Intermediate Care Beds in Mid and South Essex

Online Public Consultation Event 4th April 2024

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Proposed Changes to IMC Beds in MSE

Below are the current number of IMC beds in Mid and South Essex alongside the proposed number of IMC beds with Option A or B

Current	Option A	Option B
99	88	91

Option B involves the removal of IMC beds from Thorndon Ward at Brentwood Community Hospital.

Thorndon Ward, Brentwood Community Hospital

- 25 bedded rehabilitation unit
- Accepting patients from Queens, Broomfield, Basildon and Southend Hospitals
- Predominantly patients for inpatient rehabilitation but also accept a small number of out of criteria patients who have either social, health or nursing issues.
- Patients accepted from the whole of mid and south essex area
- Patients accepted with high level of complexity being declined by other units.

Teams on Thorndon Ward

- Medical – 7 day medical cover including twice weekly consultant ward rounds.
- Nursing – Experience nursing team with support from excellent Integrated Care Assistants
- Therapy – Physiotherapists, Occupational Therapists, Occupational Therapy Assistants and Rehabilitation Assistants
- Integrated Discharge Service – specialist nursing team who work with our MDT to facilitate discharge.
- Additional support from community teams including dieticians, speech and language therapists, tissue viability nurses and podiatry.

Outcome Data for Thorndon Ward Patients

- Patients from Thorndon ward improve on average **5.66** on the Modified Barthel Index (Median - 6, range 1-15).
- Many patients improve from a status of total/severe dependency to a status of moderate dependency with further potential to improve in the community.
- Patients often arrive with 24-hour care needs and are discharged with single handed packages of care.
- Patients with significant complexity are managed by the Thorndon ward therapy team including patients with advanced dementia, traumatic injuries including spinal fractures, complex frailty syndromes and new neurological symptoms.

Patient Experience on Thorndon Ward

“Overall, how was your experience of our service?”

Rating	Percentage
Very Good	69%
Good	26%
Neither Good nor poor	4%
Poor	0%
Very Poor	0%

Friends and Family Test March 2023-March 2024

Targets for IMC Beds

Ambition	Indicator	Our current performance
Change in dependency	Improved – 85% Maintained – 8% Deteriorated – 7%	Improved – 92% Maintained – 5% Deteriorated – 3%*
Unplanned Returns back to the acute setting (%)	<15%	29% returned to acute
Discharge destination/usual place of residence	Year 2 – 75% Year 3 – 80% Year 4 – 85%	92% discharged to usual place of residence**
Average Exit Delays (days)	Of those delayed, no more than 2 days	No data at present
Patient recorded outcomes/satisfaction measure	At least equal to recovery at home	Patient experience: Very good – 69% Good – 26% Neither good nor poor – 4% Poor or very poor – 0%

Inpatient rehabilitation for those who cannot receive rehab at home

- Unstable medical status including oxygen requirements, unstable BM's and unstable blood pressures.
- High level of nursing needs including patients requiring 2 hourly turning.
- Poor sitting tolerance meaning that patients would need to be cared for in bed in the community as they would not be able to sit in a chair for the full stretch of time between two care calls in a QDS POC.
- Reduced safety sitting in a chair meaning a patient is unable to safely sit in a chair unsupervised again meaning that a patient would need to be cared for in bed if discharged home.
- High night needs including toileting.
- Patients with resolving deliriums who are not safe to live alone initially on discharge.

Community Services Mid and South Essex

- **Southwest Essex** (Brentwood, Basildon, Thurrock and Wickford)

D2A service, Brentwood RAFT up to 4 visits/weekly (48 hour response), Brentwood and Basildon ICT, ECL Physio

- **Southeast** (Southend, Castlepoint, Rochford and Rayleigh).

D2A service, Community Physiotherapy Service once/weekly (1-3 week wait)

- **Mid-Essex** (Chelmsford, Maldon, Braintree)

D2A service, Provide once weekly (14 week wait), ECL Physio (vacancy)

Conclusions

- Thorndon Ward is an effective service with good outcomes and good patient satisfaction ratings
- Future targets for IMC beds are largely already being met by the service on Thorndon Ward.
- Intermediate care in MSE is a valuable service that cannot be replaced by current community services