HACT

Stakeholder Briefing Paper

The strategic case for integrating mental health and housing



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01 Overview

This briefing paper outlines the strategic case for integrating mental health and housing across mental health inpatient and community services, adult social care, local authority housing, the local provider market and those with lived experience.

Safe, secure and affordable housing is crucial in supporting people to live well, work and take part in community life. Having settled housing is known to have a positive impact on our mental health. Our homes are a critical foundation in all our lives, physically and psychologically, and they are our primary location of care and support. It is now universally accepted that good quality safe housing and positive mental health are inextricably linked.

Integrating mental health and housing services improves individual, organisational and system outcomes. An integrated environment drives both quality improvement and efficiency, by reducing delays to discharge, addressing long lengths of stay in inpatient settings and reducing the need for inappropriate out-of-area placements. It provides holistic, coordinated care by addressing the foundational role of safe housing for recovery and independent living.

HACT findings from work across the country demonstrates that placement breakdown and lack of timely preventative interventions is a commonly reported feature of admissions to acute inpatient settings. There are many reported difficulties across the country for delayed discharge, although a lack of suitable housing (and other housing-related challenges) seems to be a fundamental driver.

> Housing and housing-related support is recognised as a central part of an effective mental health recovery pathway, as well as a key element in preventing ill health/crisis and reducing the need for receiving care in more restrictive settings.

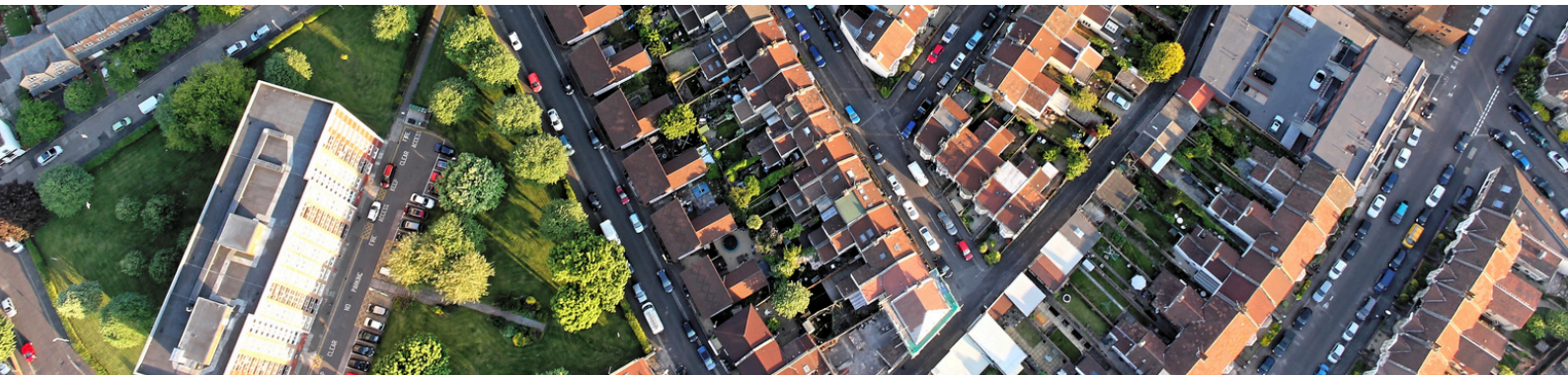
01 Overview

Settled accommodation provides a foundation for people to build their recovery and be part of a local community, assisting individuals to receive the support they want and facilitate a return to work or education. It also provides the basis to deliver services in the least restrictive environment possible.

The strategic case for integrating mental health and housing is already recognised and well-understood. It is a key enabler to reducing pressures in mental health inpatient settings, by reducing the length of stay, improving flow, and improving both quality and the experience of NHS services. In the longer term, a focus on housing can prevent the need for re-admissions and addressing wider health inequalities.

NHS planning guidance for 2025/26 prioritised improving patient flow through mental health crisis and acute pathways and reducing average length of stay in adult acute beds. The medium term planning framework (2026 – 2029) goes further by eradicating inappropriate out of area placements. Adult mental health bed occupancy remains unsustainably high; length of stay has continued to rise and over 50% of bed days lost to delayed discharges are linked to housing or social care.

The guidance asks providers to implement the 10 high impact areas for mental health discharge. These high impact areas include the importance of identifying common reasons and solutions to people being delayed, such as housing. But too often for frontline teams in the NHS, housing can be a stubborn issue to resolve.



02 Strategic case

1 Housing as a foundation for recovery and independence

Safe, stable housing is essential for recovery from serious mental illness. It enables individuals to live closer to their families and communities, reducing reliance on inpatient services and out-of-area placements. Housing provides the infrastructure for community-based care, which is less restrictive and more person-centred.

2 Reducing inpatient pressures and delays to hospital discharge

Lack of appropriate housing is a major barrier to timely discharge from mental health inpatient settings. It contributes to increased cost pressures and poorer outcomes for individuals.

Where integrated mental health and housing strategies have been implemented measurable impacts have been demonstrated. Sussex Partnership NHS Foundation Trust reduced housing related delays to discharge from 40% to 5% in one year by introducing a housing needs assessment framework and creating a dedicated housing team.

3 Enhancing system efficiency and cost-effectiveness

Supported housing is a cost-effective alternative to inpatient care. It contributes significantly to reducing long lengths of stay and prevents re-admissions. It provides care in the least restrictive environment possible, delivering both quality experiences and outcomes.

Strategic integration allows for better resource allocation and improved flow across the system, benefiting both the health and social care, and housing sectors.



02 Strategic case

4 Improving outcomes through holistic, person-centred care

Mental ill-health is often linked to tenancy breakdown and homelessness. Conversely, poor housing can exacerbate mental health conditions. Integrated care models and pathways that include housing support lead to better recovery outcomes, increased independence, and improved quality of life.

5 Strategic alignment with national policy

The NHS ten-year plan, 'Fit for the Future', emphasises a strategic shift toward strengthening and aligning local services and integration with partners to provide more proactive, preventative and community-based care. Housing is a key enabler for this shift. The Health and Care Act 2022 and the Community Mental Health Framework both emphasise the need for collaboration between health, housing, and social care.

Integrated Care Systems (ICSs) are expected to include housing in their strategic planning, with local investment to support this shift.

6 Workforce and cultural benefits

NHS clinical staff often lack the knowledge or tools to address housing issues. Embedding housing professionals within NHS teams (across community and inpatient) improves continuity of care, contributes to improving flow, and supports a more holistic approach. It improves staff satisfaction and experiences by enabling clinical staff to use their skills and focus on what they do best.

This also fosters a culture of collaboration, reducing siloed working and improving staff morale and effectiveness.

7 Local provider market development

With mental health trusts increasingly taking on key aspects of the lead provider role locally, integration with housing and housing support is an essential priority. Integration encourages local innovation, co-production with providers and those with lived experience, and the development of housing (and housing-related, e.g. floating support) solutions tailored to local needs.

It also strengthens the local provider market by creating demand for supported housing and wraparound services.

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Alongside this briefing, HACT has identified and published the 5 high impact housing actions for mental health discharge.

When implemented, these actions will create the right foundations for delivering sustained integration between mental health and housing.

1. Introduce a housing needs triage and assessment framework
2. Establish a dedicated housing team
3. Fully implement the Duty to Refer
4. Identify specific internal leadership on housing within NHS MH Trusts
5. Co-Create a Mental Health and Housing Strategy

Get in touch.

Ready to take the next step?

Get in touch with our team to learn more about how we can support you in connecting health and housing.

hact.org.uk

health@hact.org.uk