South West London and St George’s Mental Health Trust

About the Trust
South West London and St George’s Mental Health NHS Trust (SWLSTG) is the main provider of integrated mental health and social care services in South West London.

We serve just over one million people of all ages across the London boroughs of Kingston, Merton, Richmond, Sutton and Wandsworth. We also provide a range of specialist regional and national services.

Services available in south west London:
- Inpatient, outpatient and community services for children, adults and older people with mental health problems
- Forensic inpatient and community services for people with mental health problems who have been through the criminal justice system
- Mental health services to HMP Wandsworth

National Services:
- Mental health services for deaf children and adults
- Eating disorders services for children and adults
- Services for the treatment of obsessive-compulsive and body-dysmorphic disorders

The Trust employs over 2,000 (whole time equivalent) staff who operate from more than 90 sites, some of which are owned and run by the Trust and others which are owned by other organisations, including three main inpatient hospital sites (Springfield University Hospital in Tooting, Queen Mary’s Hospital in Roehampton and Tolworth Hospital). Our staff provide care and treatment to approximately 20,000 people from South West London and beyond at any given moment.

The Trust also provides education, training and research in partnership with St George’s University of London, Kingston University, London South Bank University, King’s College London, University of Surrey, Tavistock Institute of Medical Psychology and Brunel University.

Our mission
At South West London and St George’s Mental Health NHS Trust our mission is “making life better together”.

Our vision
“We aspire to be a cost effective centre of excellence; a place where patients choose to be treated; where clinicians want to train and work; our stakeholders want to work with us.”

Our objectives
Our mission and vision, combined with a commitment to making the best use of financial resources, inform our strategic objectives:

- Improve quality and value
• Improve partnerships
• Improve co-production
• Improve recovery
• Improve innovation
• Improve leadership and talent

These objectives will be delivered through our support strategies which outline in more detail how we will develop our people, our technology, our physical environment and estate and our financial capability to meet the demands of a constantly changing environment whilst remaining clinically and financially viable.

**Foundation Trust Status**

Becoming a Foundation Trust is a vital step in our bid to become a leading mental health organisation, delivering quality, modern mental health services to the people of South West London.

Achieving foundation trust status will enable staff, patients and the public to be involved in how our mental health services are provided.

Foundation Trust status will allow the Trust:

• Greater freedom to improve quality of care, such as the option to form joint ventures and legal partnerships in the development of system wide solutions

• As a Foundation Trust we will be locally accountable to our communities and patients through a new council of governors.

• For the first time we would be able to invest directly in improving our services.

• Becoming a Foundation Trust is crucial to our development and necessary in order to continue our drive to provide excellent quality care.

As a Foundation Trust we are required to recruit a membership of staff, members of the public, people who use our services and their families and friends. To date we have

Part of the journey to becoming a Foundation Trust includes a rigorous assessment of the quality of our services. The Trust underwent an inspection from the Chief Inspector of Hospitals in March 2014. The findings from the inspection have now been published, reflecting positively on the Trust and recognising the hard work and dedication of staff. The report showcases the progress SWLSTG has made.

Overall, the CQC found that staff were ‘compassionate’ and services were ‘safe and well-led’. The CQC praised staff saying they were ‘caring and had a good approach to patient care and interacted positively and compassionately with people’. Inspectors also noted that much of the care delivered followed best practice guidance.

The Trust has also recently undergone a Quality Summit and a ‘Board to Board’ with the NTDA and we are likely to be referred to Monitor for the final part of the application process in the Autumn and will hopefully be licensed early in 2015.
Challenges

The challenges facing us, and the rest of the NHS, are significant. We know that over the next few years the amount of money available to the NHS will not keep pace with the rising demand for our services.

We also know that the way people want to manage their mental wellbeing has changed and people expect to receive mental health care close to their homes and in ways and at times that are convenient to them. They expect greater choice in how to manage their wellbeing, and about where to go for the support they require. For the relatively few people who need inpatient care, they want it provided in a modern environment, by teams with experience of supporting people with complex or long-term conditions, and to high standards of care so that they can return to their independent lives as quickly as possible.

Estate Modernisation

Our biggest single challenge is that most of our hospitals date back to the 19th Century. They are old and they do not meet modern standards for care, dignity or privacy. They are prohibitively expensive to run and they drain resources which should be going to patient care. We need to transform our services. To do this we will sell the land and buildings that we no longer need and reinvest the proceeds to support the development of more services closer to home.

Our ambitious Estates Modernisation Programme will completely transform the facilities from which our services are provided. This is the most radical development since Springfield Hospital was built in 1840. In total the Trust will invest £160m to transform the estate across the South West London area we serve. The new estate will reflect the needs of our service users and the organisation into the future and allow us to create a new model to ensure that the right care is provided for all patients, in the right place, at the right time. By creating new hubs in each of our five boroughs we can deliver more specialist outpatient, therapy and support services where people want them: closer to, or in, the home.

Our services in Kingston

The main mental health secondary care provision is provided by the Trust but a wellbeing service, substance misuse service and ADHD are provided by Central & North West London Foundation Trust, Camden & Islington Foundation Trust and Your Healthcare.

The Trust currently has two inpatient units situated at the Tolworth Hospital site. The wards cater for adult acute and older age people. A summary of the wards and their function is given below.

<table>
<thead>
<tr>
<th>Ward</th>
<th>Ward Type</th>
<th>Number of Beds</th>
</tr>
</thead>
<tbody>
<tr>
<td>Azaleas</td>
<td>Older People</td>
<td>20 Beds</td>
</tr>
<tr>
<td>Lilacs</td>
<td>Adult Acute</td>
<td>23 Beds</td>
</tr>
</tbody>
</table>

Kingston community services provide a range of services to cater for the mental health needs of the population. The services are cover all age ranges from infants to older people (65+). In 2013/14 the service as a whole saw approximately 6,000 different patients and provided approximately 60,000 contacts. A summary of the services is given below.

In addition the Trust offers centralised services to all CCG’s these include for example the Recovery College, Service User Network Project (SUN) and physical/exercise therapies.
<table>
<thead>
<tr>
<th>Service Type</th>
<th>Base</th>
<th>Number of Patients seen May 13 – April 14</th>
<th>Service Specification</th>
</tr>
</thead>
<tbody>
<tr>
<td>Kingston CAMHS (inc on Tier 2 &amp; 3 CAMHS).</td>
<td>Tolworth Hospital</td>
<td>970</td>
<td>This is a multi-disciplinary team assessing a range of mental health concerns that affect children, young people and their families. Treatments include cognitive behaviour therapy, art therapy, child psychotherapy, counselling and pharmacotherapy. The Service is for children and adolescents up to the age of 18.</td>
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<tr>
<td>Adult CMHT (x2)</td>
<td>Tolworth Hospital</td>
<td>1700</td>
<td>The two CMHT's (Kingston North &amp; South) cater for clients aged between 18 and 65 years. Patients are assessed and treated for severe, complex and enduring mental health difficulties.</td>
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<tr>
<td>Kingston Early Intervention Service</td>
<td>Tolworth Hospital</td>
<td>100</td>
<td>A service for people aged between 18-35 who are experiencing early episodes of psychosis. Referral is generally through CMHTs or other EIS services.</td>
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<tr>
<td>Kingston Crisis and Home Treatment</td>
<td>Tolworth Hospital</td>
<td>550</td>
<td>Provides 24 hour crisis intervention in the community for clients to prevent hospital admission.</td>
</tr>
<tr>
<td>A&amp;E Liaison for Adults &amp; Older People</td>
<td>Kingston Hospital</td>
<td>1500</td>
<td>The Liaison Psychiatry Service offers assessment and support for all major mental health problems for ages 18+. A recent older people pilot was very successful and indications are that this will be extended on a permanent basis.</td>
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<tr>
<td>Kingston OP CMHT</td>
<td>Tolworth Hospital</td>
<td>1170</td>
<td>This is an integrated health and social care service for older people. The unit also accepts referrals for younger people with a confirmed diagnosis of dementia and where it is appropriate to be managed by the team.</td>
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<tr>
<td>Service</td>
<td>Location</td>
<td>Code</td>
<td>Description</td>
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<tr>
<td>Kingston &amp; Richmond Older People Intensive</td>
<td>Tolworth</td>
<td>130</td>
<td>The aim of this limited service is to provide support and treatment for patients enabling them to remain in their own homes when they become acutely ill. It is an alternative to inpatient admission and facilitates early discharge from hospital. We also support other agencies who give personal care. The service is for residents of the borough of Kingston who are aged 65+.</td>
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<tr>
<td>Home Treatment Team</td>
<td>Hospital</td>
<td></td>
<td></td>
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<tr>
<td>Kingston Psychological Therapies</td>
<td>Tolworth</td>
<td>1560</td>
<td>The service provides individual as well as group therapies. The therapies include limited Dialectical Behaviour Therapy (DBT) which aims to provide treatment for clients who self-harm and meet criteria for a borderline personality disorder diagnosis. Consultations are provided to teams regarding referrals, ongoing management and team dynamics.</td>
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<tr>
<td>Hospital</td>
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Kingston CCG is closely integrated with the Royal Borough of Kingston upon Thames (RBK) and therefore the Section 75 agreement is of great benefit to all parties as an avenue for supporting the general wellbeing of service users, including social care, and their overall health demands. The social workers and other staff within the section 75 agreement work in integrated teams within the Trust and enable continual improvement against a joint service development agenda. The new Care Bill will provide additional challenges with respect to CMHT working.

Kingston CCG commissioning intentions include various areas of potential joint development as well as others which may impact on how we deliver our current services. These include initiatives around support for independent living, investing in accommodation and support that will enable people to live independently, while removing the demand on inpatient beds and higher cost placements. This may lead to an increased demand on community services and the way those services are delivered.
The CCG is reviewing the way that it commissions dementia care in hospital settings and the Trust continues to work with the CCG for appropriate involvement. Recent pilot work in Kingston Hospital is broadening the discussion on how care might be provided in the most appropriate settings with the right level of secondary care involvement available at the right time.

A pilot project has looked at the extension of Liaison Psychiatry in Kingston hospital and already there is evidence that this can impact on length of stay and reduce admission. Older persons’ community mental health services are under review on a whole systems basis with similar aims to ensure the right care at the right time avoiding hospital admission where possible.