

Winter rehabilitation and reablement pilot in east Kent

HOSC briefing

Situation

As part of a national NHS England Frontrunners pilot, Kent Community Health NHS Foundation Trust (KCHFT) is looking to modernise its approach to delivering rehabilitation, recovery and reablement in its community hospitals in east and west Kent.

KCHFT intends to pilot a new integrated model for rehabilitation and recovery – with Kent County Council – during the winter in two of its community hospitals; Westbrook House, in Margate and in West View Integrated Care Centre in Tenterden.

This briefing paper provides an update for HOSC members ahead of the pilot, as we start a conversation with patients and carers, the public, staff and partners and test our early thinking around a potential new approach to rehabilitation and recovery.

Background

KCHFT's new [We care strategy](#) sets out four new ambitions for the next five years.

One of these priorities is to make sure our patients get a better experience, by delivering the right care, in the right place.

As part of this we want to improve how we deliver rehabilitation, recovery and reablement in our community hospitals so we can:

- improve outcomes and experience of our patients
- provide more rewarding and attractive careers for our colleagues
- deliver a more sustainable model for the future.

We know too often people end up in a hospital bed when they don't need to be – or stay there too long – which can impact their ability to regain their independence.

We also know there are large numbers of people who are not being cared for in the right place, because the right care or support in the community or in a care home is not available, or they need more complex packages of social care to allow them to live at home, requiring multiple organisations to work together.

Evidence shows people recover quicker and regain more of their independence when they take a more active role in their recovery, supported by their carers and family.

This will mean working differently so we can provide seven-day, evidence-based rehabilitation, where people play an active role in their recovery, and we focus on what matters to them.

By working differently to provide care that is more joined up with other health and care services, we hope to not only improve their experience and their outcomes, but provide a more efficient and sustainable service for the future.

Our ambition for rehabilitation, recovery and reablement

The ambition is to improve care by increasing therapy in community hospitals from five to seven-days-a week and deliver more joined-up services – with nursing, therapy, doctors, pharmacy, social care and voluntary sector partners working as one team.

We believe this approach will improve outcomes and enhance the experience of patients, carers and colleagues and provide a more sustainable model of the future.

This would mean people would:

- be cared for in centres of excellence for rehabilitation and recovery
- receive seven-day rehabilitation, with the support of family and carers, to meet the goals that matter to them
- be empowered to take a more active role in their rehabilitation so they are better able to cope when they return home
- get better faster and home sooner with the right support to continue their recovery.

Winter pilot in east Kent

We intend to pilot a new model for rehabilitation and recovery for six-months from November to April in Westbrook House, in Margate and in West View Integrated Care Centre in Tenterden, as both KCHFT and Kent County Council already deliver care from these centres.

During the pilot, we hope to mobilise up to 30 extra beds (15 per site) to pilot an integrated rehabilitation and reablement model. We usually open these extra beds in the winter to support system pressures so it is not a change to commissioned services. This year we plan to mobilise these beds as a joint venture between KCHFT and KCC to test a model of integrated care and evaluate whether this improves outcomes for people and increases independence.

We hope this will improve the flow through community and acute hospitals and get people home from hospital sooner.

The aim of the pilot is to:

- improve the outcome and experience of our patients, getting them home from hospital sooner
- develop more attractive career choices for staff, through more integrated working
- start to test a more sustainable model for the future.

The pilot will be informed by learning from our new stroke unit, which opened in Westbrook House, in July. Specialist rehabilitation, like caring for people who have had strokes or broken hips, is just one part of the care we are looking at, we also want to improve the care for older, frail people who need general rehabilitation, for example after a fall, and for sub-acute patients, who still need treatment after spending time in an acute hospital.

The intention is the pilot is funded by winter-funding and resourced through recruitment and more integrated ways of working by KCHFT, KCC and East Kent Hospitals University NHS Foundation, through the emerging provider collaborative.

What we have done already that will inform our pilot

We are already exploring new ways of working to help us improve rehabilitation and recovery.

Intermediate care frontrunner

We are a frontrunner for the NHS England Intermediate Care Pilot in east Kent, which aims to improve all the short-term services which support people when they are discharged from an acute hospital or sometimes intervenes to stop people going into hospital at all.

This includes services which support people to return home without any support, those who need a care package, those people who need our support in a community hospital, and those who need longer term care, for example in a care home.

Part of this work has seen KCHFT and Kent County Council start to recruit 25 **Home First support workers** in east Kent. These are joint support worker roles across health and social care and once in post, they will support people to return home with the aim of improving flow in our hospitals, getting people home faster and supporting recovery and independence. These are expected to start to be in post from November.

The Home First Team will deliver reablement, personal care and support nutrition, while also monitoring the person's condition. They will also contribute to an overall plan of care, which includes all members of the multi-disciplinary team, in their own home.

Provider collaborative

Colleagues from across KCHFT, Kent County Council and East Kent Hospitals University NHS Foundation Trust are working together to review intermediate care and we are exploring setting up a provider collaborative, pooling our resources to make these services and system work better.

This type of joint working with colleagues from other parts of the health system and from social care is something we are keen to explore further in the future and is something we would like to test with our pilot model this winter.

Setting up [provider collaboratives](#) is part of a national mandate from NHS England. Developing and formalising provider collaboratives is a culmination of a national policy focusing on meeting the current challenges through system working and exploring the potential of working at scale.

Building on learning from new stroke unit

In July, we opened a new stroke unit in Westbrook House, in Margate, offering round-the-clock rehabilitation.

At the new unit, patients are supported on their road to recovery and independence, with a daily programme of therapy tailored to their individual needs. This includes supporting people to improve their mobility and regain skills such as washing, dressing, eating meals and communicating, helping them to return home.

The KCHFT unit works closely with the acute stroke unit at Kent and Canterbury Hospital. People who no longer need to be in an acute hospital, but are not yet ready to go home, have a short period of specialist inpatient rehabilitation at Westbrook.

How we will involve people, patients and public

We have started our conversations to involve patients, carers and the local community to make sure we understand how community hospital rehabilitation can meet their needs. We are also engaging with colleagues about their own ideas for nurse and therapy-led care.

So far, we have:

- set up a communication and engagement group to include colleagues from Healthwatch and a patient representative to help up design a robust communication and engagement plan
- spoken to patients and carers to understand what matters to them and what they think about seven-day rehabilitation in our hospitals. They told us they would like their families and carers involved in supporting their rehabilitation more, especially at weekends, so they still get to spend quality time with them
- looked at our patient experience data to analyse themes from what people have told us over the past year to help inform our pilot
- launched a campaign to invite patients or carers who have experience in our hospitals to work with us and give us their feedback
- involved KCHFT's Patient Experience and Learning Council, as well as our patient participation partners and patient governors to help inform our engagement activities.

In September, as part of KCHFT's We Care conference the trust set out its early thinking to 240 staff, including those who deliver care, our partners and colleagues from voluntary and community sector. This included testing our thinking around a case for change.

Our learning from these pieces of work has started to inform our very early thinking about a case for change and our vision for the future.

We will continue to engage with people, patients and public over the coming months to inform our plans and develop our pilot.

Next steps

We will provide an update to HOSC in December on our progress with the pilot, along with our detailed plans on our we are involving people, patients and carers and members of the public. Our intention is the pilot – along with the learning from Westbrook House – will help to inform our case for change, which we expect to bring to HOSC in 2024.

More information can be found on our website at www.kentcht.nhs.uk/rehabandrecovery

Clare Thomas, Community Services Director, Kent Community Health NHS Foundation Trust

Louise Ward, Assistant Director of Community Hospitals, Kent Community Health NHS Foundation Trust