

Factsheet 76

Intermediate care and reablement

May 2024

About this factsheet

This factsheet explains intermediate care, which also includes reablement. It describes its characteristics and the referral and assessment process for this short-term NHS and social care support that aims to help you:

avoid unnecessary admission to hospital

be as independent as possible after a hospital stay or illness

remain living at home if due to illness or disability, you are having increasing difficulty with daily activities

avoid moving permanently into a care home before you really need to.

This type of support is free for up to six weeks.

The information in this factsheet is correct for the period May 2024 to April 2025.

The information in this factsheet is applicable in England. If you are in Wales, Scotland or Northern Ireland, please contact Age Cymru, Age Scotland or Age NI for their advice on the rules in these countries. Contact details can be found at the back of this factsheet.

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1 What is intermediate care?

Intermediate care (IC) is non-means-tested, time-limited, *short-term* support. Staff can offer this if they believe that with specialist support, you have potential to improve and live more independently.

It is important to know that IC is *not* a period of free care that you are always entitled to following a hospital stay.

There is a particular type of IC with the aim of avoiding unnecessary hospital admission but in the main, it is a form of *active rehabilitation* to: help you become as independent as possible after a hospital stay, or help you to continue to live at home if you are having increasing difficulty with daily activities due to illness or disability, or prevent a premature, permanent move into residential care.

Based on your current health, abilities and wishes, you agree and work towards personal goals. You are supported by staff trained to observe, encourage and guide you, so you can do things yourself, rather than relying on them to intervene or carry out tasks for you.

Free, time-limited support

Support is time-limited and where appropriate, may involve moving from one of the four types of intermediate care to another. Section 2 of this factsheet describes each type.

IC normally lasts no longer than six weeks but can be as little as one or two weeks, if staff believe that is what you need to reach your goals. Staff are expected to be flexible with time frames, as in some cases, it may take a bit longer than six weeks to reach your goals.

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2 What types of support may be available?

There are four types of intermediate care but staff may use other terminology. Your needs and the range of local services available, which varies across the country, affect the type of IC you are offered.

Reablement – provides support in your own home to improve your confidence and ability to live as independently as possible. Your goals are likely to relate to daily living tasks such as getting washed and dressed, preparing a drink or light snack, moving safely around your home, or enabling you to participate in social activities.

Specially trained support staff will visit you, usually daily. Their focus is on observing, guiding and encouraging you to do things yourself, so you rebuild confidence and skills that you may have lost while unwell.

Home-based intermediate care – provides support in your own home,

3 When might intermediate care be appropriate?

Having considered if you could benefit from IC, the IC team should explain their findings and reasons for their decision to you and where appropriate, your family. If you are unhappy with their decision, you can seek clarification of the decision or request a second opinion.

If staff believe you could benefit, IC may be offered to help maximise your independence after an accident, hospital stay or illness, and be considered part of the process to identify your long-term support needs.

3.1 To support timely discharge from hospital

3.5 People living with dementia

If you are living with dementia, a prolonged stay in hospital can be traumatic, due to its noisy environment and separation from familiar people, places, and routines.

When considering if you could benefit from IC, staff should aim to involve professionals with experience of people living with dementia.

They can contribute to a risk assessment, clarify how dementia affects you, and judge how well you could cooperate and engage with the process. It is important to take into account whether you can understand, remember and follow instructions to improve your mobility or carry out daily living tasks, when considering if you would benefit.

4 Intermediate care and goal setting

Developing personal goals, agreeing support and time frames

Once staff agree you are able to engage with IC and have potential to live more independently - where possible continuing to live in your preferred place - they conduct a full assessment and work with you to develop personal goals.

They take account of what you can do and what you have difficulty with, as well as things that matter to you and would make a difference to your independence and quality of life.

You can involve your family or those significant to you, if you want to, or seek support from an advocate.

Goal setting and follow-up involves:

setting measurable and realistic goals. These may relate to improving your mobility, changing safely from a sitting to a standing position, or an advocate

Whether it is the NHS or local authority providing your intermediate care services, you should not be charged for the first six weeks, or if the agreed timescale is less than six weeks, for that period.

You should be provided with the details of who to contact if you have any questions or concerns about your care and support.

Before discharge from intermediate care, you should have a care and support assessment from the local authority social services department to find out if you need long term support.

5 Accessing intermediate care and reablement

If you, or a relative, are in one of the situations described in section 3 and believe you or they could benefit from IC, speak to the person responsible for your care or contact your local adult social services team.

If admitted to hospital, you may wish to discuss this type of support with staff responsible for your discharge, as early as possible.

Availability of the four types of IC varies across England and in many areas, demand can outstrip supply. There may be an overall lack of supply or waits of several days before starting reablement, home-based and bed-based intermediate care.

There may not be more than one option of where you can receive bed based intermediate care.

If you believe you or a family member have the potential to benefit from IC and it is not on offer, speak to the person responsible for your care. If after further discussion, you are unhappy with the support being offered, you could consider making a complaint.

Staff can tell you how to complain, who to complain to, and how to get independent practical support and advice to make your complaint.

For information see factsheet 66, *Resolving problems and making a complaint about NHS care* and factsheet 59, *How to resolve problems and making a complaint about social care*.

6 Relevant legislation and guidance

The following documents support information in this factsheet.

NICE guidance NG74 *Intermediate care including reablement* September 2017 Link includes 'information for the public' tab, explaining purpose of intermediate care.
www.nice.org.uk/guidance/ng74

Understanding intermediate care including reablement a quick guide for people using intermediate care services. 2018
www.nice.org.uk/about/nice-

Age UK

Age UK provides advice and information for people in later life through our Age UK Advice line, publications and online. Call Age UK Advice to find out whether there is a local Age UK near you, and to order free copies of our information guides and factsheets.

Age UK Advice

www.ageuk.org.uk

0800 169 65 65

Lines are open seven days a week from 8.00am to 7.00pm

In Wales contact

Age Cymru Advice

www.agecymru.org.uk

0300 303 44 98

In Northern Ireland contact

Age NI

www.ageni.org

0808 808 75 75

In Scotland contact

Age Scotland

www.agescotland.org.uk

0800 124 42 22

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