

**MENTAL HEALTH SUPPORT ASSOCIATION & HARINGEY MH
SERVICE USER NETWORK:
COMMENTS: – ‘THE NEW ST ANN’S CONSULTATION 2012’**

-12 July 2012

Below, for information to Haringey Council Overview and Scrutiny Committee, is the outline response from Haringey Service User Network and Mental Health Carers Support Association (MHSA) to the five questions presented by the Barnet Enfield and Haringey Mental Health Trust in its document: ‘The New St Ann’s Consultation 2012’.

Points re questions in consultation document:

Q1 The overall vision for St Ann’s – to create a modern integrated healthcare campus providing a wide range of mental and physical health services together with new housing public open space and other community structure

- a. This vision spelt out by the consultation document is very general and is not actually catered for in the information in the document provided for question 2.
- b. Vision should be to address health inequalities in that area of the borough – questions of mental ill health, morbidity, poverty, etc [These issues are all contained in the Haringey Strategic Plan]

Q2 Health Services at St Ann’s

1. This section could be renamed Health and Wellbeing services at St Ann’s to reflect a vision that is holistic.
2. All the services listed in the document, apart from a possible new renal care centre, are all based at St Ann’s at the moment. So the New St Ann’s would actually be the old St Ann’s, with perhaps one extra facility. Not ambitious enough.
3. Comments from the NCAT and Gateway reports, that looked at the original proposal to move the acute inpatient wards to Chase Farm, both talk about the redevelopment of the St Ann’s site as providing the opportunity for creating new integrated top quality health facilities. Any such vision is missing from the consultation document.
4. Facilities should support and enhance on-going recovery of mental health service users. This may include a dedicated wellbeing centre which may group together some/all of the following: service user, carer and IMHA/advocacy space, rehabilitation team
5. Out-reach Social Services care team-providing on site access to initiate and follow through housing needs and immediate benefit issues. This would enhance patient discharge and decrease the likelihood of relapse. Could the LBH Apex Offices move to the St Ann’s site?

**MENTAL HEALTH SUPPORT ASSOCIATION & HARINGEY MH
SERVICE USER NETWORK:**

COMMENTS: – ‘THE NEW ST ANN’S CONSULTATION 2012’

-12 July 2012

6. An opportunity for the Clinical Commission Group to commission work on improving Physical and Mental Health of those living in the East of the borough –especially men who are disproportionately poorly engaged and have higher mortality rates.
7. Gym facilities -which may be used towards fighting obesity in the wider community (specific for BMI >25) and generally increasing activity. Specific times for psychiatric inpatients (as part of an O.T. programme), outpatients (via exercise prescription and referral from rehab/wellbeing team) and perhaps those living in the new housing area at a reasonable cost “out of hours”.
8. Other facilities could include a dietician on site; Smoking cessation clinic; Sexual health and family planning clinic; Possibly a more east centred diabetic clinic
9. Community workshops, allotments, and such facilities could be used by both the service users and the general public.
10. Inpatient facilities could include not only the four wards currently at St Ann’s - one male acute, one female acute. one assessment ward and one eating disorders unit - but serious consideration should be given to relocation of an older persons ward from Chase Farm to allow facilities to be conveniently based within the borough; to creating a new Psychiatric Intensive Care Unit (PICU) currently located in Edgware community hospital; to creating a new unit for the 18-25 year olds who find the adult wards disturbing and difficult to be on.

Q3 Other Possible Uses for St Ann’s – listed in the consultation document are housing, public spaces, retail units, community and cultural facilities.

- a. Question surrounding ratio of space for housing versus space for medical facilities is the primary issue. On the consultation map the ratio of health to housing is around 1 to 3. There is no flexibility in the space for the health facilities. To provide that flexibility for future needs and to accommodate some of the services suggested in points to question 2 the ratio may need to be adjusted to 1:1.
- b. Housing area should be designated for supported housing, key workers and social and affordable housing.
- c. Practical issues involving housing include:
 - (i) Vehicle access for: hospital -enlarged main entrance ensuring good ambulance access (as opposed to the small one on plan) with equal sized exits. A separate pedestrian access point would be useful.
 - (ii) Vehicle access for: residential area- definite need for at least 2 both way entrance/exits.

**MENTAL HEALTH SUPPORT ASSOCIATION & HARINGEY MH
SERVICE USER NETWORK:**

COMMENTS: – ‘THE NEW ST ANN’S CONSULTATION 2012’

-12 July 2012

- (iii) Service provision for new population e.g. schools (already a big issue for primary schools in Haringey), health centre (doubtful whether The Laurels can cope with such a large increase in patients), local transport, new bus routes.
 - (iv) Parking space is already a large problem on the site and will need to be adequately addressed for the health and residential site. Even with increased bus links “out of hours” key staff will need parking space as will disabled patients, visitors and staff.
- d. Community facilities could include workshops and allotments (see points against question 2)

Q4 Design and Architecture of the New St Ann’s – document is generalised in what it says.

Points to look at:

1. Current redevelopment of mental health and other health facilities seems to be very limited. Only very small new build; the rest is using current buildings? Why? Surely no more expensive to build a proper well planned building with all the modern facilities needed rather than do an add on and try to refurbish the old.
2. Little space for expansion of health and community facilities in the future. We don’t want to be faced with a situation where we cannot develop new needed health services in the future because no-one thought to provide for that flexibility.
3. Need good amount of green space on both medical and housing sites. Patients who are unable to leave the hospital need adequate areas of green space to look at, sit out and walk in; there needs to be space for visitors too.
4. New build should be as environmentally friendly as possible using new technology to reduce running costs
5. How does The Water tower fit into the plan - isolated amongst the built up area. Who will “own “ it.

**MENTAL HEALTH SUPPORT ASSOCIATION & HARINGEY MH
SERVICE USER NETWORK:
COMMENTS: – ‘THE NEW ST ANN’S CONSULTATION 2012’**

-12 July 2012

Q5 Do you have any other comments?

1. No figures given for value of land; cost of rebuild of new health facilities; thus very difficult to make proper judgements about what is possible and what is not.
2. Who/what is driving this development? The MHT’s primary aim is to save the money that the site is currently costing. How does LB Haringey fit in? To carry out the vision spelt out in Question 1, there needs to be a partnership between the MHT, LBH, and other stakeholders in drawing up the detailed plans.
3. What is the Trust’s view of linking any occupancy of the residential part of the site not taking place until the health facilities have been provided?