

Community Bed Modelling

Update

December 2014

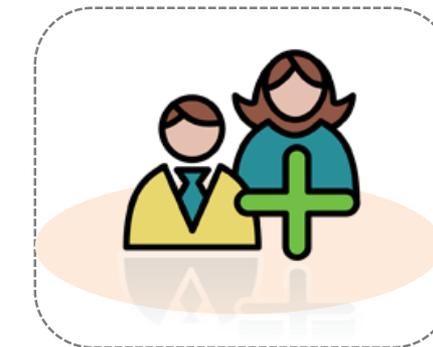
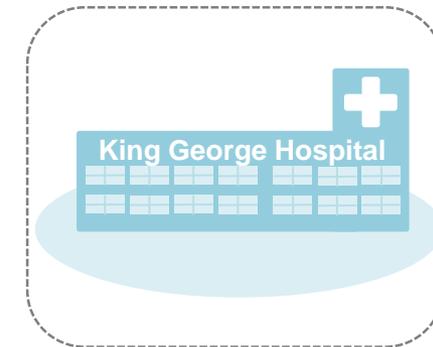


Introduction

This document provides an update to the Community Bed Modelling published in July 2014.

Following consultation and engagement, in December 2014 the three BHR CCGs agreed to:

- **Permanently establish** the new home based services (community treatment team and intensive rehabilitation service)
- To reduce the number of community beds in line with demand (maximum of 61 beds)
- Merge the **three** existing community rehabilitation units into **one** unit, on the King George Hospital site in Goodmayes
- We believe this will result in more people being able to be seen with **better, more individual care** that will help people to recover more quickly.



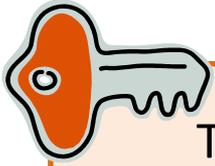
Planning for the future

We originally thought that in five years' time, with CTT and IRS in place, an additional **two – three community beds** might be needed to account for our growing population.

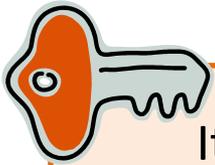
But this is not the case – Trialling the home-based services for 11 months has given us more data to work with when updating our bed modelling.

The latest data shows that our plans for up to **61 beds is enough** to provide support to a growing population and to effectively manage times when we may experience greater demand e.g. winter.

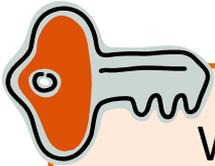
What does the evidence tell us?



The evidence gathered through the course of the trial of the new services demonstrated that the number of beds we thought we needed (maximum of 61) **can meet demand**



It also showed us that our average 21 days length of stay was **appropriate** and more people (about 50% of intermediate care patients) were able to be supported at home than we originally thought



With more people being treated at home, we now think that in **5 years** time we will **not require any more beds** to meet demand of our growing population – the beds we have will be enough.