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**Meeting:** Central Bedfordshire Council Overview & Scrutiny Committee  
**Date:** 27 January 2014  
**Subject:** Biggleswade Hospital  
**Report of:** Diane Bell Director Strategy and System Redesign, Bedfordshire Clinical Commissioning Group and Richard Winter Director South Essex Partnership Trust  
**Summary:** The attached paper is a position paper on the utilisation of the commissioned beds at Biggleswade Hospital.

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**Advising Officer:** Diane Bell Director Strategy and System Redesign, Bedfordshire Clinical Commissioning Group  
**Contact Officer:** Diane Bell, Bedfordshire Clinical Commissioning Group  
**Public/Exempt:** Public  
**Wards Affected:** All  
**Function of:** Council

## **CORPORATE IMPLICATIONS**

### **Council Priorities:**

Supporting and caring for an ageing population

### **Financial:**

1. This report includes details of baseline resources and additional resources funded from the Department of Health Winter Pressures 2013.

### **Legal:**

2. Not Applicable

### **Risk Management:**

3. Not Applicable

### **Staffing (including Trades Unions):**

4. Not Applicable.

### **Equalities/Human Rights:**

5. The implementation of the findings of this review will involve appropriate and due regard to the CCGs duty to comply with the Public Sector Equality Duty and its equality objectives.

### **Community Safety:**

6. Not Applicable.

### **Sustainability:**

7. Not Applicable.

**Procurement:**

8. Not applicable.

**RECOMMENDATION(S):****The Committee is asked to:**

1. Note actions being taken to support utilization of beds at Biggleswade Hospital.

**Background**

9. In way of context : As part of the Governments 'The White Paper *Our Health, Our Care, Our Say: A New Direction for Community Services* (DH 2006) sets out government policy for bringing care closer to home. One of the main strands involves delivering specialist care in local settings, particularly near to or in the patient's home, moving away from the traditional outpatient model and towards innovative community approaches that make effective use of multidisciplinary teams.
10. As part of regular service reviews, SEPT ensures that they are providing the right care, at the right time and in the right place for our patients. This means that for many of our patients, we are able to provide the best care for them within their own homes. This is also in line with the national agenda of providing 'Care Closer to Home' which is advocating this as the preferred option, where possible and appropriate.
11. Research demonstrates that individuals have better outcomes when there is a quicker response and rehabilitation and enablement care is provided in their homes where at all possible. There is evidence to demonstrate that patients who require their confidence building after a fall respond better when receiving these services at home instead of spending 4-6 weeks in an inpatient unit only to then have to have separate kitchen and stair assessments in their own home. The patient and carer feedback and experience has been nothing but positive. As a result of increased rehabilitation care packages at home beds at Biggleswade Hospital have not been utilised to their full capacity. BCCG currently commissions 29 beds, 6 of which remain physical beds at Biggleswade with the remaining bed capacity been converted to rehabilitation packages in the patient's own home.
12. In the autumn of 2013, BCCG received additional resources to support winter pressures for all providers in Bedfordshire. A range of initiatives have been implemented to support the expected surge in demand for acute care. The Urgent Care Working Group is responsible for the delivery of these initiatives to match demand with available capacity. SEPT were asked to open 23 beds at Biggleswade Hospital with a revised criteria to support patients with complex care needs during winter. The revised criteria allows for patients to be admitted who are non-weight bearing, those that are waiting for a Continuing Health Care assessment, residential and nursing home placements as well as mildly confused patients.

13. **Current Position:**

In spite of the flexed criteria for beds at Biggleswade (which is reviewed weekly at the Complex Discharge meeting), the use of beds has remained low. SEPT and partners undertook an audit in December 2013 of patients who had a length of stay of more than 10 days to establish if the beds at Biggleswade could be utilised better for a different cohort of patients based on needs. At this point the criteria was flexed further but the beds continue to be underutilised.

The following reasons have also impacted on the full utilisation of beds at Biggleswade:

- An increase of 38% of patients being cared for at home
- Patient choice has meant that often patients refuse to be transferred to Biggleswade from acute trusts, citing location and poor transport links.
- Low demand for patients with needs that can be managed safely in a community bed.

The position to date is that all beds at Biggleswade are available for use but the demand means that only the women's ward is substantively staffed and in active use. The CCG will continue to work with SEPT to ensure that there is sufficient bed capacity to meet demand.

The Urgent Care Working Group is a system-wide partnership of organisations responsible for local resilience planning through the winter period. The group meets weekly to monitor demand pressures and provides governance for all winter initiatives. There are daily teleconference calls to assess the needs for beds, in the context of the demand for acute hospital and rehabilitation beds.

14. **Conclusion:**

In terms of the longer term future of Biggleswade, the CCG has no plans to stop commissioning the unit.

A strategic review of all health services in Bedfordshire is underway and the outcomes from this review will inform a better model of service for to prevent admission and support early discharges from an acute setting.

The CCG is working closely with the Director of Adult Social Care and her team to describe a better model of health and social care that supports joint commissioning in Biggleswade. This is now being underpinned by the development of joint plans between the CCG and Central Bedfordshire Council for the efficient and appropriate use of Better Care Fund resources.