



## Better data case study – Derventio Housing Trust May 2016

### Background to the Healthy Futures project

Homeless people face severe health inequalities compared with the general population, and can easily find themselves in a vicious cycle of ongoing health issues and repeat hospital admissions. This has significant cost implications to the NHS and other health, housing and social care services. Above all, however, is the impact it has on an individual's health and welfare; premature rates of death and the prevalence of chronic and multiple health conditions among homeless people paint a stark picture of the human cost to this inequality. Furthermore, without good health it is difficult to address wider needs and move on to employment and independent living.

The Healthy Futures project has developed a successful model that combines coordinated discharge with practical help and holistic support to homeless people in hospital. In just two years, the project has supported 52 high-impact users of urgent care and 72 homeless patients, and provided brief interventions to 141 people. It is now a key service within Derventio Housing Trust, perfectly aligning with the organisations mission to shape a better future for homeless people.

The project is managed by Kate Gillespie, Strategic Development Lead whose role is designed to maintain the presence of the service, prove its

impact and secure all important funding to continue to the service.

Derventio Housing worked with the Better Data project team from November 2014 to March 2015 to introduce the organisation to a range of tools and resources that could be used business development activities on behalf of the healthy futures project.

### How did 'Healthy Futures' benefit from its involvement from the Better Data project?

The Healthy Futures Lead Officer, Kate Gillespie, worked with the Better Data project team from November 2014 to March 2015. During this period Kate had involvement with the core members of the 'Better Data' project team to explore available tools and resources to support business development activities associated with the Healthy Futures project.

These meetings culminated in the development of a workshop clinic day which allowed a range of third sector provider organisations to have dedicated one to one time with individual members of the Better Data steering group to explore the range of tools and resources on offer the could be used for the purposes of business development. These sessions were focussed in three areas

- Local Authority level data and intelligence for Derby and

Derbyshire led by Andy Muirhead, Senior Public Health Analyst, Derby City Council

- Public Health England data and intelligence led by Natalie Cantillon, Principal Public Health Intelligence Analyst, Public Health England
- National Institute Health & Care Excellence (NICE) Implementation Consultant, Deborah O'Callaghan

The workshop clinic day provided numerous opportunities to think through how local, regional and national datasets could be used to promote the development of a business case for the services that third sector organisations provide.

Kate feels that the workshop clinic day presented three of key learning points for the providers present. These included:

- 'Highlighting how provider organisations can use their own data alongside publically held health and wellbeing data to evidence the need for service provision'. In this respect local indicators held on the [Public Health Outcomes Framework](#) proved to be a good starting point.
- 'Encouraging providers to think through how they might go about collecting outcomes data with local and national health and wellbeing priorities'.
- 'The day provided an opportunity to think through how service provision could be supported with reference to recognised good practice promoted by NICE'. In this respect [NICE behaviour change guidance](#)

[was useful to support the development of effective approaches to challenge health behaviours associated with homelessness.](#)

## What has been the impact of the Better Data project on the development of the Healthy Future service?

The learning from the Workshop Clinic day is illustrated in the two year evaluation of the Healthy Futures project. This evaluation was developed in house to reveal the ability of the organisation to collate outcomes data aligned with the local priorities of Clinical Commissioning Groups and Public Health Derbyshire. This includes the following examples from the evaluation report

**Commissioner priority 1:** Improve quality of life and the management of long-term conditions

**Healthy futures outcome:** self-determined 66% improvement in physical wellbeing.

**Commissioner priority 2:** Reduce avoidable hospital admissions

**Healthy futures outcome:** 88% reduction in non-planned admissions

**Commissioner priority 3:** Reduce A&E presentations

**Healthy futures outcome:** 88% reduction in presentation to A&E

**Commissioner priority 4:** Reduce length of stay

**Healthy futures outcome:** average 16 days shorter stay in hospital

**Commissioner priority 5:** Reduce health inequalities

**Healthy futures outcome:** 90% engagement rate with community health and treatment services

**Commissioner priority 6:** Reduce harmful alcohol consumption

**Healthy Futures Outcome:** 91% prevention across urgent care use and 90% engagement rate with community services.

**Commissioner priority 7:** Improve mental health and wellbeing

**Healthy Futures Outcome:** Self determined 66% improvement in mental and emotional wellbeing

**Commissioner priority 8:** Improve the health and wellbeing of older people

**Healthy Futures Outcome:** 36% of our older service users were socially isolated, the project achieved a 66% improvement rate for health and wellbeing in this group.

## Conclusion

The work of Derventio Housing to collate outcomes data aligned with local commissioner priorities has been complemented by the willingness of the organisation to implement a Social Return on Investment (SROI) methodology to quantify the achievable NHS cost-savings through a reduction of A&E admissions and in-patient stays. Such an approach has been endorsed as good practice by two independent external evaluations. The ultimate testament to the organisations approach to using data is the fact that Southern Derbyshire CCG once again chose to recommission the service.

For further information please contact:  
Kate Gillespie, The Healthy Futures Lead Officer,

[Kate.Gillespie@derventiohousing.com](mailto:Kate.Gillespie@derventiohousing.com)

## Acknowledgements

Authors: Richard Hazledine, ConnectMore Solutions. John Wilcox, Public Health England East Midlands.

Contributions from the Better Data Steering Group