

30 May 2019

Information Rights & Compliance Team  
99 Waverley Road  
St Albans  
Hertfordshire  
AL3 5TL

Tel: 01727 804954  
Email: [Hpkt.foi@nhs.net](mailto:Hpkt.foi@nhs.net)

Our Ref: FOI/03293

Thank you for your request concerning inpatient rehabilitation beds.

Your request has been considered and processed in accordance with the requirements of the Freedom of Information (FOI) Act 2000.

**1. As of April 2019, how many NHS inpatient rehabilitation beds do you have in your Trust**

41 inpatient rehabilitation beds are accessible across the Trust.

**2. As of April 2019, how many people are placed in an inpatient rehabilitation unit outside your local area?**

11 have been placed outside of Hertfordshire.

**3. As of April 2019, of those patients placed out of area in inpatient rehabilitation units, how many are there appropriately because of their highly specialist needs?**

6 of the above placed outside of the Trust.

**4. Do you have a local strategy to minimise the use of out of area rehabilitation placements? If so, please provide brief details or attach a copy of any strategy to your response. This should include,**

**a. How out of area placements are agreed in your area**

All relevant Health placements for Hertfordshire are agreed through a tertiary care panel that meets each week. This meeting is chaired by a Consultant Psychiatrist from the acute unit and attended by the rehabilitation consultant psychiatrists from the in-house provision, operational managers and placement services. There are checks and balances in place to ensure that service user needs cannot be met within an in-house provision prior to an external placement being considered. The Trust has developed relationships with two key providers within Hertfordshire who have the expertise to provide the level of care required. Our Rehabilitation Strategy has a recommendation to scope the provision of an in-house High Dependency Unit. We have developed an Enhanced Rehabilitation Outreach Service (EROS) community service to increase flow through the in house rehabilitation beds and reduce the risk of relapse during transition. The expectation is that this newly launched service will increase internal capacity and flow within our bed base and consequently reduce the need for out of area inpatient rehabilitation bed.

**b. The process for reviewing anyone placed out of area (and potentially bringing them back to a local service)**

All individuals placed in a Health placement out of area retain a care co-ordinator from the mental health team local to their home address as well as a placement officer. The placement officers review each individuals progress regularly and the Care Co-ordinator attends CPAs whilst maintaining appropriate communication with family members.

There are weekly monitoring meetings with regard to individuals placed out of area in health placements where return plans are reviewed and action suggested to return individuals to their local community.

**5. Do you have a local community mental health rehabilitation team? If so, please briefly describe their remit, including the characteristics of the clients with whom they are commissioned to work (e.g. those in local high supported accommodation, those returning from an out of area placement etc)**

We have recently (January 2019) established a multidisciplinary community rehabilitation service known as the Enhanced Rehabilitation Outreach Service (EROS). Through the provision of evidence based interventions, the service supports people who present a higher risk of relapse or deterioration when transitioning at any point of the Rehabilitation Care Pathway (this includes individuals within rehabilitation placements).

The objectives for the service are to:

- Establish a recognised, understood and accredited Rehabilitation Care Pathway.
- Enable service users to reach independent living at the earliest point in their recovery and prevent relapse admissions to acute inpatient services.
- Reduce the average length of stay in in-house rehabilitation services and placements by a minimum of 6-10 weeks.
- Reduce delayed transfers of care from acute beds by creating flow through the care pathway.
- Reduce the number of service users placed into residential care and increase the number placed into Transitional supported living.
- Increase the capacity and capability of community housing providers to work with people with serious mental health histories.
- Work alongside community teams to ensure smooth transfer of care following step down programme of intervention.

Following phased mobilisation in line with recruitment (fully staffed April 2019), the service capacity caseload is around 20 individuals at any one point in time.

The Enhanced Outreach Rehabilitation Service provides interventions and support for adult service users discharged from an in house rehabilitation service or moving between services commissioned by the Continuing Care and Placement service with high risk of relapse. The team delivers interventions to manage negative symptoms, poor activities for daily livings, medication concordance, and are driven to support service users to transfer through the rehabilitation care pathway.

The service is managed as part of the Placements and Rehabilitation Services. It is multi-disciplinary and includes clinical psychology, consultant psychiatrist, nurses/social workers occupational therapist and STAR workers.

The service provided to individual service users is time limited and based on an agreed set of outcomes and expectations tailored to their specific needs. It acts as a stepping stone of support as service users move through the rehabilitation care pathway until they reach their most independent living environment.

The service provides a range of evidence based interventions including:

- Positive Risk Management planning enabling earlier discharges.
- Short term post transfer community support to service users from in house provision to ensure care package is in place and appropriate, that community sessions are attended and socialisation and community engagement is supported
- Focused support to further improve activities of daily living (ADL) in a community setting
- Early intervention and advice to Community Mental Health Teams, Placement Services and Providers, where behaviours may jeopardise placement/tenancy
- Individual and group interventions aimed at improving socialisation and employment opportunities
- Medication management to maintain stability, monitoring of physical health checks, advice and joint working with provider, community consultant and GP to maintain stable mental health
- Consultancy advice and support to local mainstream housing providers, to develop their capacity and capability to support service users with Serious Mental Health illnesses.
- Advice, support and training to mainstream community mental health teams on the safe management of people in the community
- Advice and support to start the process of undertaking vocational or paid employment

The service manages risk, behaviour and clinical responsibilities for the service user whilst under their care - the existing designated HPFT Care Co-ordinator actively works with the EROS and the service user in order to offer the most comprehensive service possible. Case management responsibility remains with the designated Care Co-ordinator. EROS identifies a keyworker, who will be a qualified professional. The EROS keyworker has overall responsibility for the co-ordination of EROS care during the episode of EROS rehabilitation, and is responsible for communicating with the Care Co-ordinator, GP and any other involved professionals during the EROS episode.

**6. How many local mental health rehabilitation beds have been decommissioned in your CCG area in the last five years and how many local beds do you plan to decommission in future?**

October 2018 – 6 male beds at site known locally as Sovereign House

Future plans for decommissioning – Zero (0)

Should you require further clarification, please do not hesitate to contact me.

Please find enclosed an information sheet regarding copyright protection and the Trust's complaints procedure in the event that you are not satisfied with the response.

Yours sincerely

*Sue Smith*

**Sue Smith  
Information Rights Officer**

Enc: Copyright Protection and Complaints Procedure Information Leaflet.

If you would like to complete a short survey in relation to your Freedom of Information request please scan the QR code below or click [here](#).

