



# Resource impact summary report

Resource impact

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The NICE guideline on integrated health and social care for people experiencing homelessness covers ways to improve access to and engagement with health and social care services for people experiencing homelessness.

It is difficult to robustly estimate the impact on resource use in England because:

- current practice is highly variable
- the guideline recommendations cover a very broad range of settings including secondary care, primary care, social care and voluntary, community and social enterprise (VCSE) sector providers
- unit cost estimates are not available for some of the recommendations.

However, based on feedback received during guideline consultation, implementing the guideline is expected to have a significant impact on resource use in England overall and especially at a local level where current practice may be very different from the guideline recommendations. It is expected that in the long term, much of these costs could be offset through better engagement and access to health and social care, resulting in better outcomes and avoiding the use of acute or crisis-level care. It is anticipated that future further integration of health and social care budgets and service provision may allow for alternative commissioning and lead to efficiencies and better service outcomes.

### **Key areas identified by stakeholders as having potential for resource impact**

- Additional resources may be required in areas where capacity issues may prevent organisations delivering the service in line with the recommendations. However, this requirement may reduce in time as services are reconfigured and streamlined across the local health economy.
- Training, development, and the support of staff is a key theme identified by stakeholders across many of the recommendations. Stakeholders felt that implementing recommendations would require significant resource use to ensure that staff have appropriate training and support in place to deliver care.
- Longer contact times, offering continuity of care and having consistent key workers may require an increase in staffing.
- Multidisciplinary team-based care for people experiencing homelessness was the recommendation most frequently cited by stakeholders as requiring significant resources to deliver in terms of increasing capacity and ensuring staff have the correct training and expertise for working with people experiencing homelessness.
- Housing with health and social care support such as supported housing will have significant resource implications due to the current limited availability of suitable housing.
- Working in a trauma-informed way will have a significant impact on resources due to the training required to ensure staff have the relevant knowledge and expertise.

Integrated health and social care for people experiencing homelessness is commissioned by local authorities and integrated care systems. Providers are NHS hospital trusts, primary care, mental health providers, community care providers, social care and VCSE sector providers.