

Annual Review 2022-23

Welcome from our Chief Executives

Thank you for reading the South London Mental Health and Community Partnership's (SLP) Annual Review for the 2022-23 financial year.

It was another challenging period for the NHS - and for mental healthcare. As we recover from the impacts of COVID-19, we face multiple challenges. Increasing service demand, tackling the backlog of appointments and treatment caused by the pandemic, and the workforce pressures felt across the NHS, and in particular in London, are amongst them.

The SLP continued to drive change and transform patient outcomes. More people in the care of specialist services programmes were able to enjoy increased independent living in community settings thanks to our teams' pioneering work.

Clinically-led, service-user informed, and genuinely co-designed progressive new pathways enabled us to reduce admissions, readmissions and length of stay in inpatient facilities. Innovative new care models, including new partnerships with the third sector and housing providers, made a real impact. It meant we could enable yet more specialist mental healthcare and recovery to take place outside of hospitals.

The collaborative ethos and effective partnership working we forged in creating one of the first such three-mental health Trust partnerships in the country, five years ago, continues to thrive.

Collaboration not competition was a founding principle and underpins what we do now. This partnership working culture is now extending further, with the growing impact at system and place level of fully established Integrated Care Systems (ICS) in south west and south east London.

We have been well placed to play a major role in joining other parts of the NHS, social care, public health, the VCSE and most importantly local communities in taking on the inequalities and population health challenges we know exist. SLP programmes such as Complex Care and CAMHS Tier 4 inpatient services have long worked closely with Directors of Adults' and Childrens' Social Care to find new ways to commission and provide care and support for people of all ages, often facing multiple and complex conditions.

This experience and commitment to working with partners at scale, system and place level has helped us contribute to our ICSs' strategic planning and programme development and delivery. Our Trusts' staff have taken on roles within ICB governance and system-wide programmes.

SLP has supported innovative and cost-effective new ICB commissioning arrangements at scale, such as Complex Care, new urgent care telephone services, and Learning Disabilities and/or Autism within specialist services. This brings more consistent care pathways and innovation to some of the most previously underserved people with complex mental health challenges.

The inclusion of mental health at the core of both ICSs' long-term priorities is encouraging. We must continue to work towards parity and further integration with physical health as essential to our communities' social, personal and economic well-being.

Our core programmes have continued to push boundaries and do things differently. We can't thank our SLP Trusts' staff enough for making change happen, alongside managing the often-relentless pressures of delivering excellent care with limited resources and increasing demand.

Highlights of the past year include:

- Opening an innovative 12-bed integrated community rehabilitation unit in partnership with the third sector so Complex Care patients can be stepped-down to community living more quickly.
- We invested in a £1 million new Enhanced Treatment Team for Adult Eating Disorders, including significant funding from our ICBs, which is already transforming care, by treating people in the community. 68% of patients avoided hospital admission, and length of stay was reduced on inpatient wards.
- Our pioneering CAMHS Family Ambassadors programme pilot transformed the experience of many families, friends and carers when their children were admitted to inpatient care.
- Further reductions in the use of Adult Secure beds for Forensic patients, meaning many more are cared for in the community, closer to families and friends. Significantly, our focus on people with Learning Disabilities and/or Autism (LDA) in the Forensic cohort is enabling step-down of growing numbers to independent, community living.
- We brought more of our most complex patients, including many with significant co-morbidities, from long-term out of area restrictive settings to rehabilitation and recovery closer to home.
- Despite national demand increases, we further reduced the number of south London children and young people needing inpatient care outside south London or in private sector units.
- We further committed to reducing inequalities we know exist in the NHS itself. Half of the year's cohort of participants in our BME Leadership Programme for Nurses have already been promoted to more senior roles.

The maturity and effectiveness of our partnership ensured we could take on important new initiatives. We were commissioned to deliver a specialist new NHS 111 for Mental Health telephone service for all south London. We have also been tasked with delivering a dedicated advice and guidance helpline for Police Officers to use when tackling urgent and crisis mental health situations including potential Section 136 referrals. We are delivering a new specialist Perinatal Mental Health programme, after we secured Provider Collaborative status and devolved funding from NHSE.

Partnerships continued with health system, and commissioners from other areas. We cared for patients from Kent, Sussex, Surrey and north London within our specialist inpatient services.

It has been another positive year despite the challenges. Collaboration not competition continues to shine through.

Thank you to all our partners, patients, families and carers, staff and our communities for supporting us and working together as we strive to keep improving specialist mental healthcare for everyone.



Vanessa Ford,
CEO, South West London and St
George's Mental Health NHS Trust



David Bradley,
CEO, South London and Maudsley
NHS Foundation Trust



Dr Ify Okocha,
CEO, Oxleas NHS Foundation Trust

Major Programme highlights

Adult Eating Disorders (AED)

- Enhanced Treatment Team - Invested in this innovative new community service, providing specialist care for people close to home, to reduce admissions and readmissions to hospital:
 - o 25 patients managed in first six months alone by the service
 - o 68% of the patients avoided hospital admission
- Further improvements through this relatively new Provider Collaborative included:
 - o 28% reduction in inpatient beds used during the year - more people cared for in community settings, remaining with their families and friends
 - o Huge reduction in Average Length of Stay - people in hospital for 30% fewer days on average than the previous year
 - o All south London inpatients are now cared for in local beds (five patients were out of area in 2021-22)

Adult Eating Disorders Provider Collaborative

"I don't think I can put into words how grateful I am for all you have done for me throughout. You were one of the first faces I saw and instantly made me feel at ease. You were always there and helped me whenever I needed uplifting and when I felt down and made my recovery journey that much easier." Patient, AED Enhanced Treatment Team.

CAMHS Tier 4 (Inpatient Services)

- Continued to reduce the number of children and young people in private sector and/or non-south London general inpatient wards despite increasing demand on services nationally - bringing care closer to families and local communities:
 - o At the end of the year just four children were in non-SLP NHS Trust beds – 67% reduction on 21-22
 - o No children at all cared for outside the local area in GAU (General Adolescent Unit) wards during the year
- Expanded Dialectical Behavioural Therapy (DBT) service now covers all 12 south London boroughs and delivered remarkable transformation to children's mental health and quality of life:
 - o Prior to treatment, fewer than one-third had been free of self-harm for a week; by the end of treatment, almost 90% had not self-harmed for at least a week
 - o A&E attendance by these patients reduced by 75%, and crisis line calls by 90%
- Supported other parts of London by caring for the capital's children and young people when no local inpatient facilities were available

Complex Care

- Further reduction in patients cared for outside south London
- Peer support workers and specialist substance misuse professionals deployed to support patients in SLP Trusts' wards
- Innovative 12-bed community accommodation facility opened in partnership with specialist third sector housing provider Bridge Support, aiming to
 - o step-down patients from the private sector and SLP Trusts' wards to community living more quickly
 - o significantly reduce overall Length of Stay (LOS) compared with inpatient care - target LOS is nine months
 - o enable multi-disciplinary staff to best support patients' recovery and work towards independent living

Forensic (Adult Secure)

- 13% fewer patients in inpatient care outside south London over the past 12 months
- Further 4% reduction in people needing inpatient admission - continuing to increase specialist care for people in the community, outside hospital beds
- Another 27 patients brought back onto local SLP Trusts' wards from outside south London over the year and now cared for closer to home
- Continued major investment to improve care and quality of life for Forensic patients with Learning Disabilities and/or Autism (LDA):
 - o First south London specialist ward opened allowing us to bring people back from out of area to be closer to families, friends and communities
 - o Ten further patients stepped down to community-based care and more independent living

Nursing Development Programme

- BME Leadership Programme helping increase opportunities and tackle inequalities:
 - 50% of the year's cohort have already been appointed to more senior roles
 - Four nurses promoted to Band 8a and above leadership roles
 - All nurses on the programme retained in their own organisation - providing more continuity of care, and stable teams

Nursing Development - BME Leadership Programme

"It 'opened my eyes'. I finally looked up and realised that for many years I was stuck in my position, and not looking outward for growth in my career. It showed me that I can be a transformational leader. I have since applied for a senior position and was successful. I will apply all the knowledge, motivational skills and experience gained from the programme in my new position." Nurse (programme participant).

Underpinning our work

Family Ambassadors Programme

- Pioneering new NHSE-funded pilot programme to improve communications between clinical teams and families, and better inform and explain what happens when a child is admitted to an inpatient ward
- 73 families supported across eight wards (SLP Trusts and independent providers) with almost 900 hours' family contact time from the four ambassadors including phone calls, emails and family workshops
- Positive qualitative feedback from families via seven-month evaluation review highlighted essential role of ambassadors including advocacy, empowering and supporting families to have a voice
- Clinical teams' feedback emphasised vital role in communicating information to parents, ongoing liaison between families and clinicians, and impact in freeing ward teams' time to undertake more clinical work with parents and carers
- Two permanent SLP posts agreed for CAMHS. These roles will be part of the wider SLP involvement team

CAMHS Family Ambassadors Programme

'The Family Ambassador role is especially helpful for families who wouldn't know how to speak up and as validation for those that are a little more questioning of the process. The family ambassador was a beacon of hope during our time. It an incredible supportive service.' Family of young person.

Service User Involvement

- Experts by experiences are integral across our programmes, supporting clinicians and project teams including co-design of new pathways, providing input within our key governance forum as full members, and ensuring their and wider service users' voices are represented in our planning
- Development work was started on the first long-term SLP Service User Involvement Strategy, co-produced with service users, staff, and charity Rethink Mental Illness
- Paid positions as Involvement Leads in our AED, CAMHS, Complex Care and Forensic programmes further professionalised these roles and underpinned our commitment to service user-informed care

Quality Assurance

- Continued improvement of how we monitor the specialist mental healthcare services delivered by our Trusts' and independent providers included:
 - Annual Quality Review Tool - new model incorporating best practice from providers' internal reviews, Quality Network and CQC inspections. The focus of the tool is on patient, staff and carer experiences. The carer and patient questions for the tool were co-produced and reviewed with input from people on the Trusts' wards
 - Fully embedded programme of monitoring, review and learning (including targeted interventions where required) across Provider Collaborative programmes including weekly joint Quality Matters Meeting attended by the Quality and Commissioning Team, service and clinical profession-specific workshops and learning events. Programme Quality Summits involve senior leadership in a Board to Ward approach

Business Intelligence and Data Analysis

- Robust, evidence-based analysis underpins our business cases to reinvest savings in further clinical pathways, innovation and improvements, and in developing new services
- Detailed patient-level data across our programmes informs clinicians and enables us to monitor outcomes and the impact of our new pathways and approaches