

UK: Bed shortages cause increasing reliance on emergency beds in NHS hospitals

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18 July 2019

Due to the rising demand for hospital beds in the UK, the National Health Service (NHS) has become more reliant on the use of temporary or emergency beds for patients.

“Escalation beds,” which are supposed to alleviate peaks in demand during the winter months, are being routinely deployed due to the lack of beds across all hospitals.

A study for the British Medical Association (BMA), based on Freedom of Information requests, discovered that on March 3, a total of 3,428 escalation beds were in use despite the easing of the winter spike. By May 1, at least 1,637 escalation beds were still being used—according to results provided by only 80 (a third) of the 240 NHS trusts in England.

The *Independent* article reporting the study noted that “Four out of five NHS hospitals are relying on emergency surgical beds to provide enough space for routine patients as they try to keep up with soaring demand. ...”

It added, “If a surgical bed is unavailable operations may have to be cancelled, this adds to already significant waiting lists which have seen waits for cancer treatment and routine operations grow ‘unacceptably.’”

NHS England chief Simon Stevens warned a few days previously that “We are now at a point where our hospital bed stock is overly pressurised, and in many parts of the country we are going to need—backed up by extra nurses—increased capacity, not decreased.” Stevens warned that this was “quite a significant gear shift” for the NHS.

Stevens put the year-round use of emergency beds in the context of the loss of almost 15,000 beds since 2010. But his figures are an underestimation.

In England, total bed capacity has been slashed from

160,254 in 2009 to 129,992 in 2019, according to official NHS England figures. Over the same period, available beds for mental illness and learning disability have been cut by a third, from 29,330 to 19,368.

Over the past 30 years, NHS bed capacity has been halved by Labour and Conservative governments. Bed occupancy rates have reached dangerous levels, jeopardising patient safety and efficiency as a result.

The average occupancy rate for general and acute beds (open overnight) runs above 90 percent, according to the latest figures. However, the “safe” and most efficient level is considered to be 85 percent.

Last month, Dr. Nick Scriven, the president of the Society for Acute Medicine, warned that “[t]he system is now so reliant on this ‘extra capacity’ that most hospitals cannot survive even minor changes in pressure that occur. Even just a weekend can throw some into chaos, with beds opening on a Sunday and taking until the Thursday to close on a never-ending cycle.”

This month Scriven stepped up his warnings to declare that a significant health disaster could rapidly overwhelm the NHS. He declared: “This is meant to be the time when services are least stretched and staff have an opportunity to draw breath but the numbers are staggering—more than 17,500 people needing emergency admission every day in June with a 5 percent increase in 12 months and the number of patients ‘stuck’ in acute beds is identical to this time last year (4,500).”

“These two mean the pressure remains relentless and people are suffering delays in getting care, notably the 12-hour breach number was 375 percent more this June compared to 2018.

“As we lurch from one period of pressure to another without any noticeable respite there is now an

incredibly serious worry on the horizon in Australian flu which could cause chaos in the UK.

“If the experience in Australia—75,000 cases up on the same period in 2018—is replicated then we would see a similar situation to the ‘bad’ winter of 2017 well before we move into winter proper.

“It would be unknown how the NHS would cope given that even in the middle of summer many of our hospitals still have a large proportion of so-called extra capacity in use.”

One example, reported in the local *BirminghamLive* website, was the Accident and Emergency department in Walsall’s Manor Hospital receiving 311 admissions on June 24, breaking the previous record within a 24-hour period by 18 patients. This is part of a trend of year-on-year increases, typically in April and May.

Manor Hospital Chief Executive Richard Beeken said there was a “greater number of referrals for admission than we have been able to cope with within our core bed base,” adding, “During April, May and June we have seen huge strain placed upon our urgent care services.”

The BMA is campaigning for a further 10,000 patient beds for the NHS.

This comes amid the release of results of the annual inpatient survey conducted by the Care Quality Commission (CQC). The results from 76,000 hospital patients surveyed in July 2018 are the worst in 10 years.

One in 10 said that they should have been admitted to hospital “a lot” sooner. Almost one in six “definitely” felt they had waited too long to get a bed on a ward after admission. Less than 60 percent of respondents said that they could get help from a member of staff in reasonable time, whilst only 37 percent of respondents answered affirmatively that they could find a member of staff to discuss their fears and worries.

Of the findings Dr. Scriven stated, “They show that despite the often heroic efforts of staff on the ground, the relentless pressures building in the system for years on end are starting to take a toll.”

Professor Ted Baker, the chief inspector of hospitals at the CQC, declared, “The mounting pressure on the system is having a direct impact on how people are experiencing inpatient care.”

The NHS is in the grip of a complete collapse, where all the resources are under incalculable levels of strain,

after the deliberate assaults by successive governments over the last decade. The 71-year-old public institution is being dismantled and sold off to private bidders, piece by piece.

The terrible impact of relentless attacks on the NHS is underscored in a recent report, “Ending the Blame Game,” by the Institute for Public Policy Research think tank. It found that reversals in public health initiatives led to fully 131,000 preventable deaths since 2012.

The reason the cuts have been able to proceed is due to the lack of any opposition from the Labour Party and its partners in the trade union bureaucracy.

Dame Donna Kinnair, chief executive of the Royal College of Nursing (RCN), praised the conniving RCN leadership after they rammed through a rotten sell-out pay deal in 2018 as “a credit to nursing and our organisation.”

Labour’s shadow health secretary, Jonathan Ashworth, offered token criticism, declaring, “The Tories and, in coalition, the Lib Dems, have run down the NHS and imposed the biggest funding squeeze in its history.” Yet, when the Tories unveiled their Long Term Plan, which sanctions further attacks on the NHS, he did not object to the principles that underlay it—that of further opening up the NHS to private investment through Integrated Provider Contracts (ICPs).

Labour and the unions cannot be relied on to defend the social right to free and universal public health care. For this, workers need a socialist perspective. NHS staff must act and organise *independently of the trade unions* and establish rank-and-file committees to unite with all other workers coming under ferocious attack. To move forward this struggle, we call on NHS workers to support the NHS Fightback campaign, established by the Socialist Equality Party.

For further information, visit the NHS FightBack Facebook page



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