



Chailey Heritage Clinical Services
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Friday, 23 December 2011

Cllr Sven Rufus
Chairman HOSC
Brighton and Hove City Council
King's House
Grand Ave
Hove BN3 2LS

CC Giles Rossington, scrutiny officer

Dear Cllr Rufus

CLOSURE OF RESIDENTIAL BEDS AT CHIS

I am writing to advise you about a change we would like to make with regard to the Children's Head Injury Service (CHIS) based at Chailey Heritage Clinical Services.

CHIS offers residential and non-residential rehabilitation programmes to children and young people with head injury. However, the demand for the residential beds at CHIS has fallen markedly over recent years as I explain below. In the light of this, we would like to close the residential beds (six in total).

Before I explain in more detail the reasons for this step, I would like to emphasise that we remain committed to the rehabilitation programmes CHIS provides, and to the provision of services at Chailey Heritage Clinical Services as a whole.

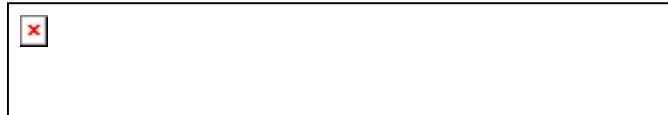
Our plan affects only the dedicated provision of residential beds for this client group. Rehabilitation programmes are still being provided by the CHIS team to non-residential clients in their local environments or on a daily basis to clients attending the centre. We now rarely receive referrals for the residential service, but if we do in the future we would hope to accommodate the referral safely and appropriately within another bedded unit on our site.

The reasons for the change

CHIS has been commissioned by organisations from all over the South of England and London, although the bulk of our income has historically come from PCTs within Sussex.

There has been a growing emphasis over recent years on providing care for patients closer to home, and a reduction in out-of-area placements. In all sorts of ways this is welcome, for example as seen in the development of our specialist outreach nursing team. But it has seen a marked fall in demand for the residential beds at CHIS. The focus on providing care closer to home has been reflected in a change in the ways PCTs commission the CHIS service from block funding to case-

Chairman Simon Turpitt Chief Executive Andy Painton
Trust Headquarters: Brighton General Hospital, Elm Grove, Brighton, BN2 3EW



by-case funding. This change, together with the decline in referrals, has resulted in a significant fall in income to support the beds.

Since the commissioning shift in 2009, we have continued to provide the residential beds to allow us to:

- Gain more certainty on our commissioners' intentions going forward.
- Properly determine demand in the light of referrals actually made.
- Explore different models of delivery.
- Explore alternative income streams.

However, it has now become clear that there is not (and will not be) a level of demand going forward to allow us to maintain the residential beds at CHIS. In July 2011 the beds were temporarily closed because the referral rate was so low. We now want to make this closure permanent, using other bedded units at Chailey Heritage Clinical Services to provide safe and effective residential care if and when this is required by CHIS clients. Non residential CHIS clients continue to be seen by the CHIS therapy and medical team.

How the closure proposal will affect staff

The service employs clinical, catering and housekeeping staff. Working together they provide a safe and caring environment in which they manage complex clinical presentations and support individuals to regain maximum functionality.

Our aim is to retain the specialist skills of the team for the benefit of the local health economy, and we can offer appropriate redeployment opportunities to all the specialist residential staff affected within Chailey Heritage Clinical Services. We have worked closely with our staff most directly affected, and their staffside representatives to manage the process.

Conclusion

As I have said, the closure of the CHIS beds is proposed for the simple reason that there is no longer sufficient demand for them. The national drive to care for patients closer to home has seen a marked fall in referrals to the residential service. This is reflected in a shift from block funding to case-by-case funding.

The skills of the specialist staff involved in the residential aspect of the service have been retained within the remaining existing services. The rehabilitation programmes will continue to be offered through a different service model.

I would like to restate our intention to continue to offer a range of safe, effective, quality healthcare services at Chailey Heritage clinical services generally including within our Head Injury Service.

Please feel free to contact me if you require any further information.

With best wishes.

Dr Donna Cowan BSc PhD MIPEM MIET
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