BELLCARE
DOMICILIARY CARE SERVICES

FEEBRIS-ENABLED COMMUNITY MONITORING

Earlier insight.
Safer care at home.

Bellcare combines trusted domiciliary care with Feebris monitoring units to capture vital signs, recognise deterioration and share clearer information with health and care partners.

A COMMUNITY RESOURCE FOR Primary care • Acute services • Cumberland commissioners

One service. Shared benefits across the system.

For GPs

More useful information at the point of review

- Structured observations to support clinical assessment.
- Earlier escalation when a person's condition changes.
- Greater confidence when deciding the right next step.

For hospitals

Support flow beyond the hospital front door

- Additional oversight for suitable discharge pathways.
- Potential to avoid escalation through earlier action.
- Better continuity between hospital and home.

For local authority

Strengthen prevention and community capacity

- Enable proactive support for people with complex needs.
- Help people remain independent at home for longer.
- Generate service insight to inform pathway planning.

How Bellcare supports the pathway

1 Identify
Agree suitable people and escalation criteria with partners.

2 Monitor
Bellcare staff complete guided assessments using connected devices.

3 Recognise
Feebris helps surface risk and early signs of deterioration.

4 Escalate
Relevant findings support timely review by the appropriate service.

REAL-WORLD EVIDENCE FROM A 1,000-PATIENT NHS DEPLOYMENT

38%	25%	£500k
fewer A&E conveyances	fewer hospital admissions	estimated annual savings

Build a more connected community pathway.

Talk to Bellcare about referrals, supported discharge and proactive monitoring.

bellcare.co.uk
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Evidence: York Health Economics Consortium evaluation, commissioned by the NHS Innovation Accelerator and reported by Feebris (2023). Results relate to a specific deployment and may not generalise to every service.

Monitoring supports - and does not replace - clinical assessment, emergency response or professional judgement. Eligibility and escalation pathways must be locally agreed.