

HEALTH AND ADULT SOCIAL CARE OVERVIEW AND SCRUTINY COMMITTEE

23 AUGUST 2016

ACUTE MENTAL HEALTH INPATIENT BED REVIEW UPDATE

Report from: Helen Greatorex, Chief Executive, KMPT

Author: Jon Pitt, Democratic Services Officer

Summary

The attached report sets out the response from Kent and Medway NHS and Social Care Partnership Trust (KMPT) in respect of the request for regular updates on the position with the acute mental health inpatient beds review.

1. Budget and Policy Framework

- 1.1 Under the Local Authority (Public Health, Health and Wellbeing Boards and Health Scrutiny) Regulations 2013 the Council may review and scrutinise any matter relating to the planning, provision and operation of the health service in Medway.
- 1.2 The terms of reference for the Health and Adult Social Care Overview and Scrutiny Committee (Chapter 4 Part 5 paragraph 21.2 (c) of the Constitution) includes powers to review and scrutinise matters relating to the health service in the area, including NHS Scrutiny.

2. Background

- 2.1. Attached to this report as Appendix 1 is a report from KMPT which provides an update on the following six areas:
 - The creation of short term additional younger adult bed capacity.
 - Younger adult bed usage, including acute inpatient out of area placements and delayed transfers of care [DTocS].
 - Section 136 assessments¹ and the joint working with the Police and South East Coast Ambulance Service NHS Foundation Trust [SECamb].
 - Single point of access [SPoA].

¹(1983) Mental Health Act [MHA]

- Liaison psychiatry (Medway).
- Closer working with social workers.

2.2. Appendix 2 shows the out of area bed usage.

2.3. At the June 2016 meeting of the Health and Wellbeing Board, an away day or workshop was proposed to discuss the development of an integrated approach towards mental health. The Board unanimously agreed to support this proposal and for the involvement of all relevant partners across all sectors.

3. Risk Management

3.1. There are no specific risk implications for Medway Council arising directly from this report.

4. Legal and Financial Implications

4.1. Under the Local Authority (Public Health, Health and Wellbeing Boards and Health Scrutiny) Regulations 2013 the Council may review and scrutinise any matter relating to the planning, provision and operation of the health service in Medway. In carrying out health scrutiny, a local authority must invite interested parties to comment and take account of any relevant information available to it and in particular, relevant information provided to it by a local Healthwatch organisation. The Council has delegated responsibility for discharging this function to this Committee and to the Children and Young People's Overview and Scrutiny Committee, as set out in the Council's Constitution. The Committee may make reports and recommendations to relevant NHS bodies and health service providers who can be required to respond formally within 28 days of a request for a response.

4.2. Department of Health guidance to support Local Authorities and their partners to deliver effective health scrutiny (published June 2014) emphasises that the primary aim of health scrutiny is to strengthen the voice of local people, ensuring that their needs and experiences are considered as an integral part of the commissioning and delivery of health services and that those services are effective and safe.

5. Recommendations

5.1 The Committee is requested to note the content of this report.

5.2 The Committee is requested to support the ongoing work as outlined in Appendix 1 and to agree a report on progress be submitted to the Committee at it's next meeting.

5.3 The Committee is also asked to note the decision of Medway's Health and Wellbeing Board to explore the scope for an integrated approach toward mental health with an away day or workshop planned which will involve all relevant partners.

Background papers:

None.

Appendices

Appendix 1 - Acute Mental Health Inpatient Bed Review Update from KMPT

Appendix 2 - Detailed bed usage data for June 2016

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Kent and Medway **NHS**
NHS and Social Care Partnership Trust

Kent & Medway NHS & Social Care Partnership Trust [KMPT]

Acute Mental Health Inpatient Bed Review Update

Report prepared for:

Medway Council
Health & Adult Social Care [HASC] Overview & Scrutiny Committee
23 August 2016

Version: 2.0

**Reporting
Officer:**

Helen Greatorex
Chief Executive, KMPT

Date: 12 July 2016

**Report Compiled
By:**

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1. Introduction

- 1.1 This report focuses on and provides an update on six key areas, namely:
- i. The creation of short term additional younger adult bed capacity.
 - ii. Younger adult bed usage including acute inpatient out of area placements and delayed transfers of care [DToCs].
 - iii. Section 136 assessments¹ and the joint working with the Police and South East Coast Ambulance Service NHS Foundation Trust [SECamb].
 - iv. Single point of access [SPoA].
 - v. Liaison psychiatry (Medway).
 - vi. Closer working with social workers.
- 1.2 The Committee is asked to note the content of the report.

2. The creation of short term additional younger adult bed capacity

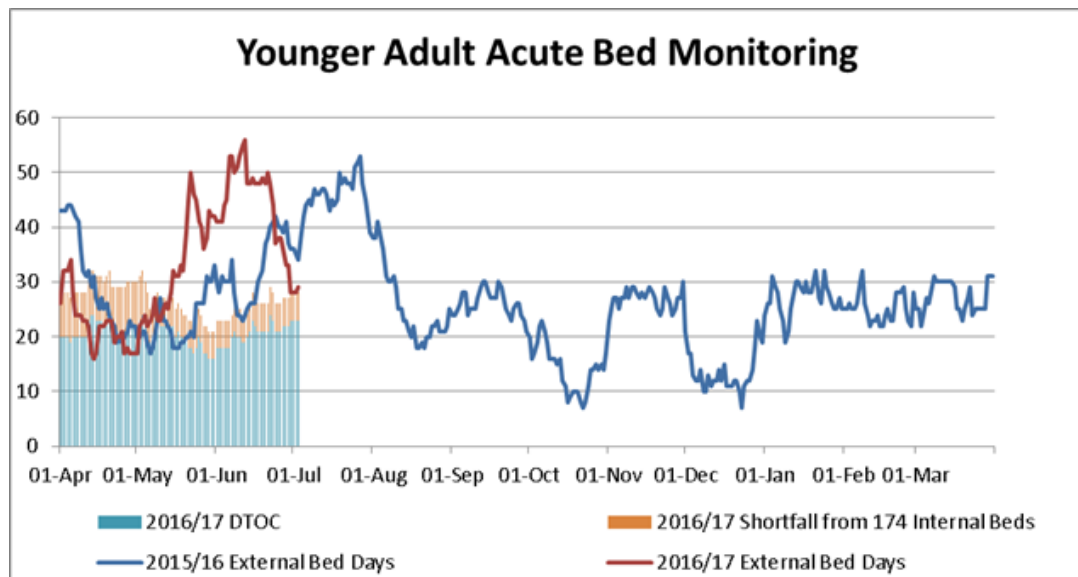
- 2.1 In June 2016 the Trust reported a programme of essential capital works and intensive recruitment is underway to create additional younger adult bed capacity – Pinewood, a 16 bedded ward based at Little Brook Hospital, Dartford.
- 2.2 The programme of capital works has been extended to further reduce the ligature points on the ward; this is scheduled to complete at the end of July 2016.
- 2.3 An intensive recruitment campaign is currently ongoing; substantively staffing the unit to therapeutic staffing levels remains the biggest risk to the project.
- 2.4 The unit is expected to open in early autumn 2016.

3. Younger adult bed usage including acute inpatient out of area placements and delayed transfers of care [DToCs]²

- 3.1 The figure below provides a summary of the current use of external beds year to date.

¹(1983) Mental Health Act [MHA]

² Delayed transfers of care [DToCs] are those service users who no longer require acute inpatient care and are deemed fit for discharge from a Trust bed. These service users require other health or social interventions and continue to have a significant impact on the use of external beds.



3.2 The Trust remains focussed on reducing out of area bed usage. To support this twice weekly structured and detailed planning telephone calls continue to take place with representatives from Medway and other clinical commissioning groups [CCGs], social care and the Trust's acute and community recovery service lines. These calls review all service users who no longer need acute care (DToCs) and identify where blockages are in the system. The outputs include discharge plans agreed by providers and commissioners to help move these service users on to an environment more suitable to meet their needs thereby ensuring all service users receive the right treatment at the right time and in the right place.

3.3 As at 12 July 2016, there are 24 DToCs across the Trust, of these 3 are service users open to the Medway teams. Two are awaiting public funding for a more suitable placement, the second is awaiting the completion of assessment. The Trust continues to work with partner agencies to ensure both service users are placed in accommodation more suitable to their needs as soon as possible.

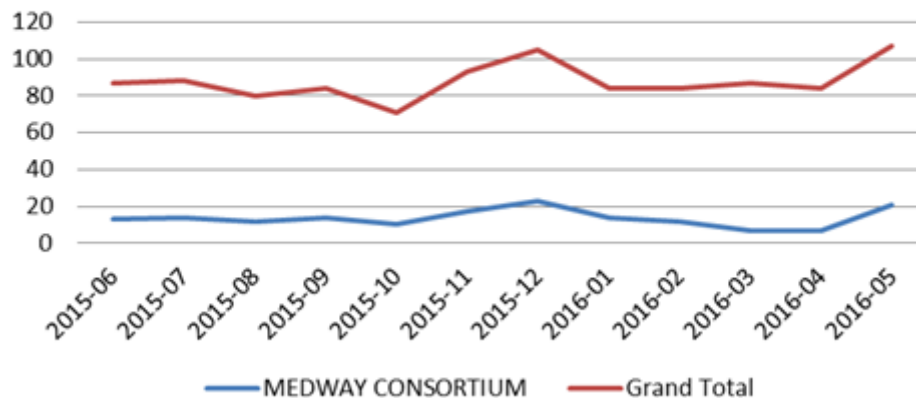
3.4 Appendix A provides the detailed bed usage data for May and June 2016.

4. Section 136 assessments and the joint working with the Police

4.1 In the twelve month period June 2015 to May 2016³ a total of 164 section 136 assessments were undertaken for people presenting from the Medway Consortia locality. This represents 16% of all section 136 assessments undertaken in Medway and Kent in period. The table below provides a summary of these presentations by month.

³ At the time of writing, the June 2016 date was still be validated.

Number of S136 assessments per month



- 4.2 Of the 164 detentions by the Police, 16 (10%) resulted in an admission under section, 19 (11%) resulted in an informal admission and 129 (79%) were not admitted. The table below provides a summary of the outcome of these presentations.

Outcome of Presentation	Number
Admitted under section	16
Admitted informally	19
Not admitted	129
Total	164

- 4.3 The Trust continues to work closely with its commissioners and Kent Police to ensure those who present in a mental health crisis have access to appropriate and timely support. The mental health street triage service has been provided to the Medway locality since December 2015 and operates Thursday to Saturday 18.00 to 02.00 hours and is part of the pan-county service based out of the Kent Police control room. The service was initially agreed as a 6 month pilot which came to an end in June 2016 but has continued following commitment by all CCGs and NHS England to ongoing investment.
- 4.4 The pilot has been evaluated and although the demand for section 136 assessments remains high there is evidence that the service demonstrates an avoidance of section 136 and also supports police officers dealing with those presenting in mental health crises. In the 6 month period there have been 312 referrals to the mental health street triage service. Most of the referrals were resolved by the senior clinical support worker within the Police Force Control room. 85 referrals (29%) received a face to face triage assessment.
- 4.5 Medway residents have consistently accessed the mental health street triage service more than any other area of Medway and Kent with 24% of total referrals and 34% of triage assessments undertaken.

			Street triage referrals (night service)						
			Dec-15	Jan-16	Feb-16	Mar-16	Apr-16	May-16	Total
Total referrals (all CCGs)			27	48	56	61	61	59	312
Total section 136 avoided			7	4	19	12	12	8	62
Medway referrals		CCG	7	10	18	17	14	8	74
Total Assessments undertaken across all CCGS		Triage	12	11	24	18	13	12	90
Medway CCG Assessments undertaken		Triage	5	2	12	6	4	3	32

- 4.6 Alcohol / drug intoxication is a significant factor in the presentation of crises and is known to be a significant factor in section 136 assessments and is particularly prevalent in Medway. The education and training of officers in the risk associated with mental health and intoxication in order to reduce numbers detained due to intoxication has been highlighted through the concordat steering group and work is underway with the substance misuse services commissioner to take forward this piece of work.
- 4.7 Substantive recruitment of the mental health street triage service is now underway and the service will continue to run three nights a week out of the Kent Police control room as well as extending to the SECamb emergency operations centre in order to avoid unnecessary conveyance to the accident and emergency [A&E] department. There has is also additional funding from NHS England which is being used for a senior nurse / team leader to work during the week as an extension of the criminal justice liaison and diversion [CJLD] service. This role will undertake both the street triage nurse role and provide leadership, supervision and support to the service.
- 4.8 Work with partner organisations continues through the crisis concordat steering group which has a great emphasis on reducing the use of section 136. A monthly joint section 136 monitoring group is being established as a sub group of the steering group and is chaired by the Trust's acute service line director with the aim of monitoring an action plan developed to reduce the numbers of section 136 and ensure close working across all partner agencies. Due to the high numbers of section 136 assessments a deep dive has been undertaken between Kent Police and the Trust into 130 section 136 assessments - this is due to be presented at the concordat steering group and will hope to provide valuable information on actions to be taken to reduce the numbers.

5. Single Point of Access [SPoA]

- 5.1 The SPoA has continued to embed and develop since the urgent and emergency pathway launch on 4 April 2016. Developments include:

Appendix 1

- ✓ The Canterbury hub, which is due to expand to accommodate the SPoA team as the Trust continues to recruit and move forward towards offering other referral pathways.
- ✓ The Maidstone hub, which is into its planning phase with a base being identified and the recruitment process underway for the team. One SPoA number will be maintained as the additional hub will help support local linkage and knowledge.

5.2 Since the launch SPoA has taken 10,120 calls through the call handling system and opened 3,075 referrals to the trust of which Medway CCG is the second highest. The table below provides a summary of Medway's referrals:

SPoA Medway Referrals					
	Apr-16	May-16	Jun-16	Jul-16	Total
Medway Consortium	179	172	155	95	541
Total	1,137	894	862	182	3,075

- 5.3 The SPoA's average daily call rate has increased to 155 per day with a 40 per day email average. The busiest days are now Monday, Thursday and Friday with 11.00-14.00 hours being the highest peak time for calls.
- 5.4 SPoA is starting a pilot in the East of the Trust to support A&E staff in non-commissioned liaison psychiatry periods. If this is beneficial for the patient journey then this service has the potential to expand. Fortunately, Medway Maritime Hospital benefits from a 24/7 liaison psychiatry service.
- 5.5 The routine referral pilot is due to start shortly and once established will be rolled out in other CCG areas.
- 5.6 The SPoA is continuing to work on the internal and external interface issues to smooth the service user pathway and provide help in times of crisis.

6. Liaison Psychiatry (Medway)

- 6.1 The Trust provides a 24/7 liaison psychiatry service to Medway NHS Foundation Trust [MFT] with a 2:2:1 staffing ratio. The team consists of both an operational and a clinical band 7 team manager, 8.0 whole time equivalent [wte] band 6 practitioners (there are currently 1.4 wte vacancies), 1 wte consultant psychiatrist and 1 wte band 3 administrator. The service is supported by a Trustwide service manager, matron and clinical lead.
- 6.2 The liaison psychiatry service receives urgent referrals from the A&E department with a response time of two hours as well as routine referrals from the inpatient wards with a response time of two working days.
- 6.3 On average the Medway liaison psychiatry service receives 158 urgent referrals per month with 70% being seen within the two hour target. Those not seen within this timeframe are usually delayed due to the demand out of hours when there is only one member of staff. This then causes further delay the following morning which in turn affects the response to the inpatient wards.

Appendix 1

6.4 This number of referrals is significantly higher than any other liaison psychiatry service across Medway and Kent.

7. Closer Working (Social Workers)

7.1 As previously reported, meetings have taken place between senior managers from the Trust and Medway Council to drive closer working relationships. The latest aspect of this work is senior Medway Council officers being hosted by the Trust in Maidstone.

7.2 Working relationships on the ground, between community psychiatric nurses [CPNs] and social workers, remain good.

8. Conclusion and Recommendation

8.1 The Medway HASC Overview and Scrutiny Committee is requested to note the content of this report.

8.2 The Medway HASC Overview and Scrutiny Committee is requested to support the ongoing work as outlined above with a recommendation that a report on progress be submitted to the Medway HASC Overview and Scrutiny Committee at a future meeting, as defined by the Committee.

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Younger Adult Acute Bed Usage

June 2016 Update

Contents

Summary of bed usage by day for most recent month

Graph 1. Medway CCG External Bed Usage April 2014 to Date

Graph 2. KMPT External Bed Usage April 2014 To Date

Appendix 1. Available Bed Capacity by day for most recent month

Notes

Notes

- The current bed capacity for KMPT is 169 - this is the position at the end of the month, although actual beds available can vary on a daily basis. The data submitted to the HASC reports a snapshot of beds occupied (as at midnight each day). Reasons for beds showing as available on the HASC report, when they can in fact not be used, include (see appendix 1):

- Maintenance of bed stock e.g. a room has been damaged and needs to be fixed.

- Managerially led decisions based on specific circumstances e.g. management of infection control, such as a D&V outbreak.

- Time gap in the data set between the discharge of one service user and the admission of another i.e. a bed may be vacant for a short time frame over midnight, whilst one service user is discharged and another takes up occupancy.

- Service users on leave / AWOL

In addition, KMPT has a rolling programme of maintenance to upgrade current accommodation, this is to improve the overall quality and patient experience of inpatient facilities, and may have an impact on the actual beds available daily.

- KMPT has a plan to increase total bed availability to 174 beds, with a 95% optimal operating capacity of 165 (to ensure safety and quality standards meet national guidance). This target should be reached by early summer 2015. KMPT has awarded a contract to a supplier to develop additional capacity to meet commissioner intentions to increase inpatient bed capacity.

- KMPT will always use local beds wherever possible, and when appropriate to individual need. On occasions an external bed placement may be required despite a KMPT bed being available, this decision will be based on how the clinical needs of the patient are best met and a longer term view of the most effective use of beds.

- There are minimal known data quality issues and where identified, these are flagged to the relevant service manager to ensure prompt resolution e.g. where a closed bed hasn't been updated on RiO.

Appendix 2

Medway CCG Use of Younger Adult Acute Beds by Day

Ward	Current Capacity	Location	01/05/2016		02/05/2016		03/05/2016		04/05/2016		05/05/2016		06/05/2016		07/05/2016	
			Med	Oth	Med	Oth	Med	Oth	Med	Oth	Med	Oth	Med	Oth	Med	Oth
Emerald		Closed	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Cherrywood	17	Dartford	8	8	8	8	8	8	8	8	8	8	9	5	10	6
Amberwood	17	Dartford	7	7	7	7	6	7	5	7	6	8	6	8	6	8
Woodlands	12	Dartford	1	8	1	8	1	7	1	6	1	4	3	4	3	4
Boughton Ward	18	Maidstone	0	18	0	18	0	18	0	17	0	17	0	18	0	18
Chartwell Ward	18	Maidstone	1	17	1	17	1	15	0	16	0	16	0	15	0	17
Upnor	18	Maidstone	7	11	7	11	7	11	7	10	8	9	8	10	8	10
Bluebell	18	Canterbury	1	17	1	17	1	17	0	17	0	18	0	17	0	18
Samphire	15	Canterbury	0	15	0	15	0	15	0	15	0	15	0	15	0	15
Fern Ward	18	Canterbury	0	18	0	18	0	18	0	18	0	17	0	18	0	18
Foxglove Ward	18	Canterbury	0	18	0	18	0	17	0	17	0	18	0	18	0	18
Sub Total	169		25	137	25	137	24	133	21	131	23	130	26	128	27	132

Total KMPT beds used (Medway + Other)	162	162	157	152	153	154	159
Total KMPT beds not used	4	4	9	14	13	14	9
Actual Beds Available	166	166	166	166	166	168	168

External to KMPT (see notes below)	4	18	4	19	3	21	4	20	3	19	2	19	2	20
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KMPT + external beds used by group	29	155	29	156	27	154	25	151	26	149	28	147	29	152
Total beds used (KMPT + external)	184	185	181	176	175	175	181							

Appendix 2

Medway CCG Use of Younger Adult Acute Beds by Day

Ward	Current Capacity	Location	08/05/2016		09/05/2016		10/05/2016		11/05/2016		12/05/2016		13/05/2016		14/05/2016	
			Med	Oth	Med	Oth	Med	Oth	Med	Oth	Med	Oth	Med	Oth	Med	Oth
Emerald		Closed	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Cherrywood	17	Dartford	10	6	10	5	10	5	11	5	11	5	12	5	12	5
Amberwood	17	Dartford	6	10	5	10	5	11	5	11	6	11	6	9	7	9
Woodlands	12	Dartford	3	4	3	4	3	5	3	5	3	5	2	5	2	5
Boughton Ward	18	Maidstone	0	18	0	18	0	17	0	18	0	18	0	18	0	18
Chartwell Ward	18	Maidstone	0	18	0	18	0	18	0	18	0	18	0	18	0	18
Upnor	18	Maidstone	8	10	8	10	8	10	8	10	8	10	6	10	8	10
Bluebell	18	Canterbury	0	18	0	18	0	17	0	18	0	18	0	18	0	18
Samphire	15	Canterbury	0	15	0	15	0	15	0	15	0	15	0	14	0	15
Fern Ward	18	Canterbury	0	18	0	18	0	18	0	17	0	18	0	17	0	18
Foxglove Ward	18	Canterbury	0	18	0	18	0	18	0	18	0	18	0	18	0	18
Sub Total	169		27	135	26	134	26	134	27	135	28	136	26	132	29	134

Total KMPT beds used (Medway + Other)	162	160	160	162	164	158	163
Total KMPT beds not used	6	8	9	7	5	11	6
Actual Beds Available	168	168	169	169	169	169	169

External to KMPT (see notes below)	2	23	0	22	0	22	0	24	0	25	0	24	2	25
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KMPT + external beds used by group	29	158	26	156	26	156	27	159	28	161	26	156	31	159
Total beds used (KMPT + external)	187	182	182	186	189	182	190							

Appendix 2

Medway CCG Use of Younger Adult Acute Beds by Day

Ward	Current Capacity	Location	15/05/2016		16/05/2016		17/05/2016		18/05/2016		19/05/2016		20/05/2016		21/05/2016	
			Med	Oth	Med	Oth	Med	Oth	Med	Oth	Med	Oth	Med	Oth	Med	Oth
Emerald		Closed	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Cherrywood	17	Dartford	12	5	12	5	11	5	12	5	11	6	10	6	10	7
Amberwood	17	Dartford	7	9	7	9	7	10	6	10	8	9	8	8	9	8
Woodlands	12	Dartford	2	5	2	5	2	5	3	3	3	4	4	4	4	4
Boughton Ward	18	Maidstone	0	18	0	18	0	18	0	18	0	18	0	17	0	18
Chartwell Ward	18	Maidstone	0	18	1	17	1	17	1	17	1	17	1	16	1	16
Upnor	18	Maidstone	8	10	7	10	8	10	8	10	8	10	8	10	8	10
Bluebell	18	Canterbury	0	18	0	18	0	18	0	18	0	18	0	18	0	18
Samphire	15	Canterbury	0	15	0	15	0	15	0	15	0	14	0	14	0	15
Fern Ward	18	Canterbury	0	18	0	18	0	18	0	18	0	18	0	18	0	18
Foxglove Ward	18	Canterbury	0	18	0	18	0	18	0	18	0	18	0	18	0	18
Sub Total	169		29	134	29	133	29	134	30	132	31	132	31	129	32	132

Total KMPT beds used (Medway + Other)	163	162	163	162	163	160	164
Total KMPT beds not used	6	7	6	7	6	9	5
Actual Beds Available	169	169	169	169	169	169	169

External to KMPT (see notes below)	3	28	3	26	3	25	3	27	3	25	4	29	5	33
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KMPT + external beds used by group	32	162	32	159	32	159	33	159	34	157	35	158	37	165
Total beds used (KMPT + external)	194	191	191	192	191	193	202							

Appendix 2

Medway CCG Use of Younger Adult Acute Beds by Day

Ward	Current Capacity	Location	22/05/2016		23/05/2016		24/05/2016		25/05/2016		26/05/2016		27/05/2016		28/05/2016	
			Med	Oth	Med	Oth	Med	Oth	Med	Oth	Med	Oth	Med	Oth	Med	Oth
Emerald		Closed	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Cherrywood	17	Dartford	10	7	9	7	9	7	9	7	9	7	7	6	8	8
Amberwood	17	Dartford	9	8	8	8	8	9	6	11	6	11	6	9	6	10
Woodlands	12	Dartford	4	5	4	5	3	6	5	3	4	5	4	6	5	6
Boughton Ward	18	Maidstone	0	18	0	18	0	16	0	17	0	18	0	17	0	18
Chartwell Ward	18	Maidstone	1	17	1	15	1	17	1	17	0	15	0	17	0	18
Upnor	18	Maidstone	8	10	8	10	8	10	8	10	7	10	8	10	8	10
Bluebell	18	Canterbury	0	18	0	18	0	18	0	17	0	18	0	18	0	17
Samphire	15	Canterbury	0	15	0	15	0	15	0	15	0	15	0	15	0	15
Fern Ward	18	Canterbury	0	18	0	18	0	18	0	18	0	18	0	18	0	18
Foxglove Ward	18	Canterbury	0	18	0	18	0	18	0	18	0	18	0	18	0	18
Sub Total	169		32	134	30	132	29	134	29	133	26	135	25	134	27	138

Total KMPT beds used (Medway + Other)	166	162	163	162	161	159	165
Total KMPT beds not used	3	7	6	7	8	10	4
Actual Beds Available	169	169	169	169	169	169	169

External to KMPT (see notes below)	6	39	7	38	7	37	7	33	7	32	6	28	7	29
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KMPT + external beds used by group	38	173	37	170	36	171	36	166	33	167	31	162	34	167
Total beds used (KMPT + external)	211	207	207	202	200	193	201							

Appendix 2

Medway CCG Use of Younger Adult Acute Beds by Day

Ward	Current Capacity	Location	29/05/2016		30/05/2016		31/05/2016		01/06/2016		02/06/2016		03/06/2016		04/06/2016	
			Med	Oth	Med	Oth	Med	Oth	Med	Oth	Med	Oth	Med	Oth	Med	Oth
Emerald		Closed	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Cherrywood	17	Dartford	7	9	7	9	7	9	7	9	7	9	6	10	6	10
Amberwood	17	Dartford	7	10	7	10	7	10	7	10	7	10	7	10	7	10
Woodlands	12	Dartford	5	7	5	7	4	7	5	7	5	8	4	8	4	8
Boughton Ward	18	Maidstone	0	18	0	18	0	18	0	18	0	18	0	18	0	18
Chartwell Ward	18	Maidstone	0	18	0	18	0	18	0	18	0	18	0	17	0	18
Upnor	18	Maidstone	8	10	8	10	8	9	9	9	9	9	9	9	9	9
Bluebell	18	Canterbury	0	17	0	18	0	17	0	18	0	18	0	18	0	18
Samphire	15	Canterbury	0	15	0	15	0	15	0	14	0	14	0	15	0	14
Fern Ward	18	Canterbury	0	18	0	18	0	17	0	17	0	17	0	18	0	18
Foxglove Ward	18	Canterbury	0	18	0	18	0	18	0	18	0	18	0	18	0	18
Sub Total	169		27	140	27	141	26	138	28	138	28	139	26	141	26	141

Total KMPT beds used (Medway + Other)	167	168	164	166	167	167	167
Total KMPT beds not used	2	1	5	3	2	2	2
Actual Beds Available	169	169	169	169	169	169	169

External to KMPT (see notes below)	8	33	8	33	7	32	6	32	6	32	5	36	6	38
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KMPT + external beds used by group	35	173	35	174	33	170	34	170	34	171	31	177	32	179
Total beds used (KMPT + external)	208	209	203	204	205	208	211							

Appendix 2

Medway CCG Use of Younger Adult Acute Beds by Day

Ward	Current Capacity	Location	05/06/2016		06/06/2016		07/06/2016		08/06/2016		09/06/2016		10/06/2016		11/06/2016	
			Med	Oth	Med	Oth	Med	Oth	Med	Oth	Med	Oth	Med	Oth	Med	Oth
Emerald		Closed	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Cherrywood	17	Dartford	6	9	6	10	6	9	8	7	7	8	8	7	9	7
Amberwood	17	Dartford	7	10	7	10	6	10	5	12	5	12	5	12	4	12
Woodlands	12	Dartford	4	8	4	8	4	8	4	8	4	8	5	7	5	7
Boughton Ward	18	Maidstone	0	18	0	18	0	18	0	18	0	18	0	18	0	18
Chartwell Ward	18	Maidstone	0	18	0	18	0	18	0	18	0	18	0	18	0	18
Upnor	18	Maidstone	9	9	9	9	9	9	9	9	8	10	7	11	7	11
Bluebell	18	Canterbury	0	18	0	18	0	18	0	18	0	18	0	17	0	17
Samphire	15	Canterbury	0	15	0	15	0	14	0	14	0	15	0	15	0	15
Fern Ward	18	Canterbury	0	18	0	18	0	18	0	18	0	17	0	18	0	18
Foxglove Ward	18	Canterbury	0	18	0	18	0	19	0	19	0	19	0	18	0	18
Sub Total	169		26	141	26	142	25	141	26	141	24	143	25	141	25	141

Total KMPT beds used (Medway + Other)	167	168	166	167	167	166	166
Total KMPT beds not used	2	1	4	2	2	3	3
Actual Beds Available	169	169	170	169	169	169	169

External to KMPT (see notes below)	7	41	8	41	8	41	9	37	10	36	9	41	8	43
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KMPT + external beds used by group	33	182	34	183	33	182	35	178	34	179	34	182	33	184
Total beds used (KMPT + external)	215	217	215	213	213	216	217							

Appendix 2

Medway CCG Use of Younger Adult Acute Beds by Day

Ward	Current Capacity	Location	12/06/2016		13/06/2016		14/06/2016		15/06/2016		16/06/2016		17/06/2016		18/06/2016	
			Med	Oth	Med	Oth	Med	Oth	Med	Oth	Med	Oth	Med	Oth	Med	Oth
Emerald		Closed	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Cherrywood	17	Dartford	9	7	9	7	9	7	9	7	8	8	6	7	8	8
Amberwood	17	Dartford	4	13	4	12	3	12	3	13	4	13	4	13	4	13
Woodlands	12	Dartford	5	7	4	8	4	7	5	7	5	7	4	7	4	8
Boughton Ward	18	Maidstone	0	18	0	17	0	18	0	18	0	18	0	17	0	17
Chartwell Ward	18	Maidstone	0	18	0	17	0	18	0	17	0	18	0	17	0	18
Upnor	18	Maidstone	7	11	7	11	7	11	7	11	6	11	7	11	7	10
Bluebell	18	Canterbury	0	18	0	17	0	17	0	18	0	17	0	17	0	18
Samphire	15	Canterbury	0	15	0	15	0	15	0	15	0	15	0	15	0	15
Fern Ward	18	Canterbury	0	18	0	18	0	18	0	18	0	18	0	18	0	18
Foxglove Ward	18	Canterbury	0	18	0	18	0	18	0	18	0	18	0	18	0	18
Sub Total	169		25	143	24	140	23	141	24	142	23	143	21	140	23	143

Total KMPT beds used (Medway + Other)	168	164	164	166	166	161	166
Total KMPT beds not used	1	5	5	3	3	8	3
Actual Beds Available	169	169	169	169	169	169	169

External to KMPT (see notes below)	8	44	7	42	6	43	7	43	7	42	8	41	9	39
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KMPT + external beds used by group	33	187	31	182	29	184	31	185	30	185	29	181	32	182
Total beds used (KMPT + external)	220	213	213	216	215	210	214							

Appendix 2

Medway CCG Use of Younger Adult Acute Beds by Day

Ward	Current Capacity	Location	19/06/2016		20/06/2016		21/06/2016		22/06/2016		23/06/2016		24/06/2016		25/06/2016	
			Med	Oth	Med	Oth	Med	Oth	Med	Oth	Med	Oth	Med	Oth	Med	Oth
Emerald		Closed	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Cherrywood	17	Dartford	8	8	8	8	8	8	8	8	7	9	8	8	7	8
Amberwood	17	Dartford	4	13	4	11	4	10	5	11	5	12	5	10	7	10
Woodlands	12	Dartford	4	8	4	7	4	8	4	8	4	8	5	7	5	7
Boughton Ward	18	Maidstone	0	18	0	18	0	18	0	18	0	18	0	18	0	18
Chartwell Ward	18	Maidstone	0	18	0	18	0	18	0	17	0	18	0	18	0	17
Upnor	18	Maidstone	7	11	7	11	7	11	6	11	6	12	6	12	6	12
Bluebell	18	Canterbury	0	18	0	17	0	18	0	17	0	18	0	17	0	18
Samphire	15	Canterbury	0	15	0	15	0	15	0	15	0	16	0	15	0	15
Fern Ward	18	Canterbury	0	18	0	18	0	17	0	18	0	17	0	16	0	17
Foxglove Ward	18	Canterbury	0	18	0	18	0	18	0	18	0	18	0	17	0	18
Sub Total	169		23	145	23	141	23	141	23	141	22	146	24	138	25	140

Total KMPT beds used (Medway + Other)	168	164	164	164	168	162	165
Total KMPT beds not used	1	5	5	5	1	7	4
Actual Beds Available	169	169	169	169	169	169	169

External to KMPT (see notes below)	9	40	9	39	9	40	10	36	11	31	10	24	8	27
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KMPT + external beds used by group	32	185	32	180	32	181	33	177	33	177	34	162	33	167
Total beds used (KMPT + external)	217	212	213	210	210	196	200							

Medway CCG Use of Younger Adult Acute Beds by Day

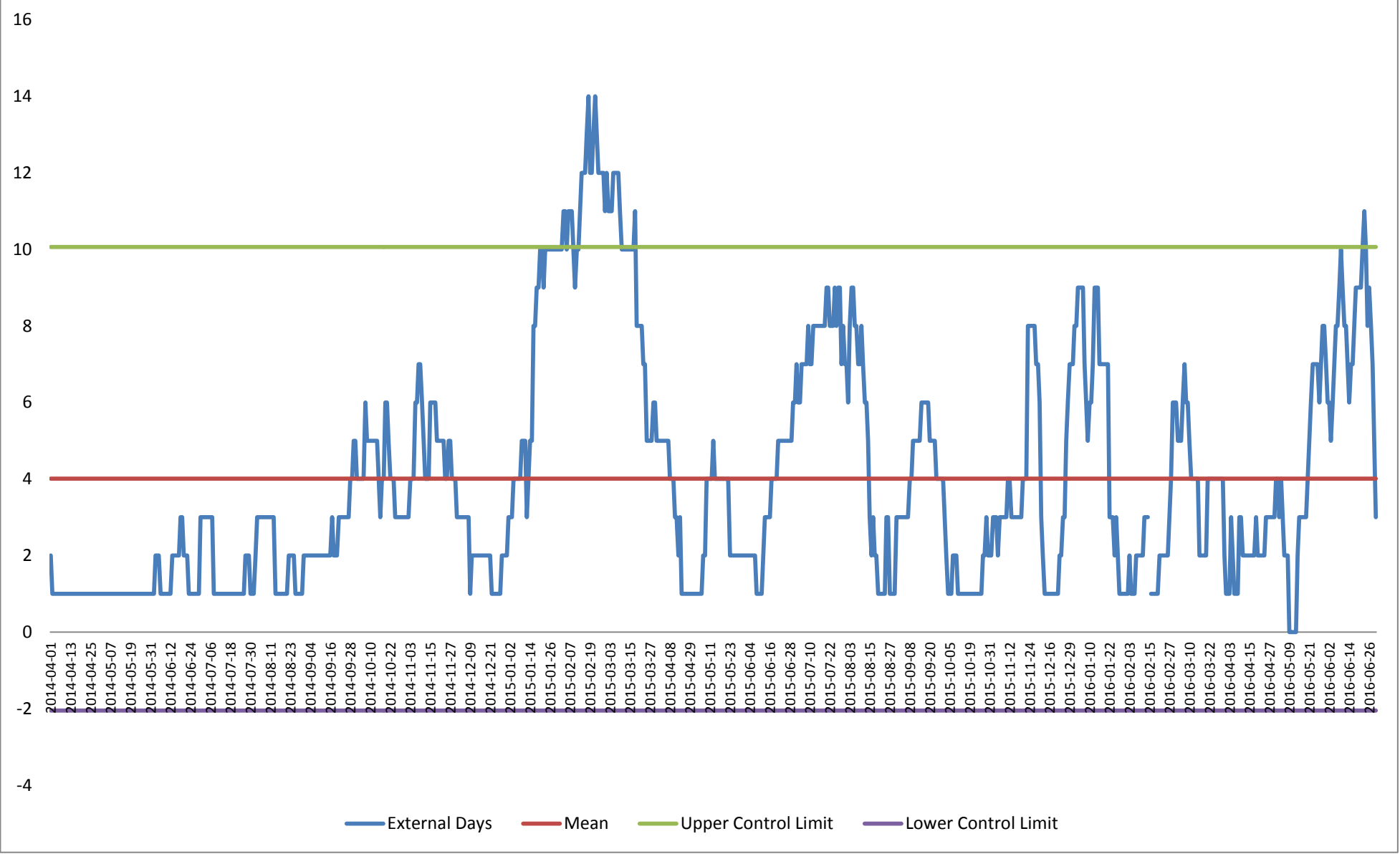
Ward	Current Capacity	Location	26/06/2016		27/06/2016		28/06/2016		29/06/2016		30/06/2016	
			Med	Oth	Med	Oth	Med	Oth	Med	Oth	Med	Oth
Emerald		Closed	0	0	0	0	0	0	0	0	0	0
Cherrywood	17	Dartford	7	9	7	9	6	9	6	8	7	9
Amberwood	17	Dartford	7	10	7	10	6	10	6	9	7	10
Woodlands	12	Dartford	5	7	5	7	5	6	4	7	5	7
Boughton Ward	18	Maidstone	0	18	0	18	0	18	0	18	0	18
Chartwell Ward	18	Maidstone	0	18	0	17	0	17	0	16	0	18
Upnor	18	Maidstone	6	12	5	11	6	11	7	10	7	11
Bluebell	18	Canterbury	0	18	0	16	0	15	0	15	0	17
Samphire	15	Canterbury	0	15	0	15	0	15	0	15	0	15
Fern Ward	18	Canterbury	0	18	0	18	0	17	0	18	0	18
Foxglove Ward	18	Canterbury	0	18	0	17	0	17	0	17	0	18
Sub Total	169		25	143	24	138	23	135	23	133	26	141

Total KMPT beds used (Medway + Other)	168	162	158	156	167
Total KMPT beds not used	1	7	11	13	2
Actual Beds Available	169	169	169	169	169

External to KMPT (see notes below)	9	27	8	28	7	26	5	28	3	25
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KMPT + external beds used by group	34	170	32	166	30	161	28	161	29	166
Total beds used (KMPT + external)	204	198	191	189	195					

Medway CCG YA Acute External Bed Usage April 2014 To June 2016



KMPT YA Acute External Bed Usage April 2014 To June 2016

