

Potential site rationalisation: Summary and conclusions

Factor	Bolsover	Clay Cross	Newholme	Notes
Clinic attendances	2,300	22,600	12,500	
Day unit attendances	1,900	0	1,600	<<< potential to deliver more effective care - TBA
Gross Internal Area	4,486	3,068	5,507	<<< comparative scale of the sites
Current space for clinics	443	820	975	
Office space local teams	482	780	346	<<< used by teams working with communities
Office space corporate	282	100	1,340	<<< no need to be delivered from within the community
Access - public transport	limited	limited	limited	
Access - parking	good	fair	poor	
Flexibility to develop the site	fair	good	poor	
Cost to maintain the site	low	low	high	

Cost of servicing remaining activity (£k)	£748	£400	£610	<<< cost of running the site (excludes cost of providing care)
Ratio - attends per sq m	5.2	27.6	12.8	<<< rough comparison of how well the clinical space is used
Ratio - site cost per attendance	£325	£18	£49	<<< comparative cost of clinical use of the site
Space vacated / unutilised post proposed changes	2,052	702	1,397	<<< space vacated (not assuming any improved utilisation)
Utilisation of clinical space post proposed changes	26%	54%	50%	<<< not assuming any improved utilisation
Improved utilisation of clinical space post proposed changes	8%	27%	18%	<<< including improved utilisation

Propose to deliver care locally from lower cost site(s)	✓		✓	<<< work to vacate sites
Propose to continue to use and develop community hub services		✓		<<< develop the site

What the table shows...

Taking account of the proposed changes to Specialist OPMH, Dementia day units and community bedded care:

- Bolsover site would be used for only a small number of attendances (c.2,300) and have very low utilisation (8% of clinical space). It would therefore be very costly to run to deliver the residual levels of care (£325 per attendance excluding cost of care).
- Clay Cross site would be used for a high number of attendances (c.22,600) and have a higher utilisation (27% of clinical space). The site is also extensively used as a base for other local clinical service teams. It would provide a cost effective site (£18 per attendance excluding cost of care).

- Newholme site would be used for a significant number of attendances (c.12,500) but have a low utilisation (18% of clinical space). The site is used to provide corporate office space but which could be relocated elsewhere with no impact on patients. It would be a costly site to run (£49 per attendance excluding cost of care).

Conclusions

- **Propose to close sites at Bolsover and Newholme to save (c.£0.9m p.a. net of site re-provision costs) which can be reinvested in care provision i.e. get better value for money.**
- **Commit to continue to deliver those services locally within the community.**