



Hampshire
County Council



West Hampshire
Clinical Commissioning Group

West Hampshire Community Bed Strategic Review

September 2015

Quality services, better health



Aims of the Community Bed Review

Our aim is to make the most efficient use of resources

This resource needs to be in the right place to meet the needs of local people

with **increased overall capacity** to enable **more people** to receive the care they need, increasingly in their own homes or as close to their home as possible

Care at home or close to home is what local people are telling us is important to them



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Current Community Bed Provision

- ★ Community Hospital Rehabilitation Bed
- ▲ Reablement Beds
- Intermediate Care Beds

Andover Locality	
Andover Hospital	24

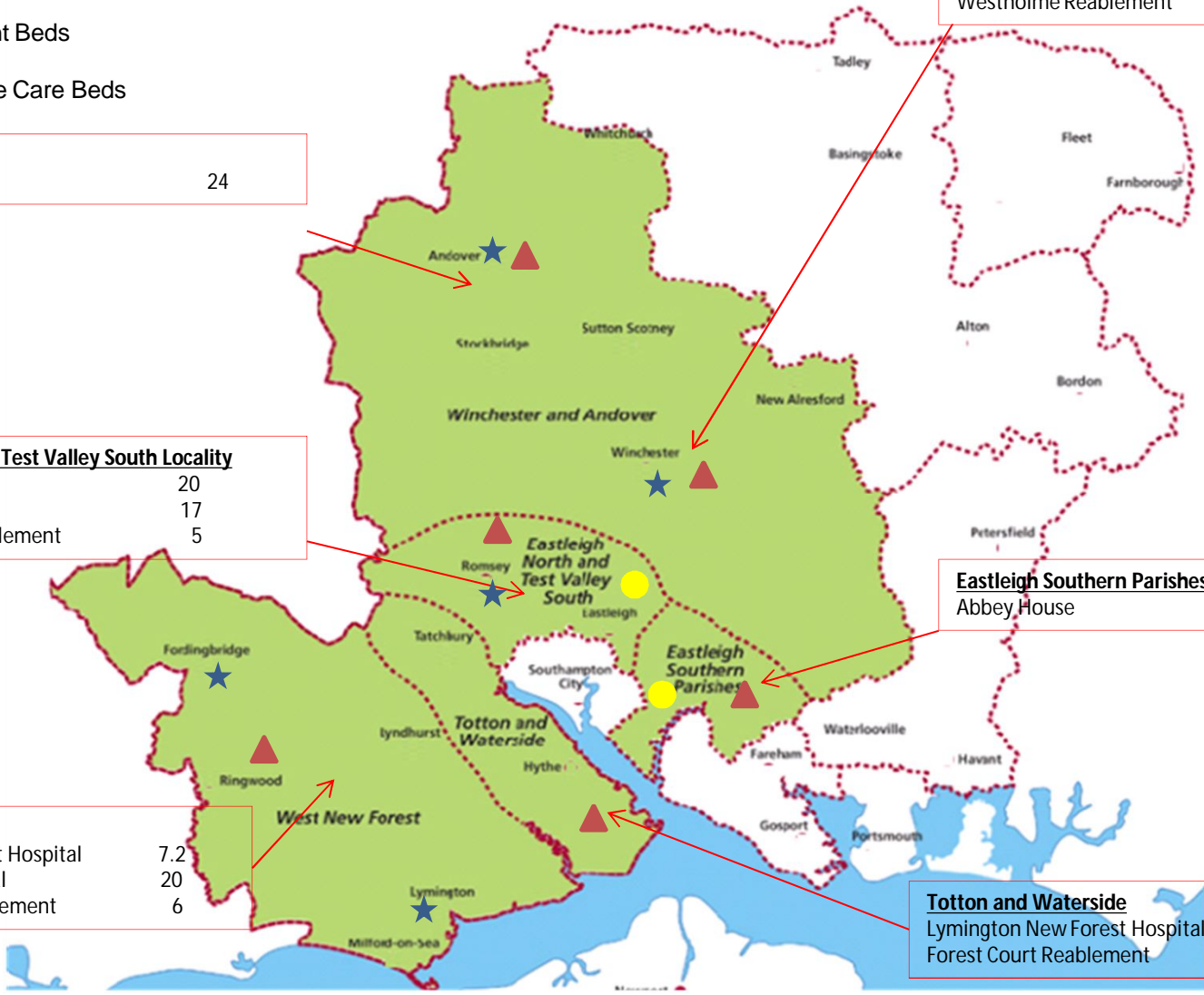
Winchester Locality	
Winchester Hospital	26
Westholme Reablement	10

Eastleigh North and Test Valley South Locality	
Romsey Hospital	20
Brendon Care	17
Fleming House Reablement	5

Eastleigh Southern Parishes	
Abbey House	9

New Forest Locality	
Lymington New Forest Hospital	7.2
Fordingbridge Hospital	20
Bickerley Green Reablement	6

Totton and Waterside	
Lymington New Forest Hospital	4.8
Forest Court Reablement	5

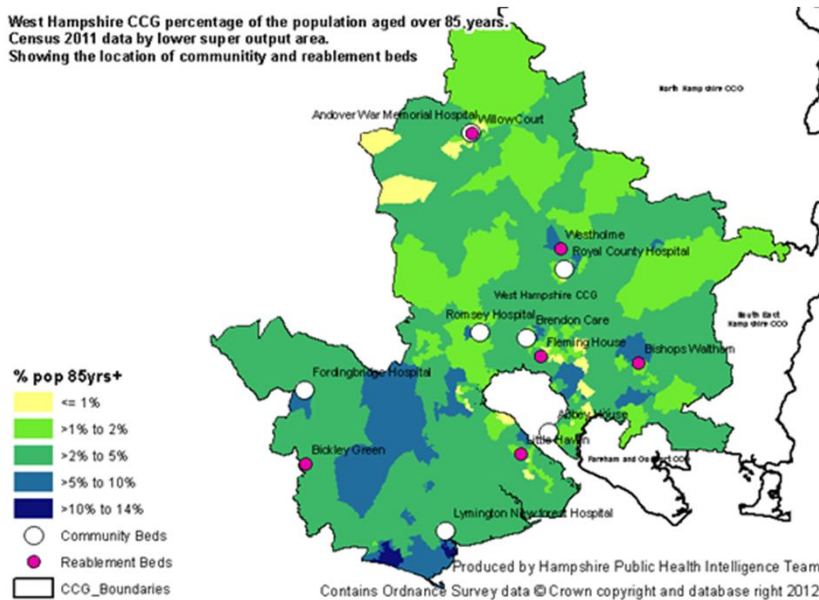


Total West Hampshire Community Beds: 154
 Community Beds: 102
 Intermediate Care Beds: 26
 Reablement Beds: 26

What are our population / localities needs now? And future?

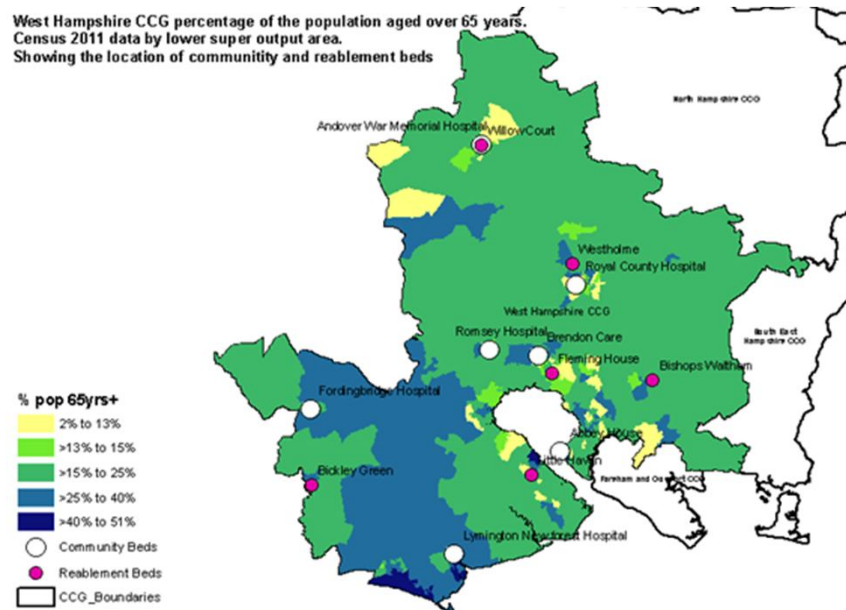
Heat Map > 85 years

West Hampshire CCG percentage of the population aged over 85 years.
 Census 2011 data by lower super output area.
 Showing the location of community and reablement beds



Heat Map > 65 years

West Hampshire CCG percentage of the population aged over 65 years.
 Census 2011 data by lower super output area.
 Showing the location of community and reablement beds



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Drivers for Change

- **40% of patients** in inpatient rehabilitation settings could be at home
- **Location** - too many beds in some areas and not enough in others
- **Ineffective use of resource**
- The **complexity** of the system



Patient Stories

“Thank you very much for the lovely care and food here, I could have gone straight home , I was waiting for a toilet seat, I think that there was a lack of communication”

Patient discharged from Acute Trust to Community Hospital

Patient in Acute Hospital

“Patient admitted to Acute Ward with multiple complex medical needs, under care of Community Geriatrician, Locality Hospital Geriatrician and Community Care Team. Patient assessed in AMU by Locality Hospital Geriatrician as previously known admission avoided – fast access diagnostics that day and taken home with support from Integrated Community Care Team”

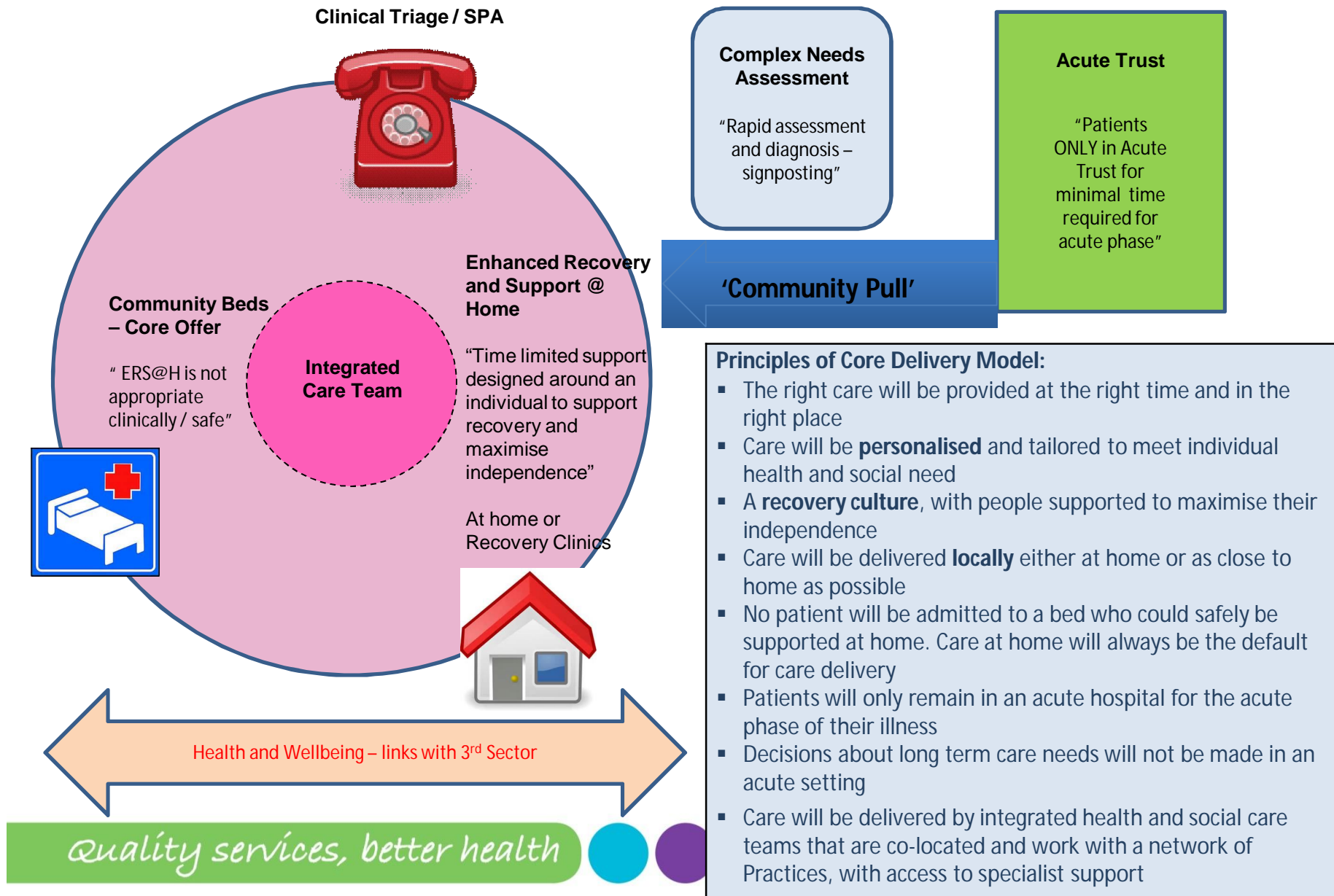
“Patient had been admitted acutely unwell to an Acute Medical Ward from a residential placement setting – already in receipt of CHC funding. Patient stabilised medically, however as checklist for CHC been updated was waiting for reassessment prior to going back to original place of residence. Patient was a delay of over three weeks since being declared medically fit for discharge”

Patient discharged from Rehabilitation Ward to Reablement Bed

“Patients records stated moved to Reablement setting for assessment of ADL, mobility and function, patient had a primary diagnosis of lung cancer with secondary tumours brain”

Patient discharged from Community Hospital to Reablement

Supporting Recovery and Maximising Independence



What changes are proposed?

- Move to a more equitable distribution of beds in line with demographic need
- Reduction of 22 beds but
 - Increased resources in the community to support more people at home
 - Increased bed efficiency (85% occupancy; average length of stay 20 days)

Locality	PBRA Population	Current Beds	Population per bed	Proposed Beds	Population per bed	Difference Beds	ERS&H
Avon Valley	41,501	26	1,596	15	2,767	(11)	
SW New Forest	90,212	7	12,529	14	6,444	7	
Totton & Waterside	81,222	10	8,288	15	5,415	5	
ESP	42,675	9	4,742	9	4,742	0	
ENTVS	100,119	42	2,384	19	5,269	(23)	Enhanced Recovery & Support at Home
Andover	54,494	24	2,271	24	2,271	0	
Winchester	132,736	36	3,687	36	3,687	0	
	542,959	154	3,525.71	132	4,082	(22)	

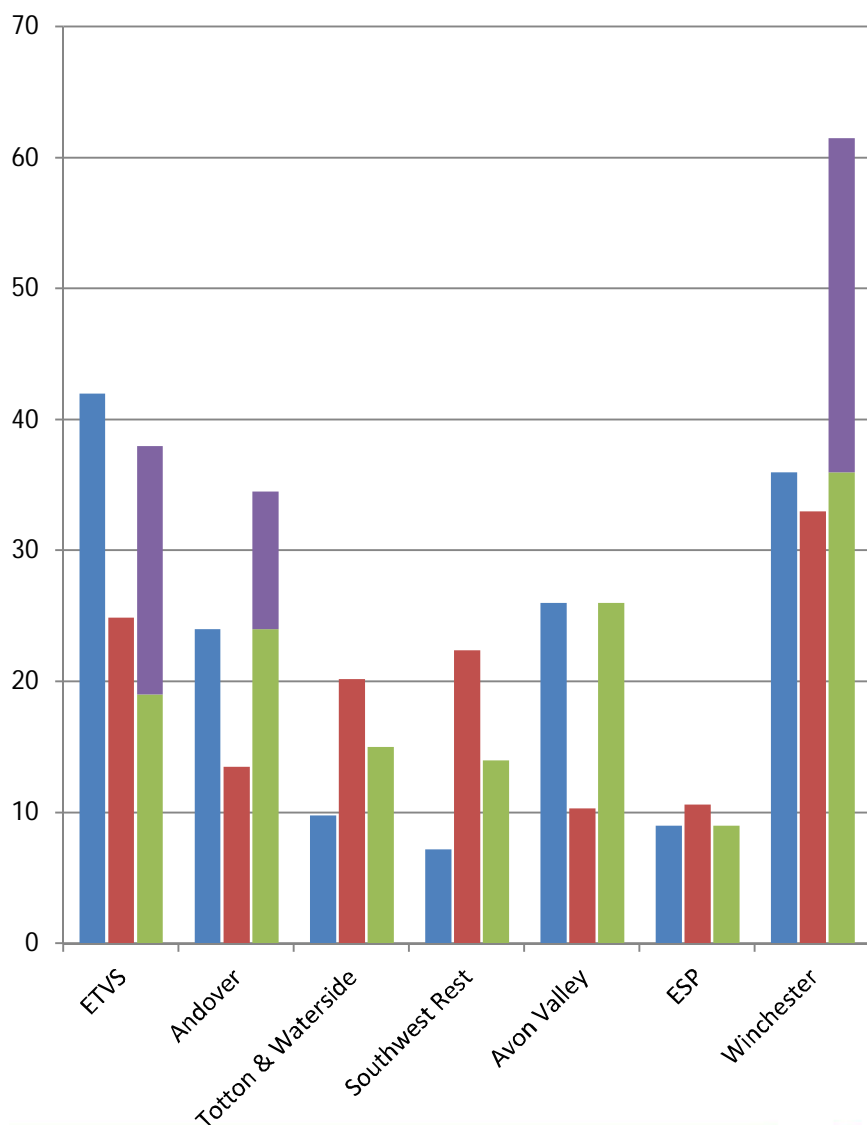


Enhanced Recovery and Support at Home to be established covering ENTVS, Winchester and Andover localities to facilitate early supported discharge.

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What does this mean per locality?



- Increase in beds in areas of high demand – West New Forest, Totton and Waterside
- Decrease in beds in ENTVS and Avon Valley where high number of beds but lower demand
- Significant increase in ‘virtual’ beds in the community in ENTVS, Winchester and Andover
- **Overall increased capacity to support more people at home: Additional 1,372 patients within 132 community beds (average length of stay 20 days) and 55 “virtual beds” (average length of stay of 21 days) via ERS@H**

■ Proposal (Virtual)
■ Proposal (Actual)
■ Beds required from modelling based on PBRA
■ Current community beds in system

Proposed Timescales

Month	Action
Jun-15	<ul style="list-style-type: none">○ Establish Enhanced Recovery & Support at Home covering Eastleigh North & Test Valley South
Jun-Sept-15	<ul style="list-style-type: none">○ Consultation on proposed model○ Presentation to HASC Sept-15
Oct-15	<ul style="list-style-type: none">○ Expand Enhanced Recovery & Support at Home to cover Winchester and Andover
Oct to Dec-15	<ul style="list-style-type: none">○ Implementation of proposed model and move to core bed offer
Apr-16	<ul style="list-style-type: none">○ Full model in place○ Monitoring and evaluation against key indicators

