

Changing for Good



**The development of mental health services
2010 to 2015**

**Update to Haringey OSC
20 October 2010**

Introduction

- This is part of our ongoing discussions with a wide range of stakeholders on the future of our services
- Two 'Changing for Good' discussion papers produced outlining the need for changes – in October 2009 and March 2010
- Series of meetings held with service users, carers, NHS partners, local authorities, OSCs / HSPs and others over the last year
- These views have helped to shape the Trust's plans for the future
- This brief presentation aims to update HSP members, particularly in the light of the new NHS White Paper

Where are we now - 1

Trust has made a lot of progress recently:

- Achievement of 'Excellent' and 'Good' ratings from CQC for last two years
- Full Registration under new CQC Regulatory Framework
- Achieved financial targets for last two years
- Delivered very challenging cost improvement programme for last two years
- Appointed preferred partner for Enfield Community Services, due to transfer to MHT on 1 January 2011

Where are we now - 2

Despite considerable achievements, there is still a lot to do:

- Keep improving our services, to match rising expectations and increasing demand
- Maintain full CQC Registration
- Keep delivering on financial and cost improvement targets, within a very challenged local health economy
- Successfully manage the transfer of Enfield Community Services
- Move forward with our service development plans, in collaboration with all our key stakeholders
- Move forward with our plans to become an NHS Foundation Trust by October 2011

Recent developments

- New NHS White Paper signals significant changes in way NHS services are commissioned and planned, which impact on our plans
- New Government has signalled that NHS needs to continue to modernise and improve quality – with significantly reduced resources
- However, change process needs to be more bottom up, driven by patients, carers, local people, partners, NHS staff and, increasingly, GPs as commissioners
- New Government has set four tests for assessing plans for future service changes:
 - Support from GP commissioners
 - Strengthened public and patient engagement
 - Clear clinical evidence
 - Consistent with promoting patient choice

Implications for BEH-MHT

- The Trust's future strategy focuses on the promotion of more holistic services, the prevention of ill health and active recovery, delivered as close to service user's homes as possible
- In the future, the Trust will be delivering a broader range of services, in different ways, in different locations
 - Transfer of Enfield Community Services is a big step in developing our services, bringing together physical and mental health services
- There are a series of major changes planned, which have been discussed at high level over the last year, which we now need to start moving forward on
- We are clear, however, that this must be done in collaboration with service users, carers, our partners and our staff, if it is to be successful

Summary of our latest plans - 1

We have summarised our plans for the future into six key clinical service development areas:

- **Transfer and integration of Enfield Community Services**
 - Transfer of Enfield Community Services from NHS Enfield by early 2011
 - Integration of physical and mental health services, building on strong clinical synergies to develop more holistic services
- **Transforming Inpatient Care**
 - Reducing our use of inpatient mental health beds through developing further alternatives to inpatient care
 - Recovery Centres in each borough
 - Strengthening the Home Treatment Teams
 - Consolidation of our remaining inpatient facilities into fewer units to maximise clinical and cost effectiveness
- **Transforming Community Care and embedding services into Primary Care**
 - Developing services in primary care and providing more support to primary care
 - Focusing current generic CMHT case workers into specialist areas, to improve quality and efficiency

Summary of our latest plans - 2

- **Transforming Child and Adolescent Services**
 - Developing a range of community based alternatives to inpatient care – so there is no need to separate young people from their families
- **Transforming Dementia services**
 - Responding the National Dementia Strategy and the overall increase in numbers of older people
 - Expanding home treatment for people with dementia
 - Expanding memory treatment services
 - Supporting dementia care in acute hospitals
- **Transforming Forensic Services**
 - Changing the way Forensic patients are managed and developing more clinically effective alternatives
 - Maximising the focus on recovery, e.g. support for employment

Summary of our latest plans - 3

Our six key clinical service developments are supported by two key enablers:

- **Modernising our Estate**

- As more services are provided in or close to people's homes, our need for building and facilities will change
- We want to focus our resources on services, not maintaining lots of buildings
- We see the size of our estate reducing over time, with better usage and more sharing of space with other partners e.g. local authorities
- We want to improve the quality of our remaining estate, so it meets the expectations of service users and staff

- **Improving our Information Systems**

- Our current IT and information systems are poor and do not meet our needs
- We are currently reviewing what we need for the future and how best to improve our IT

Next Steps

- New Government has made it clear NHS planning needs to be more bottom up, with more engagement of patients, staff and other stakeholders
- We have already been doing a lot of this through our 'Changing for Good' programme, which is all about working with all our stakeholders to plan for the future
- Over the next few months we will be developing more specific proposals for changes to our services and sharing these widely