

Housing Recommendations Pathway

HOME ASSESSMENT

Recommendation A

Arrange the home assessment early, especially if medical factors affect suitability. In-person assessments are ideal, but virtual ones can be used.

A housing suitability checklist, like the WellChild Parent/ Guardian Housing screening form, can help identify issues before a full assessment.

- **Multidisciplinary Involvement:** Ensure multiple healthcare professionals (e.g., occupational therapists, discharge coordinators) are involved in assessing the property to provide a comprehensive evaluation of its suitability. A paediatric-specific checklist, like the WellChild Home Assessment Form for Children and Young People (CYP), should be used to support the housing assessment.
- **Suitability Decisions:** Decisions on a property's suitability should not be made without a thorough assessment unless the property is inherently unsuitable based on the patient's needs (e.g., Houses of Multiple Occupation where the patient requires private facilities, or high-level properties without lift access for wheelchair users).

SUITABLE

Patient can be discharged home to this property. Proceed with discharge planning.

SUITABLE WITH ADAPTATIONS

- **Assess Adaptation Timescales:** Assess the timeframe required for necessary adaptations to the property.
- **Consider Interim Arrangements:** Explore interim discharge options if the patient can return home while waiting for adaptations. Ensure an MDT suitability discussion is completed with all key members in agreement before informing parents, as changes to housing suitability decisions later can create significant challenges.
- **Hospice Admission Option:** If adaptations cannot be done with the patient at home, consider admission to a hospice or other appropriate care setting during the work.

- **OT Assessment:** A OT should evaluate the property and recommend necessary adaptations.
- **Prioritise Adaptations:** Fast-track minor adaptations while scheduling major works with clear milestones.
- **Funding:** Apply for Disabled Facilities Grant (DFG) funding and seek charity or community funds for any uncovered costs.
- **Use Available Resources:** Leverage support from the Local Authority, NHS, or Housing Association for minor adaptations.

INTERIM SUITABILITY

- **Patient can be discharged** to the property temporarily, but a plan must be in place for transition to permanent housing.
- **Suitability Criteria:** Interim housing must be appropriate for the child's age, weight, care support needs (if applicable) and medical equipment needs. Properties must have adequate space and access for mobility (e.g., wheelchair accessibility).
- **Timeframe:** Interim housing should be used for an agreed timeframe, based on the specific factors that make it unsuitable for long-term use (e.g., space limitations, accessibility, or equipment needs). Regular reviews by the MDT should be conducted to assess suitability and progress toward permanent rehousing.

Move-On Plans:

Purchase Property: If the family are homeowners, explore purchasing an alternative property suitable for medical needs.

Private Rental: Identify a private rental property that meets the patient's requirements.

Apply for Social Housing: Register or update priority on the local authority's housing register for social housing.

Mutual Exchange: If a social housing tenant, consider a mutual exchange to a more suitable property.

Housing Association Transfer: Join the housing association transfer register to explore more option.

SUITABLE

Patient successfully rehoused. Proceed with discharge.

Recommendation B

UNSUITABLE

Duty to Refer (DTR)

If the patient cannot be discharged home and the family is unable to resolve their housing need, the hospital should complete a DTR, to the local housing authority, with patient consent.

If the patient or family refuses housing assistance, they can explore rehousing options independently.

Duty to refer:
No Consent

Duty to Refer:
Consent

Recommendation C

Safeguarding procedures should be followed to allow a referral without consent if refusal raises safeguarding concerns.

Complete DTR to a Local Housing Authority, selected by the patient or family. Obtain signed consent using your Trust's Consent Form — or the Pan Thames LTV Housing Consent Form if unavailable — to support joint working, stay updated on housing progress, and ensure housing is aligned with discharge planning.

See government guidance on Duty to Refer for Hospitals for further information.

If there is no progress in securing housing, escalate the case to senior housing leads and healthcare teams, including at the network level, to ensure alternative solutions can be explored.

Recommendation D