more people to live independently for longer, we must rethink how care and support are delivered beyond traditional settings. Enabling people to remain in their own homes for as long as possible is the right thing to do, because it's ultimately where people want to be.

This is where remote monitoring technologies have an increasingly important role to play, providing timely insights that support earlier intervention, more personalised care and greater confidence for both individuals and those who support them.

Remote monitoring has been available for many years, and providers know telecare is a tool that is able to gain real-time insights into an individual's wellbeing. The next steps for the sector must focus on connecting more services and software to prevent silos and missed data patterns.

Rather than relying solely on scheduled visits or waiting until an emergency alarm is pressed, connection across systems has the ability to identify changes in circumstances earlier and intervene before problems escalate - putting people at the centre of outcomes.

Importantly, this approach enables long term independence rather than hoping for it. People can maintain greater control over their lives while benefiting from an additional layer of reassurance and support.

By bringing together information from across health, housing and care, technology can help services spot when someone may need support and take action earlier. Instead of waiting for a crisis, providers can build a more connected picture of a person's wellbeing and respond in the best way possible.

At a time when both health and housing providers are being asked to do more with limited resources, technology offers an opportunity to improve outcomes for people while helping to alleviate pressure on frontline services.

What meaningful integration looks like in practice

While technology is an important enabler, meaningful integration requires more than digital tools alone. It requires organisations to work differently, share information more effectively and put individual's needs at the centre of decision-making.

One of the most important foundations of integration is shared data. Housing providers, health services and social care teams often hold valuable insights into an individual's circumstances, but these insights are rarely connected and shared between the parties. This often results in missing opportunities to identify risk early and coordinate those much needed interventions.

Just as important is ensuring organisations work together more effectively; people should not have to navigate multiple services that operate independently of one another, repeating their case each time. When healthcare and housing associations collaborate and share responsibility for supporting an individual, interventions can happen earlier, support becomes more consistent and outcomes improve, alleviating pressure on the NHS.

Achieving this level of integration requires organisations to address operational considerations such as interoperability, workforce adoption and service design. Most importantly, it requires organisations to move beyond working in isolation and take shared responsibility for supporting individuals in each stage.

Now is the time for technology investment to shift beyond monitoring and reporting tools towards practical, connected solutions that enable services to work together around people's needs. The greatest opportunity lies not in collecting more data, but in using it to support joined-up decision-making, coordinated care and ultimately, achieving better outcomes for individuals.

Conclusion

The need to bridge the gap across health and housing has never been higher. With pressure mounting on the NHS, we cannot afford to overlook opportunities to prevent avoidable demand and protect people.

Prioritising integrated health and housing solutions has the potential to deliver significant benefits across the system. To realise this potential, we must accelerate the changing of delivery systems in a way that connects all involved.

At the same time, we must strengthen cross-sector partnerships and develop data-sharing frameworks that allow organisations to work together more effectively. If we are serious about building a more sustainable NHS, closing the gap between health and housing must move from an aspiration to immediate action.

To find out more on how housing associations can utilise technology, please visit:

www.tunstall.co.uk

Note

The views expressed in this paper are those of the author and not necessarily those of the Housing Learning and Improvement Network.

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About Tunstall Healthcare (UK) Ltd

Tunstall has been at the forefront of technology innovation for the health, housing and social care markets for 65 years, growing to become a UK manufacturer with a global presence.

Tunstall works with social care providers, healthcare services, housing and retirement living providers and charities in 18 countries, improving the lives of more than five million people, including those living with dementia, learning disabilities, physical disabilities and long-term health conditions.

As technology advances and solutions become increasingly digital and cloud-based, we will work closely with our customers and partners to enable them not just react to events, but to predict and even prevent them, using data-driven insights. Our focus is on creating a more connected world that fulfills the potential of technology to offer intelligent care and support, and give people greater choice and control about how they live their lives.

www.tunstall.co.uk

About the Housing LIN

The Housing LIN is a sophisticated network bringing together over 15,000 housing, health and social care professionals in England, Wales and Scotland to exemplify innovative housing solutions for an ageing population. Recognised by government and industry as a leading 'ideas lab' on specialist/supported housing, our online and regional networked activities, and consultancy services:

- connect people, ideas and resources to inform and improve the range of housing that enables older and disabled people to live independently
- provide access to intelligence on the latest funding, research, policy and practice
- raise the profile of specialist and supported housing with developers, commissioners and operators, and
- attract business to help and support clients plan, design and operate aspirational housing and developments operators, and services for people of all ages.

For more information on integrating health and housing at, visit the Housing LIN's dedicated 'Health Intel' pages at:

<https://www.housinglin.org.uk/Topics/browse/HealthandHousing/>

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