

## **UPDATE BRIEFING ON BEH-MHT FOR NCL JHOSC – 23 MARCH 2015**

### **1. Introduction**

This short briefing aims to provide an update on BEH-MHT ahead of the meeting of the Barnet, Enfield and Haringey JHOSC sub-group on 23 March 2015.

### **2. Summary profile of the Trust**

The Trust provides integrated mental health and community health services, following the transfer of Enfield Community Services in January 2011. It currently employs around 2,400 WTE staff (just under 2,800 individuals) and its annual income in 2014/15 is £190 million.

The Trust delivers comprehensive local mental health services across Barnet, Enfield and Haringey. These include the full range of services for children and adolescents, adults and older people.

The Trust also provides more specialist mental health services to a much larger population across North London, Hertfordshire, Essex and surrounding counties. Its specialist mental health services include the North London Forensic Service, the St Ann's Eating Disorders Service, specialist child and adolescent inpatient services and the Halliwick Centre for personality disorders. It also hosts the national Forensic Fixated Threat Assessment Centre (FTAC), providing a nation-wide service for high profile public figures.

Following the transfer of Enfield Community Services (ECS), the Trust also provides the full range of child and adult community health services in Enfield. These include comprehensive universal and specialist community health services for the whole of the population of the borough. Since these services joined the Trust, they have been increasingly integrated with the Trust's mental health services and with other local health and social care services to provide more holistic care for local people. The proposed tendering of ECS by Enfield CCG was discussed at the last NCL JHOSC sub-group meeting on 5 November 2014. Enfield CCG later confirmed that the original timetable for tendering the services would not be pursued, but that this would be re-visited later in 2015.

The Trust's specialist personality disorders service is one of only three national Personality Disorders Pilots. Its memory services in Enfield and Haringey have been recognised nationally for excellent care by the Royal College of Psychiatrists. The Trust also has a new Child and Adolescent Mental Health services (CAMHS) unit, based on a new model of care, at the Beacon Centre at Edgware Hospital. The Trust continues to work closely with the local acute hospitals, including further developing the successful Rapid Access, Intervention and Discharge (RAID) services at Barnet and the North Middlesex Hospitals.

The Trust has been successful in winning new business, with contracts for new services in Forensic mental health, including mental healthcare for Feltham Young Offenders Institution, Pentonville and Brixton Prisons and additional Court Diversion services.

The Trust has recently strengthened its senior leadership with a new Executive Director of Patient Services and new Executive Director of Workforce. It is also currently restructuring its clinical service lines to be co-terminus with the three local authorities, plus one specialist services service line. This is being done to support the development of the Trust's Enablement model of care (explained in more detail below) through aligning clinical services more closely with local authorities, local Clinical Commissioning Groups and voluntary organisations.

### **3. Quality Issues**

Despite the challenging financial environment the Trust faces, it continues to focus on the quality of care provided and ensuring that patient safety is prioritised at every level of the organisation.

The Trust has continued with a strong track record on the quality of its services. There are no outstanding issues raised by the Care Quality Commission (CQC). However, along with all other NHS care providers nationally, the Trust will be inspected by the Chief Inspector of Hospitals from the CQC. An inspection visit is expected later in 2015.

The Trust continues to report to commissioners on both quantitative and qualitative performance indicators on a monthly basis and no major quality issues have been raised recently.

### **4. Enablement model of care**

In order to address the major challenges facing the Trust of increasing activity with real terms reductions in funding each year, the Trust is developing plans to change how and where many of its services are provided.

At present, the Trust operates a fairly traditional model of care which sometimes involves keeping patients under its care longer than necessary. It is adopting an Enablement focused model of care, which is all about helping patients to care for themselves as much as possible and to reduce dependence on services. The aim is to enable patients to identify and work towards their own community, social and employment goals. This is often summarised as:

- **Live** – to have somewhere safe and secure to call 'home'
- **Love** – to have social contact, friends and relationships
- **Do** – to access meaningful activities and, if possible, employment

The Trust wants to help patients build their resilience and see themselves as residents, citizens and participants, accessing and receiving health and care services as and when required in order to maintain their own wellbeing. There is strong evidence nationally and internationally that, over time, this will not only improve services for patients, but also allow the Trust to help manage the increased demand for its services.

The Trust is also looking at its estate across all three boroughs. The Trust currently operates from four inpatient sites and many other community based sites. If the costs of these can be reduced without affecting patient care adversely, then this will also help the Trust to manage within the resources it has available.

## **5. Trust's latest financial position**

The Trust is facing a serious financial challenge at present. It is forecasting a £4.7m deficit budget in 2014/15 for the first time ever. At present, the Trust is anticipating an increased financial deficit in 2015/16, subject to the outcome of current contract negotiations, which at the time of writing, are continuing. One of the key issues being negotiated is whether local commissioners will follow national guidance in increasing the funding of mental health services in line with their overall budget increases for 2015/16, which are significant, particularly for Barnet and Enfield CCGs.

The Trust's view is that its current financial situation is a direct result of the significant historical financial challenges faced by the local health economy, which has been one of the most financially challenged in the country for some time. Over the last five years, the Trust has made cost reductions totalling £56m, equating to an average of 6% each year for each of the last five years. This is considerably more than the national average of 4% per year.

As JHOSC members will remember, in early 2014 the Trust and the three local CCGs commissioned an independent report from Mental Health Strategies on the underlying funding of local mental health services. This showed that, overall, the Trust provides around £15m worth more services than it is funded to by the local CCGs. The report confirmed that the Trust is not a high cost provider. The latest NHS Reference Costs (an indication of overall cost efficiency) show the Trust is the most cost efficient mental health provider running inpatient services in London. Its latest Reference Costs are 87, compared to the national average of 100 and to neighbouring Camden and Islington NHS Foundation Trust at 107 and Central and North West London NHS Foundation Trust at 112.

A more detailed independent report (carried out by Rubicon Consulting) was commissioned by the Trust in late 2014 to review whether, given the overall financial position of the local health economy, it is able to remain financially sustainable providing the same services over the next five years.

The Rubicon Review concluded that there are some changes the Trust can and should make to help improve its financial sustainability, such as the introduction of Enablement focused services and potential changes in the Trust's estate. However, the Review was clear that these changes will not be sufficient to close the substantial financial gap facing the Trust if current funding levels from commissioners continue.

If the Trust is not able to be financially sustainable in its current form in the long term, local commissioners will need to seek alternative arrangements for the provision of the services. The Trust's view is that it would be very disruptive to patients and staff if the Trust were merged with another organisation and, very importantly, this would not solve the key issue, which is that local mental health services are not currently financially sustainable. The Trust continues to work with the NHS Trust Development Authority and the local CCGs to explore the options for the future.

## **6. Update on redevelopment of St Ann's Hospital, Haringey**

The Trust submitted an outline planning application to Haringey Council in summer 2014. Since then, it has been working closely with Haringey Council in addressing the high volume of queries the Council received from statutory bodies, particularly the Environment Agency.

The Council and the Trust have also been working on the other key issues which had to be resolved before the application could be considered by the Planning Committee. These included the provision of additional school places nearby in response to the increased demand generated by the 470 new family houses and flats proposed on the part of the St Ann's site which is not required for NHS use. The Trust has also been working with the Council around the development gain payment which will be due from the developer to fund the additional education places and other social infrastructure, such as affordable homes on the site.

Haringey Council has now confirmed that the planning application is being recommended for approval at the meeting of the Planning Committee on 16 March. A verbal update will be given at the NCL JHOSC sub-group meeting on 23 March and at the Haringey OSC meeting on 26 March.

Following outline planning approval, the Trust will seek formal approval to proceed from the NHS Trust Development Authority. This is required before the Trust can finalise the plans for the new mental health facilities and begin the process of marketing the sale of the land surplus to NHS requirements.

The Trust hopes to secure NHS Trust Development Authority approval by summer 2015, which will allow a final planning application for the new mental health facilities to be made to Haringey Council by the autumn of 2015. This should then allow work to start on the new health facilities by spring 2016, with a two year build period to completion. The proposed housing development will be built in parallel, though a four - five year building programme is likely until final completion of the residential development.

**Barnet, Enfield and Haringey Mental Health NHS Trust  
March 2015**