

RCEM Explains:



Hospital beds across the UK

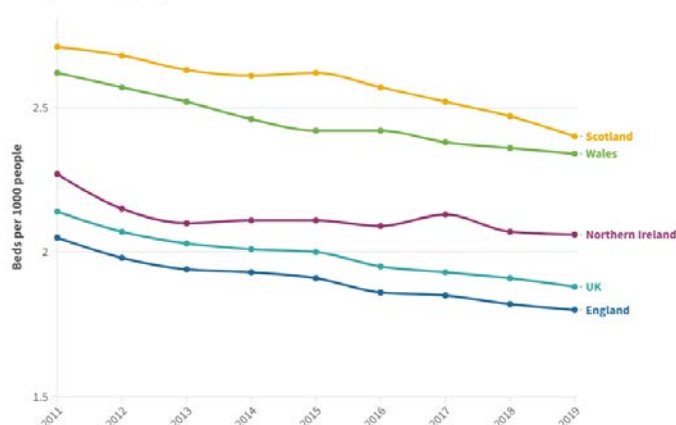
Hospitals across the UK are dangerously overcrowded and do not have the space, staff, or resources to provide safe and timely care for the number of patients who need it. Last year the Royal College of Emergency Medicine (RCEM) published a report examining [Beds in the NHS](#) and the impact of full hospitals on the provision of safe and timely care. This briefing outlines the developments in UK bed numbers since the report's publication and calls for an increase in the number of staffed hospital beds required to [#ResuscitateEmergencyCare](#) and improve patient safety.

Key Findings

- From 2011 to 2019, the UK experienced a loss of 11,980 acute beds. This includes 9000 in England, 1,500 in Scotland, 1,100 in Wales and 380 in Northern Ireland. The loss in hospital capacity has resulted in long wait times and dangerous overcrowding in Emergency Departments (EDs) across the UK.
- Compared to pre-pandemic levels, the number of general and acute (G&A) beds has risen in the UK by 1,678 (1.3%). Despite this small increase, occupancy levels have stayed high at well over 85% and demand is not meeting supply.
- Across the UK, an additional 9,728 beds are required to achieve optimum occupancy levels. This includes: 8,527 in England, 448 in Scotland, 582 in Wales, and 171 in Northern Ireland.

Context

Beds per 1000 people across the UK



Sources for population estimates: Eurostat; ONS and the World Bank.

The number of beds has fallen substantially across the UK in the last decade. Compared to OECD EU nations, the UK is the second least-bedded per-1000 population. This has been a deliberate policy decision due to advances in medical treatment, meaning patients don't have to stay in hospital as

long and a shift towards providing care outside of the hospital. The reduction of hospital beds has, in part, contributed to dangerous overcrowding in hospitals across the UK. At present, the percentage of patients waiting longer than four and 12 hours from their arrival is at a record high across the UK. This happens when there is a lack of patient flow – or movement of patients through the health and social care system – resulting in seriously unwell patients trapped in EDs. These patients are often left waiting for their care in inappropriate areas such as corridors and trolleys.

Optimum bed occupancy

Not having enough beds can lead to high bed occupancy levels. This is directly related to hospital performance and patient outcomes. Evidence suggests that hospitals tend to operate most effectively when their occupancy levels do not exceed 85%, allowing for extra capacity to handle sudden increases in demand. [A 2022 study of hospitals in NHS England found that higher occupancy equals higher mortality in hospitals.](#)

To drive improvement of patient flow and manage future demand, the NHS across all four UK nations needs substantial increases in its available bed stock. This briefing will assess whether the commitments made by Westminster and devolved governments to increase resources have resulted in the desired extra capacity within the NHS.

England

In September, NHS England committed to opening an additional 7,000 beds. As part of the Department for Health and Social Care's Delivery Plan for Recovering Urgent and Emergency Care Services, a commitment was made to increase capacity by 5,000 more staffed beds in 2023/24 compared to current levels. Since these commitments have been made, an extra 1,763 additional beds have been opened since September 2022 but of these additional beds, 1,615 have closed since January 2023.

More beds exist in the form of virtual wards. A Freedom of Information request revealed there were almost 1,300 more virtual beds in operation in February 2023 as there were in September 2022.

However, figures show that the additional beds, both physical and virtual, have done little to bring down bed occupancy, which remains staggeringly high. Hospital occupancy has remained above 94% for six consecutive months, leading to poor patient flow through hospitals and incredibly long waits in EDs and in ambulances. It is demonstrably clear that the NHS in England requires a significantly higher number of beds.

Scotland

The Scottish Government made a commitment in their NHS Recovery Plan to release 150 beds per day for NHS Scotland. Part of this is improving flow and getting patients out of hospital to free up beds currently in use. Occupancy of beds have been well above 85%. In the most recent quarter recorded ending September 2022, occupancy was on average 89% across all Scottish Health Boards.

Wales

In December 2022, the Welsh Government committed to opening 500 extra step-down beds designed for patients who are medically well after having surgery but not yet able to go straight home. There has not been a commitment to increase hospital beds and since this announcement, the number of acute beds has decreased by 59. Across 2022, the level of hospital occupancy was on average 93% and most recently was 95.5%. Pre to post covid, the number of beds in Wales has decreased by nearly 12% and occupancy has increased by 5%.

Northern Ireland

Due to the political deadlock in Northern Ireland, there have been no recent promises made to increase the number of hospital beds. As data released by Department of Health Northern Ireland combines multiple sub-specialities into the acute care statistics, bed occupancy levels do not provide a good measure of how full hospitals are. Northern Ireland consistently ranks lower than other UK nations in relation to the four-hour target and in December 2022, 18.6% of patients waited 12 hour or more from their time of arrival in EDs. Northern Ireland. The Medical Director of Belfast's Health Board [recently](#) commented on the sheer lack of capacity within their hospital to manage demand.

How many beds are currently needed?

RCEM analysis of the most recently available data shows how many additional beds would be required to drive occupancy to safe levels, and where those beds would be needed. To calculate

beds required for England, Scotland and Wales, we used the most recent set of data to calculate how many beds are needed to bring occupancy levels down to 85%. To estimate the required additional capacity for meaningful improvement, the number of hospital beds available in Northern Ireland during the 2020/21 period was compared to that of 2009/10, a year when the country performed better in terms of the four- and 12-hour metrics. As there has been a decrease of 171 beds from 2009/10 to 2020/21, this figure serves as a useful indicator.

The table below sets out how many beds are required across the UK nations.

Region/Nation	Available Beds	Beds Required
England	103,521	8,527
• South West	14,278	978
• South East	15,424	1,396
• London	10,940	1,173
• East of England	10,940	1,019
• North West	15,444	1,325
• Yorkshire & Humber	10,187	654
• North East	7,307	492
• West Midlands	11,059	1,045
• East Midlands	8,475	445
Scotland	13,610	448
Wales	6,461	582
Northern Ireland	4,084	171

Substantial regional variation exists, with occupancy ranging by almost four percent across England alone. This would need to be taken into account as part of any attempt to increase the NHS' bed stock.

Recommendations

RCEM's [#ResuscitateEmergencyCare Campaign](#) calls for long term plans to build additional capacity within the health and social care system so patients can receive safe and timely emergency care. UK Governments should:

- Increase the number of hospital beds by 9,728 across the UK. This will require substantial capital funding to support the construction of new hospitals.
- Allocate additional beds based on a local assessment of population needs.

How you can support us

Help us to raise this important matter in the UK Parliament, Northern Ireland Assembly, the Senedd and Scottish Parliament by tabling questions about the performance of the emergency care system, overcrowding, and occupancy at your local hospital. For questions or support, contact us at policy@rcem.ac.uk