

Quality care,
when and
where you
need it.

Our Plan
2012/13

Our aim
is to improve
the health,
wellbeing and
independence
of the people
we serve.



In this booklet

Introduction

About Southern Health

The people we serve

Our Plan

Our services

Quality and safety

Our people

Our organisation



Quality care, when and where you need it

About Southern Health

We provide community health, mental health, specialist learning disability and social care services for people across Hampshire and its surrounding area.

Serving a population of around 1.3 million people, we are one of the largest providers of these types of services in the UK. We provide care from over 150 sites including community hospitals, health centres, inpatient units and social care locations. In 2011/12 we supported 251,000 people with 1,198,000 community contacts, 302,000 outpatient appointments and 267,000 occupied bed days.

Whilst we are a large organisation patients and service users must remain at the centre of everything we do. Being person centred is one of our six Trust values. Our aim is to improve the health, wellbeing and independence of the people we serve.

Meeting the needs of the people we serve

Southern Health is an NHS Foundation Trust which means we are well placed to serve the people of Hampshire and beyond. We are answerable to our members who represent the people we serve and elected Governors make sure that their views are known. We are also funded in a way that gives us the flexibility to invest in services that are responsive to the needs of local communities.

So that we meet the needs of the people we serve Southern Health is committed to involving patients and services users in the development of our organisation and the development of the services that we provide. We must also ensure that the way in which we communicate with patients, services users their carers and families is relevant and clear. We will continue to develop innovative ways to involve different service user groups so that we truly understand what people want.

Quality and Safety

In 2011/12 we developed clinical outcome measures for all of our services. We will start to use these measures in 2012/13 to better understand how the care that we provide is improving the quality of life of our patients and services users. We also want patients and service users to have an excellent experience when we care for them. Our plan for 2012/13 sets out our Customer Service Charter and how we will get feedback about the experience that people have had so that we can always be improving.

These are tough economic times and the NHS is no exception but we must not let this impact on the quality or safety of the services that we provide. High quality safe care will always be our number one priority.



Our customer service charter

We have worked with our staff, our Governors, and our service users to develop a Charter of Customer Service Standards.

As staff, we will be:

- Respectful
- Approachable and easy to talk to
- Pleasant and friendly at all times
- Willing to listen and really hear
- Aware of individuals' varying needs
- Dressed professionally

As an organisation, we commit to:

- Involve and inform patients and service users, their families and carers, about their care
- Wear name badges; introduce ourselves to the patient, service user, their families and carers.
- Answer the telephone; all calls should be answered by a member of staff or forwarded to a messaging service which will deal with you in a prompt and efficient manner
- Help individuals access the right care and the right person to contact
- Always protect individuals' privacy and their confidential information
- Take action; if we see something that needs doing, we will never say "it isn't my job"
- Respond promptly to patients' and service users' needs; put them first
- Listen to feedback; complaints and concerns are welcomed

These standards are expected across our organisation, so that whatever care is delivered, wherever it is provided, our patients and service users should expect the same high standards.



The people we serve



Samantha's health visitor

"I really wasn't sure what to expect from my health visitor, I was terrified that this health professional was going to tell me that I was doing everything wrong. I quickly learnt that health visitors are not there to judge your parenting skills but to offer advice, guidance and reassurance. Sandra visited me just after Callum was born, she was full of confidence and praise, and reassured me that how I was feeling was perfectly normal. I really don't know what I would have done without her.

I saw Sandra at home and at my local baby clinic on a regular basis. She gave me advice on my baby's weight, his sleeping and feeding, nappy changing and general patterns of behaviour. She was really supportive and really cared about our welfare; she even checked that I was getting enough support at home from my partner.

I really valued the experience and the support that my health visitor provided. She helped reassure me that everything was ok and also helped to highlight things that I did need help with. She was always there when I needed her."

“
I really don't know
what I would have
done without her.
”

B's social care success story

"B had been living in a treatment and assessment unit for over five years. This was a very restrictive environment for him and although he was ready to move to a home that he could live in on his own, with space and easy access to country walks, it had been very difficult to find suitable accommodation for him.

B has failing eye sight, finds it difficult to tell us what he likes and doesn't like and his balance can be a little unsteady at times. Winchester City Council contacted Southern Health to inform us that they had a property available for B. After a considerable amount of assessment work and adaptations to the property, the social care team successfully supported B move in to his new home. This involved close working with his named nurse, advocate, and Winchester City Council.

B loves going for long walks and his new home has allowed him easy access to the outdoors. B has been to the village shop, something he hasn't done in a long time.

The team is continually creating new activities for B to experience. He loves sensory sessions, having his nails done, his head massaged, or relaxing to music with his sensory lights on. B continues to surprise his support team with all the different things he is achieving, things he hasn't had the opportunity to do for a long time.

The amount of effective joint assessment, planning and working has paid dividends in making this an exciting and life changing experience for B; the change in him is brilliant."

Our Values: the culture we aspire to

- Person & Patient Centred
- Forging Relationships
- Releasing Ambition
- Driving Innovation
- Delivering Value
- Valuing Achievement



“

The help, patience and understanding of all the staff was invaluable.

”

Paul's recovery

“Today I will eat three meals and a snack before bed. I won't run.

When I was first referred to the Southern Health Eating Disorders Service that scenario would have been impossible to imagine, never mind achieve.

In early 2009, after years of descending further into the grip of anorexia and an addiction to exercise I finally admitted to my mum that I was struggling.

The next step was to see my GP, and then a referral to Southern Health.

Being able to open up about my problems and gain an understanding of what was happening to me was a huge relief. It was the beginning of a long, and ongoing, battle to overcome my problems.

Initial one-to-one counselling was invaluable but it quickly became apparent I needed further help.

I took a lot of persuading to agree that I should be treated on the Trust's 'Intensive Support Programme'.

This involved attending the service four times a week. On these days I would eat three meals with other patients, and take part in group and individual therapy.

The help, patience, and understanding of all the staff working at the Eating Disorders Service was invaluable. Equally important was the opportunity to spend time with other eating disorder sufferers and the support we could offer each other.

After my three months on the Intensive Support Programme I received weekly individual counselling which continued my recovery.

Without the help I received throughout my treatment at the Eating Disorders Service I would not have had the capability or strength to recover to the extent that I have to date.

Furthermore, I fully believe that all the experience I gained throughout this time will help me take the final steps to a complete recovery.”



Our Plan

We will:

Constantly check whether standards are being achieved and where we find room for improvement in the quality or safety of our services, we will act swiftly and decisively to make things better.

Measure our success in terms of the improvements we make to clinical outcomes and experience of our patients and service users, their carers and families.

Work efficiently and innovatively to deliver our services within our agreed budget without compromising on quality or safety.

Meeting
the highest
standards of
quality and
safety

We will:

Invest in leadership at all levels in our organisation so that we are ready to meet the challenges we face.

Recognise, nurture and reward the most talented employees, as these are our champions for improving services.

Develop our staff so that they have the right training and skills to always deliver safe and high quality care.

Developing
our people



Transforming our services for the better.

We will:

Transform community health care by working more closely with other organisations to provide joined up care for the individual.

Transform mental health care by providing more services in the community or at home.

Provide specialist learning disability services that are tailored to the individual, enabling them to be as independent as possible.

Offer a growing range of social care services that enable individuals to remain independent and supported in their community.

Expand our learning disability and social care services through integration with Oxfordshire Learning Disability Trust.

Developing as an organisation

We will:

Improve the way we communicate with and involve the people we care for, our staff and all the other groups who are affected by what we do.

Make sure that our premises are all safe, pleasant and appropriate for the delivery of care.

Improve our business skills so that we can operate successfully in a more commercial 'health economy'.

Be innovative and invest in technology, wherever it will deliver better quality care in a more efficient way.

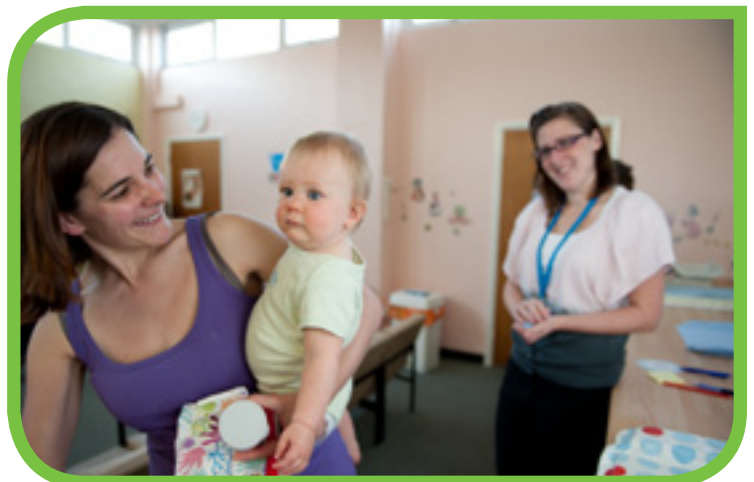
The page features a vibrant, abstract background. It consists of several vertical lines in various colors: pink, green, orange, light green, teal, yellow, and purple. These lines are partially obscured by large, overlapping, rounded shapes in teal, orange, pink, and green. The overall aesthetic is modern and colorful.

Our Services


(and how we're
transforming them
for the better)

All our services must deliver safe high quality care, meeting the essential standards in the Health and Social Care Act 2008 and all other regulatory requirements. However, we are transforming our services to deliver more than essential standards. We want to build a reputation for excellence, being recognised as a provider of health and social care services which deliver constantly improving care and patient experience.

We will work with other health and social care organisations and the voluntary sector to ensure care is 'joined up' so that people's experience of every aspect of their care is positive. We will also seek to expand our services in or beyond Hampshire where it means we can offer better care for people or we can be more cost effective. Our plan is to transform our services so that Southern Health becomes the organisation that both individuals and commissioners choose to provide their care.



Community Health Services



From before birth to end-of-life, we offer a range of services to promote and improve physical health and wellbeing. We work closely with local doctors to provide care both in people's homes and in our community clinics and hospitals across Hampshire. Our services include health visiting (working with parents to give babies the best start in life), care for people with diabetes, dental services, occupational therapy, physiotherapy and we also deliver Quit4Life, Hampshire's stop smoking service.

We will transform community health care by working more closely with other organisations that also provide services to our patients and service users, delivering more joined up care for the individual.



We will provide a range of services which support people to remain as healthy and independent as possible in their community, which may be in their homes or close to those who care for them. In 2012/13 we will continue to develop our services and integrate them more closely with the services that other organisations provide to our patients and services users. This will mean that individual patients receive more joined up care and overall the cost to the NHS is less.

In 2012/13 new Clinical Commissioning Groups, who are made up of groups of General Practitioners, will start to select and fund local healthcare. We will continue to strengthen the relationships that we have developed with these groups, working closely to ensure that redesigned and integrated services bring real benefits to the people we serve.

We will complete the implementation of our community care model across Hampshire which includes 24 hour access to community care, the redesign of community hospitals, the opening of community clinics and the development of individual services, such as wound care. We are increasing the numbers of patients and service users we see and treat in our community clinics as there are clear benefits to seeing them in these settings. These benefits include better access to health and social care services, improved health and wellbeing and improved treatment recovery times. Southern Health is building on this community care model, developing a vision for fully integrated care in Hampshire and in 2012/13 we will share this vision with our partners and other key stakeholders.

The community services that we provide to children and families are closely linked to local authority safeguarding and the promotion of health and wellbeing. By 2015 we will have doubled the number of our health visitors to over two hundred and forty. This is in line with government targets and will allow us to increase the contact we can have with families before the birth of a child and through that child's early years. We are also building stronger links to general practices ensuring that all practices have a designated health visitor.

“
By 2015 we will have
doubled the number of
our health visitors to over
two hundred and forty
”



Odiham Cottage Hospital

In July 2011, Odiham Cottage Hospital in the north of Hampshire faced an uncertain future as its doors were closed.

A combined effort from Southern Health, the local clinical commissioning group and a passionate local community has now breathed new life into the Hospital, when in April 2012 new community clinics started operating from the site.

We have plans to expand these clinics in the coming months to include phlebotomy and leg ulcer care, as well as running workshops for people with long term conditions and dementia.

St Michael's Hospice is working alongside us at Odiham Cottage Hospital to complement the care we provide, as too is a local day centre for elderly people.

In addition, Odiham Cottage Hospital will soon be the home for an integrated care team - which will include social workers from Hampshire County Council as well as community and mental health nurses from Southern Health, working together to offer a more joined up health and social care experience for local people.

Odiham Cottage Hospital is a great example of how we can work more closely with partner organisations, GPs and voluntary services to find innovative ways of surrounding people with a complete range of health and social care in their communities.



What we achieved

2011/12

- Continued to implement our new community care model focusing on the development of clinical skills within our community teams, a good example being an increase in the intravenous therapies we administer in patients' homes. This has led to more care close to home and better outcomes for patients and service users
- Established a network of Rapid Assessment Units, we now have six across Hampshire, which are at the heart of our new model of community care. Rapid Assessment Units mean that patients can be seen quickly, usually within 48 hours, without the need for referral to an acute hospital. These units provide a range of services including x-rays, scans, medication and blood transfusions
- Established the Portsmouth Older People's Partnership to improve services for older people in the South East of Hampshire. Working with our colleagues in acute care we are transforming the way we collectively care for frail and elderly patients. In 2011/12 we focused on how people are looked after when they arrive at the Queen Alexandra Hospital ensuring that they are seen by a consultant geriatrician, who can assess all of their needs, as soon as possible
- Worked in partnership with our colleagues in Basingstoke Hospital and social care to streamline the management of care for people with long term conditions. This has delivered more 'joined up' care for those needing continuous healthcare
- Developed the role of area matrons to support our community care teams. Area matrons oversee the work of our experienced community matrons, they often have specialist clinical skills and they focus on ensuring essential standards are being met and are improving over time. We currently have seven area matrons across Hampshire
- Introduced self referral by patients and service users, avoiding the need to see a general practitioner, for our occupational therapy, physiotherapy and podiatry services
- Fareham leg care centre won a Beacon award, being recognised for delivering excellent care in a community clinic setting
- End of life services have increased the number of people dying in their preferred location, most often at home. In 2011/12 80 per cent of our patients died in their preferred location.
- Established an acute occupational therapy service in South East Hampshire

Our goals

2012/13

- Further develop the skills of our community care teams enabling the provision of more complex care at home, reducing the need for patients and service users to visit a hospital
- Increase the number of people being treated in our Rapid Assessment Units and open additional units where we establish the clinical benefits of doing so. We will work closely with our colleagues in acute hospitals to bring further benefits to patients and service users
- Further develop the Portsmouth Older People's Partnership by changing our services so that patients and service users spend less time in hospital and ensuring that the benefits of the partnership are available across the whole of South East Hampshire
- Develop the model of integrated older people's care developed in the Portsmouth Older People's Partnership across other parts of Hampshire. We are in discussion with three acute care providers about the benefits to frail and elderly people of this approach to care
- Extend our partnership approach to managing continuing healthcare care, delivering more coordinated care to people living with long term conditions
- Further develop the role of area matrons ensuring they become an integral part of our model of community care. Area matrons provide clinical leadership for our "front line" staff ensuring high quality care. We will also appoint additional area matrons in 2012/13 where it is appropriate to do so
- Increase the number of nurses with the extension of our heart failure, respiratory and therapy services across Hampshire. Increased specialist nursing capacity, and the range of services that these specialists can provide leads directly to an increase in the amount of care that can be provided close to home
- Work with general practitioners to bring more outpatient appointments directly to our community hospitals across Hampshire, avoiding the need to visit an acute hospital
- Expand our pain management services across the south of Hampshire helping more people to cope with chronic pain

Mental Health Services

We provide a diverse range of services for working age adults with severe and enduring mental illness. We focus on recovery and re-ablement, giving people the support and treatment they need to achieve their goals and helping people regain skills they have lost due to an illness or accident. We do this both in the community and in our dedicated psychiatric hospitals.

We are at the forefront of medical research into dementia and we offer extensive services for older people with a mental illness. We support people in their own homes, in our hospitals and we also work closely with our colleagues in private care homes to make sure they are providing the best support for residents with a mental illness.

We also provide a range of specialist mental health services including secure settings for those who need them, and some very specialised services for children and young people with mental health needs.



We will transform mental health care by providing more services in the community, so that service users stay mentally healthy and maintain their wellbeing and independence.

Traditionally, people who were ill were cared for in hospitals. Service users have told us they would rather be close to their homes and families and this also speeds recovery, so we are changing how we provide care. Medications and therapies have also improved, so our aim is to care for as many patients and service users as possible in their communities, often at home. This new approach, in line with national and international best practice, will enable service users to stay mentally healthy and maintain their wellbeing and independence, as well as being more affordable for the NHS as a whole.

The focus of our services for people with a mental illness will be to provide more care in the community and less in inpatient beds, though there will always be inpatient beds available for those who are severely ill and cannot be treated safely outside hospital. We will develop our community mental health teams and integrate the care they provide more closely with our primary, acute and social care partners, delivering more joined up services locally.

Delivery of mental health services has traditionally been organised around age groups. Whilst this works for most people we understand that there are people whose needs are not age related and we are developing our services to ensure that age is not a barrier to accessing the right services. We will do this while still recognising that as we grow older the types of mental health services that we are likely to use will change.

The population over the age of 65 will increase by 15% over the next ten years and those over 85 by 27%. By 2026 it is predicted that the only increase in the numbers of people with any form of mental health illness will be as a result of age. We also know that the prevalence of depression, dementia and other mental health problems

is highest among older people. In response to this we will continue to develop our dementia services, ensuring they are closely integrated with the services provided by other health and social care organisations. This is an area where we see the opportunity to improve health and wellbeing by working closely with the voluntary sector.

We also see an opportunity for Southern Health to expand its specialist mental health services, providing more care in Hampshire for patients and service users from Hampshire, rather than their care being provided in other counties or in the private sector. We believe that patients and service users want to be looked after close to their homes, this can aid their recovery and gives better value for money as other options can be very expensive.

**“
Our approach will
enable people to stay
mentally healthy and
maintain their wellbeing
and independence
”**



Our new community mental health services

People recover faster and more thoroughly when they are in their own homes, surrounded by their family and friends.

We are working with our colleagues in primary care and now offer a single point of contact for those wishing to refer people into our services.

Launched in April 2012, we now provide three levels of care to people in their communities, with each level provided by a specialised team.

The **Access and Assessment Team** is the single point of access for people who first come into contact with our services (usually through their GP). This team carries out a detailed assessment of a person's needs and provides short term care for up to 12 weeks, as well as



What we achieved

2011/12

- Became one of six pilot sites for the national Implementing Recovery Through Organisational Change (ImRoc) programme which is changing the partnership between service users (experts by their experience) and their care professionals (experts by their professional training)
- Launched our programme to transform our adult mental health services completing a public consultation on our proposed service redesign in December 2011
- With our colleagues in social care we redesigned the services that we provide at Crowlin House supporting its residents to live more independent lives
- We converted space at Southfields into two flats so that people preparing to leave the unit can practice their independent living skills
- Trained support staff in hospitals, ambulance and community services so that they can recognise mental health problems in older people
- Expanded our psychiatric liaison services in the Queen Alexandra Hospital Portsmouth and hospitals in Southampton and Winchester giving faster access to psychiatric care
- Opened a third ward at Bluebird House for young people who need care in a secure setting
- Completed the transfer of services provided in the Tom Rudd unit to the provision of services in the community with the support of community mental health teams

signposting people to voluntary services and our iTalk service, which provides improved access to psychological therapies. We deliver this service in partnership with Solent Mind.

If people require more care after the initial 12 week period, this will be provided by the **Community Treatment Team**. These teams are located throughout Hampshire, and offer longer-term treatments and interventions in people's homes or at local clinics.

We also provide care to people who are acutely unwell, but still in their own community, through our **Hospital at Home (H@H)** service. The purpose of this service is to provide intensive support to people to prevent the need for a hospital admission. Working closely with our psychiatric hospitals, the H@H team also makes sure that people who are ready for discharge are carefully supported back into their homes, or that suitable accommodation is found quickly.



Our goals

2012/13

- Conclude our Implementing Recovery Through Organisational Change (ImRoc) pilot continuing with our work to change our culture so that we better recognise the experience of service users
- Continue our programme to transform our adult mental health and older people's mental health services expanding our capacity in the community and reducing the need for hospital beds
- Provide greater access to iTalk, our Improving Access to Psychological Therapies (IAPT) service supporting people with mild to moderate mental health needs (for example, anxiety and depression) as well as expanding our range of interventions in line with the national plan
- In 2011/12 we successfully piloted an intensive support service in the New Forest, giving access to therapies in a community setting. During the pilot we supported in excess of 120 people in the community and we will now expand this service across a wider area
- Establish a new community team, providing services for people who have offended, are likely to offend or who have come into contact with the criminal justice system
- Expand our specialised services to include services for people with acute mental health problems who need a secure setting
- Further improve access to specialist assessment and treatment services for people with early memory loss
- Our mental health services will continue to seek opportunities to work more closely with partner organisations and other healthcare professionals, a good example being our plans to work with health visitors to identify mental health need
- Increase the work we do with partner organisations, such as organisations in the voluntary sector, to coordinate support for older people with physical frailty and complex mental health needs allowing them to remain independent

Learning Disability Services

We specialise in offering care that is tailored to the individual, making sure that their unique needs are met and enabling them to be as aspirational and independent as possible. In addition to working with people in their homes and communities, we have a number of specialist low secure settings to help people with complex needs and challenging behaviour who have been involved in the criminal justice system.



We will provide specialist learning disability services that are tailored to the individual, making sure that their unique needs are met and enabling them to be as aspirational and independent as possible.

We intend to expand our learning disability services beyond Hampshire so that they are more sustainable and cost effective and so we can improve the care provided even further. We will continue the work we have started to promote independence and provide more care at home rather than in inpatient units, although these will always be available when needed.

We provide high quality assessment and treatment by specialist learning disability health professionals and we will continue to develop these services to enable other health professionals, such as general practitioners to work more effectively with people with learning disabilities. In 2012/13 we will continue to develop our acute in-reach service, providing intensive support for people with learning disabilities who are in hospital. We will also develop our autism services.

We will extend our Seamless Solutions service which gives ongoing support to patients and service users and puts them at the centre of care tailored to their individual needs. This approach also helps people “step down” to lower levels of health and social care support. Seamless Solutions was developed collaboratively with patients, service users and their carers and has been recognised as a model of best practice which we are now using to support people with some of the most complex needs.

In March 2012 we were announced as the preferred NHS Trust to integrate our learning disability services with Oxfordshire Learning Disabilities Trust, also known as the Ridgeway Partnership. We expect this integration to be completed by the end of 2012. This will transform our learning disabilities service, doubling it in size, extending our geographical reach and giving us the opportunity to become recognised as a world leader in learning disability services. Find out more on page 24.

Our new assessment and treatment centre

In June 2012 we will open a new, state of the art assessment and treatment centre for people with a learning disability and behaviours which challenge.

The centre will have six beds and offer a highly specialised service to adults (male and female) who require assessment and treatment which cannot be provided in the community.

A multi-disciplinary team will work together in the assessment and treatment of those within the centre. The team will consist of nurses (including a 'behavioural specialist' nurse), psychiatrists, speech and language therapists, psychologists and occupational therapists.

The assessment process is designed to understand the specific needs of the individual. Assessment of the challenging behaviours uncovers the meaning of the behaviour, the causes, and possible treatments.

Treatment consist of two main strands. Firstly, meeting the needs of the service user; ensuring they are supported in the most effective way. Secondly, reducing behaviours which challenge by developing an alternative range of behaviours and skills for the person.

To help with treatment, we will create a 'sensory integration suite' which is designed to provide the best sensory environment to help reduce challenging behaviour. This suite can be transformed for each person that uses it.

The new assessment and treatment centre will operate 24 hours a day, and accept referrals from care providers and local authorities across Hampshire and beyond.



What we achieved (2011/12)

- Implemented the 'triangle of care' model which gives increased access for people with a learning disability to general health services, maximising the time our learning disability professionals can spend supporting service users. This model of care educates and raises awareness of learning disabilities amongst other healthcare professionals. A good example of this is the support given by our learning disability nurses to general practitioners which has resulted in improved access to smear tests
- Trained our clinical staff in new interventions keeping their practice skills up to date. This includes the training of some of our nurses on a new tool for the assessment of people with a learning disability who also have mental health needs
- Established an intensive support service for people with a learning disability whose behaviour is challenging, so that they have other options beyond admission as an inpatient
- Developed a new screening and diagnostic service to identify people with a learning disability and autism

Our goals (2012/13)

- Work with Ridgeway to ensure that we integrate our learning disabilities service in Hampshire with theirs in Oxfordshire, Buckinghamshire, Wiltshire, Dorset and beyond. We will work to realise the benefits of working in partnership, offering an excellent learning disabilities service across southern England
- Further increase service user and carer involvement in making plans for their services. This will include encouraging people to attend existing local involvement groups, holding a user-led conference and getting feedback on the information we provide through workshops and story telling
- Open our new assessment and treatment service to people with a learning disability and behaviours which challenge
- We will redesign our autism service to include adults with Attention Deficit Hyperactivity Disorder
- Make our new sensory integration facilities in our assessment and treatment centre available to day patients. Sessions will be supported by qualified occupational therapists.

Social Care Services



TQtwentyone, the part of Southern Health which provides social care services, supports people to live independent and fulfilling lives. We provide social care services to people with a learning disability or mental health needs. TQtwentyone supports nearly 400 people across Hampshire and the Isle of Wight providing domiciliary care, supported living, tenancy support, holidays and short breaks, day opportunities and specialist residential care.

We will offer a growing range of social care services that enable individuals to remain independent and supported in their community.

We will continue to work with the people we support, their relatives and carers to improve our services and build our reputation for providing care that is tailored to an individual's needs. We want to be an organisation that is leading on providing personalised care, ensuring our service is responsive to the needs of the increasing number of people purchasing their own services.

We will offer ever better value for money making sure that our prices are always competitive in the social care market. We are always looking for ways to operate more efficiently and we recognise that managing and building our workforce is central to this. Our front line staff are at the heart of providing quality care and a stable workforce means people who use our services are supported by staff they know and trust. We have nearly eradicated the use of agency staff (currently less than 1%) and we will continue to focus on the wellbeing of our staff further reducing sickness levels.

In March 2012 we were announced as the preferred NHS Trust to integrate with Oxfordshire Learning Disability Trust, also known as The Ridgeway Partnership. This will transform our business and will be the focus of our growth in 2012/13 but we are also investigating opportunities to offer our services to other people, such as older people and young people moving from children's to adult services. Find out more about our integration with the Ridgeway Partnership on page 24.

Our service user charter

Working closely with our Service User Reference Forum (SURF), we launched our service user charter at the end of 2011.

The charter outlines what people can expect from our service and is written in a way that can be understood by our service users.

We will:

- Offer you a personalised service
- Tell you how much it will cost
- Respond to your queries within two working days
- Ensure your Support Worker is trained
- Make sure your Support Worker can understand you and that you can understand them
- Provide you with a Support Worker who is police checked
- Ask you for your ideas
- Share our inspection reports with you.

We won't:

- Share your information with other organisations without talking to you
- Leave you unsupported when your Support Worker is on holiday or sick
- Charge you for things you have not asked for
- Send strangers to your home.



What we achieved (2011/12)

- Launched the TQtwentyone charter, our promise to people supported by TQtwentyone
- Established a social care mental health re-ablement service at Crowlin House, supporting people to regain skills they have lost due to an illness or accident.
- Helped 41 people to move from NHS accommodation to their own homes in the community with ongoing support from TQtwentyone.
- Succeeded in winning the opportunity to provide services in Southampton and the Isle of Wight
- Supported an increasing number of people to purchase services from us with a personalised budget
- Turnover grew by 9% in 2011/12 as we increased the number of services that we provide to the people we support.

Our goals (2012/13)

- Work in partnership with Ridgeway to ensure we offer excellent social care services at a competitive price across Hampshire, Oxfordshire, Buckinghamshire, Wiltshire, Dorset and beyond.
- Ask the people that we support how we can improve our services so that we can move our measure of service user satisfaction from 93% to 95%.
- Increase our re-ablement services (supporting people to regain skills lost due to illness or accident) to include people with physical health needs, older people with mental health needs and young people moving from children's to adult services
- Support the remaining people who live in NHS accommodation to move into their new homes in the community
- Increase the number of people who purchase their domiciliary care directly from us to 30%
- Continue to realise the benefits of being part of Southern Health, focussing on the social care opportunities that come from working with colleagues in Community Care and our Older People's Mental Health services
- Expand into new social care markets where this growth supports our strategic objectives. We will consider opportunities in a number of potential markets including services for the old and frail and services for young people who have been involved in the criminal justice system.

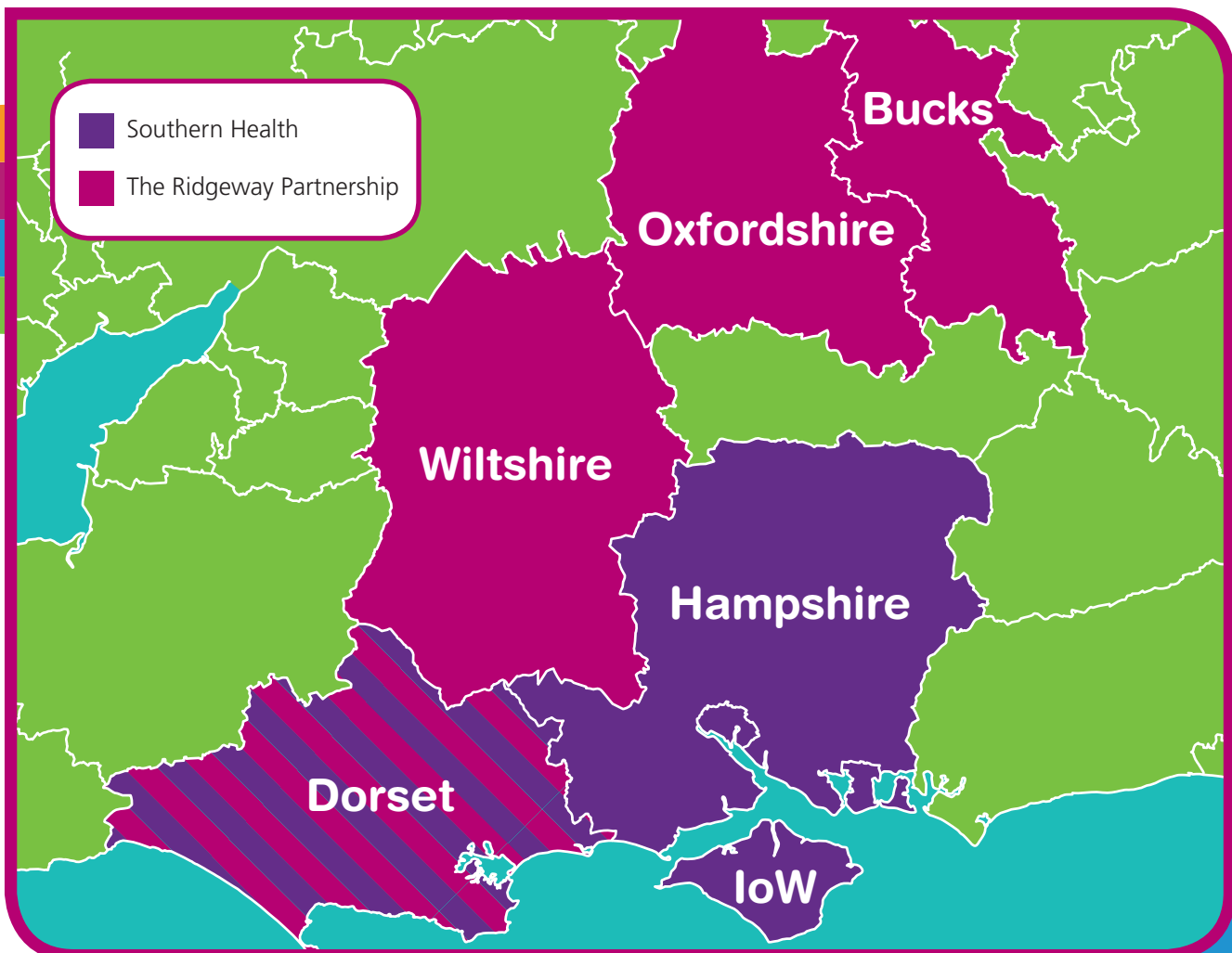
We will expand our learning disability and social care services through integration with Oxfordshire Learning Disability NHS Trust, also known as the Ridgeway Partnership.

“I am delighted that we have been chosen as the preferred bidder for the Ridgeway services. Over the past six months, we have met with service users, staff, carers and learning disability support organisations, and we have been so impressed with Ridgeway’s commitment and energy in developing truly patient-focused services. This is precisely what Southern Health believes in and stands for and my Board and senior teams cannot wait to start work on bringing these important learning disability and social care services together for the benefits of service users and patients.”

Katrina Percy
Chief Executive of Southern Health

The Ridgeway Partnership provides health and social care services to people with learning disabilities within Oxfordshire, Buckinghamshire, Wiltshire and Dorset. The Trust has approximately 1,200 staff who support over 3,300 people with learning disabilities, their families and carers. Integration with the Ridgeway Partnership supports one of Southern Health’s objectives of growing business where it means the Trust can deliver better outcomes, better patient experience and be more efficient.

The partnership between Southern Health and the Ridgeway Partnership brings a number of benefits including the opportunity to become a world leader in the delivery of learning disability services. Our combined organisations will have a unique user led research and development capability and the ability to influence learning disability policy at a national and local level. The partnership also means our combined learning disability services will become more efficient in the long term as we can save money by sharing support services.



World class learning disability services

The Ridgeway Partnership specialises in providing services for adults with moderate to severe learning disabilities, but also provides services to people with milder disabilities as well as community based services for children. Combining our services will enhance the quality of health and social care provided to people with learning disabilities across southern England. We will do this through combining the best of our services and realising the benefits of becoming a single organisation.

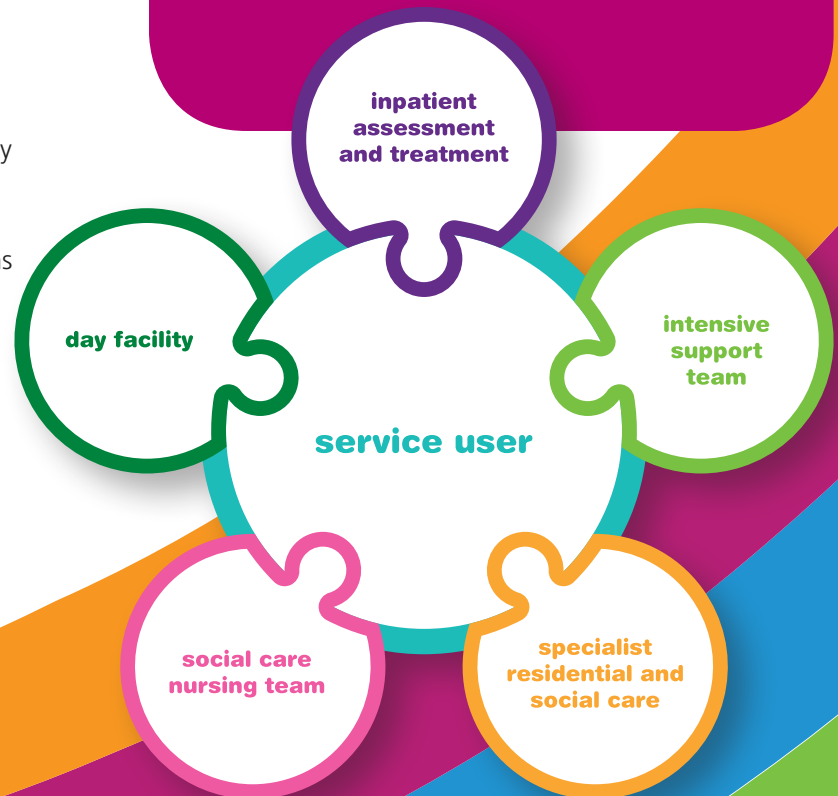
Service users will benefit from:

- Access to a wider range of services
- Redesigned services which wherever possible move care out of hospitals and into the community
- A full forensic service, for people who have offended, are likely to offend or who have come into contact with the criminal justice system, across the region
- Improved access to specialist social care support
- A user-led research and development facility to promote developments in supporting people with learning disabilities
- Increased influence with other organisations and bodies providing learning disabilities support to our service users
- A louder voice for people with learning disabilities

Seamless healthcare provision

Southern Health has developed a Seamless Solutions service which gives ongoing support to patients and service users and puts them at the centre of care tailored to their individual needs. This approach also helps people 'step down' to lower levels of health and social care support.

Health and social care packages are designed by the individual and an intensive support team, offering choice to the individual of what treatment they receive, when it is delivered, where they are treated and who delivers the care. To do this we work with all of the health and social care providers concerned with treating an individual. We will make this service available to all of our service users with learning disabilities.



The background features several vertical lines in various colors: pink, green, orange, light green, teal, yellow, and purple. Overlaid on these are several large, overlapping shapes: a teal shape at the top left containing text, a large orange shape at the bottom left, a green shape on the right side, and a pink shape at the bottom right.

Meeting the highest standards of quality and safety

(and doing it efficiently)

Southern Health is committed to using evidence as the basis for improving care. By this we mean using research and a focus on outcomes to improve the effectiveness of our services for patients and service users.

Research is an essential part of our organisation and we want to offer patients and service users the opportunity to take part in this research. Research underpins our work on clinical outcomes, helping us to identify those that matter to our patients and service users. Outcomes can also show our staff how the work they do improves the lives of the people they care for.

Finally, our work on customer standards and experience is an essential way for us to get feedback on our care from those who matter the most, the people we serve.



We will constantly check whether standards are being achieved and where we find room for improvement in the quality or safety of our services, we will act swiftly and decisively to make things better.

In 2011/12, through a combination of external review and our own internal assessments we identified that the quality and safety of some aspects of our services needed to be improved. During 2011/12 Southern Health was inspected by the Care Quality Commission (CQC) and these inspections identified that we were not meeting some essential standards. These findings and our own assessment of our assurance processes led to our Monitor Governance Rating moving from Amber/Green to Amber/Red.

We immediately established a Quality Assurance and Improvement programme reporting to our Assurance Committee and Board. The programme focussed on the following:

- Responding to CQC findings and agreeing action plans to address their concerns
- Collation and triangulation of a wide range of quality and safety information
- Co-ordination of all improvement activity arising from concerns
- A programme of unannounced visits by a dedicated inspection team with independent representatives (mock CQC inspections)
- Identification of leadership development requirements
- Cultural change to promote internal whistle blowing where staff have concerns

We tackled the immediate issues quickly and effectively and we are now working to strengthen our governance systems. We retained Deloitte to undertake an independent quality assurance review, they reported in March 2012 and a new quality governance framework is now in place.

We will continue our Quality Assurance and Improvement programme into 2012/13 and by June our mock CQC inspection programme will have conducted un-announced visits across all of our services. We will embed learning from this programme and we will further develop new quality and governance processes.

At the end of 2011/12, our Monitor Governance Rating was Amber/Green. Ensuring that all of our services are operating to the high standards that we, our patients and service users and our commissioners would expect is our highest priority.

Research

We believe that research is a critical component of a successful NHS provider organisation and we have a number of on-going trials, both at a local and international level. In general, research trials are used to help us to understand how to diagnose, treat, cure or prevent disease and illness. This may involve comparing existing treatments or looking at new ones. They are important to ensure that the best advice and treatments are being provided to patients. Most importantly, clinical research is the key to improving patient care.

- The Memory Assessment & Research Centre (MARC) runs research trials into dementia. At the moment, all of the trials we run are looking into Alzheimer's. The majority of these trials are investigating the effectiveness of new drug treatments, although some trials look at other aspects associated with Alzheimer's such as depression and sickness behaviour. MARC is one of the leading centres in Europe for dementia research: Dr David Wilkinson and Professor Clive Holmes are internationally renowned for their expertise in this area.
- Southern Health also hosts the south coast Dementias & Neurodegenerative Diseases Research Network (DeNDRoN) one of seven local research networks which are placed throughout the UK. DeNDRoN carries out research and clinical trials into dementias (including Alzheimer's disease), Parkinson's disease, Huntington's disease and Motor Neurone disease.

The Southern Health research team supports research in a number of disease areas. In the past our main focus was upon mental health research but we are developing research into more community based care, such as continence care, leg ulcer care, and evaluations of our integrated community services.

We will measure our success by the improvements we make to the clinical outcomes and experience of our patients and service users, their carers and families.

There are many measures used in the NHS to assess the performance of NHS organisations and the impact of care upon our patients and service users. In the past, these have tended to focus upon activity or processes, for example how often does a nurse provide a particular treatment. These measures do not always relate to what matters to patients, services users and their carers or families.

We are working to change the way we look at the care we provide by looking at outcome-focused measurement. What this would mean is rather than focus upon a specific piece of care provided, for example a leg ulcer dressing, we want to shift the emphasis to what we want to achieve for that patient, for example rapid healing of ulcers to maximise function and improve quality of life.

We will continue to use the measures and indicators we have to provide to our regulators and commissioners, as these ensure we are providing a safe, reliable service. However, we will use these along side other information so that we have a better picture of how the care we provide relates to outcomes.

- Input from Governors by area
- Service user forums
- Annual quality survey
- User involvement groups
- Service user experience surveys
- Focus groups for indepth feedback
- Carer surveys
- Staff surveys
- Safety data
- Clinical audit data
- Compliments, complaints, concerns
- Customer service standards



Outcomes & Experience

Patient & Service User Experience Survey

- I felt involved in decisions about my care
- I was provided with enough support to help me manage my own health
- I was provided with useful and relevant information
- Staff were aware of and understanding of my needs as an individual
- My family/carer/partner was given enough support by the service
- Treatment/care was provided at a time convenient for me/my carer
- I was given enough privacy when discussing my condition and treatment
- I was treated with dignity and respect by staff
- Staff were friendly and approachable
- Staff were well-presented and wearing ID badges
- I know how to get in contact if I have worries or concerns
- Overall service rating

- Overall service rating
- I know how to get in contact if I have worries or concerns
- Staff were well-presented and wearing ID badges
- Staff were friendly and approachable

Tell us how we're doing

In order to measure how well we are doing, or identify areas where we need to improve, we have introduced patient and service user experience surveys across our services. We have ensured a number of questions are common across all of our services, so that we can know how we are doing as an organisation. These questions are based on national evidence and local workshops.

We are making it as easy as possible for patients and service users to provide feedback including Freepost mail surveys, web-based surveys, interactive symbol surveys (important for adults with learning disabilities), workshops with groups of service users and service users themselves collecting information from each other.

We are also working to make sure we obtain feedback from a wide range of sources on the different aspects of the services we provide. This may be cleanliness in an inpatient unit or the provision of specialist equipment by a particular service, for example occupational therapy. With the broadest possible feedback on our services we will be able to constantly improve the quality of the care we provide.

We will work efficiently and innovatively to deliver our services within our agreed budget without compromising on quality or safety.

It's a tough economic period for the UK and the NHS is no exception. It is important that we manage the funding that we are given by our commissioners carefully, delivering value for money and safe high quality care. Monitor, the Foundation Trust regulator, expects all Trusts to be financially healthy organisations. We will work efficiently and innovatively to deliver our services within our agreed budget.

We are regulated against a set of guidelines which tell us what we have to do to remain a Foundation Trust. This includes making sure we have a planned level of surplus at the end of each year. We are planning to reach a surplus of £4.8m at the end of 2012/13 and £6.4m by the end of both 2013/14 and 2014/15. By achieving this we will be able to:

- Re-invest in services in order to continually improve the quality of care provided
- Manage any financial risk (especially in the current economic climate)

- Assure our Board, governors, members and the local community that we are keeping our Foundation Trust status

One of the ways that we plan to re-invest in services is by improving the way we use new technologies. We use a range of technologies including specialist telehealth technology which allows patients and service users to be monitored in their own homes. We are also increasing the number of our staff with mobile technology, allowing them to spend more time caring for people in the community. We continually invest in the premises where patients and service users are cared for so that they are safe and have the best possible environment for their care.

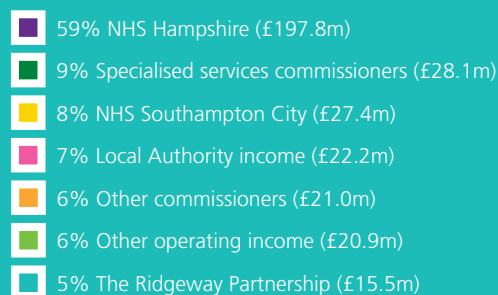
Our financial plans show how we will manage our money during this tough economic period, delivering cost savings of 4% year-on-year, and maintaining a Monitor Financial Risk Rating of at least 3. Monitor use the Financial Risk Rating to assess financial stability and viability, on a scale of 1 to 5, where 1 is high risk and 5 is low risk.

Where our money comes from...

Most of our income (74%) comes from three main organisations that are part of the Southampton, Hampshire, Isle of Wight and Portsmouth (SHIP) Primary Care Trust cluster:

- NHS Hampshire
- NHS Southampton City
- Specialised Services Commissioners (a group of Primary Care Trusts within the South of England Strategic Health Authority who buy specialist health services).

The way services are commissioned will be changing in 2012/13 with Clinical Commissioning Groups, led by General Practitioners, increasingly commissioning the services we provide. There will also be a national NHS Commissioning Board, which will oversee all of the commissioning arrangements and will lead on the commissioning of the more specialised services we provide in mental health.





...and how we spend it.

Our services are provided by Divisions that focus on meeting the needs of specific groups of patients and service users. The diagram shows how we plan to spend our money over the coming year by Division.

For more details of how our money has been spent in the past, our Annual Report and Accounts can be viewed on our website, www.southernhealth.nhs.uk



- 24% Adult Community services (£80.1m)
- 18% Adult Mental Health services (£61.0m)
- 13% Capital charges and premises costs (£42.4m)
- 9% Social Care (Twentyone) (£28.6m)
- 8% Corporate services (£27.7m)
- 8% Learning Disability services (£26.0m)
- 8% Older People's Mental Health services (£24.9m)
- 7% Specialised Mental Health services (£22.0m)
- 5% Children's Community services (£15.4m)

The background features a vibrant, abstract composition of overlapping shapes and lines. A large teal shape is in the upper left, a green shape is in the upper right, and a pink shape is on the right side. A large orange shape in the lower left contains the text. Several thin, vertical lines in various colors (pink, green, orange, teal, yellow, purple) extend from the top to the bottom of the page, some overlapping the larger shapes.

Developing our people

We will invest in leadership at all levels in our organisation so that we are ready to meet the challenges we face.

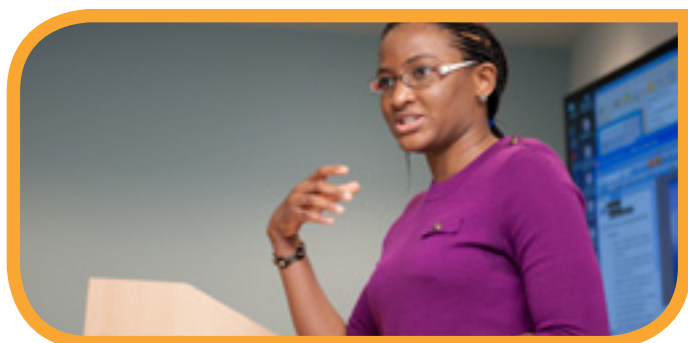
We recognise that our workforce is the key to delivering high quality, outcome focused health and social care services. We will ensure that our staff are informed, empowered, competent, confident, accountable and supported so that they have the capacity and capability to deliver safe, high quality care.

We are committed to leadership development and see this as a key strength of our organisation. We are investing in leadership development at all levels in the Trust including the Board, the Executive Team, the Directors of our services, senior clinicians and team leaders to ensure that all are able to meet the challenges they face.

We have initiated leadership development programmes for our executive team and in 2011/12 thirty six of our divisional, clinical and associate directors attended our Leadership Development Centre. By the end of May 2012 over seven hundred managers will have completed our new appraisal training. In 2012/13 we will run an eight day leadership development programme for three hundred and fifty of our managers and we will expand our coaching programme for managers at all levels in the organisation.

Our aims are to:

- find and create the leaders of the future
- embed leadership qualities to deliver better patient and service user outcomes
- develop the capability of our leadership population to deliver key objectives
- ensure all leadership development activity is aligned to our goals
- give the support required to ensure our leaders can perform



We will recognise, nurture and reward the most talented employees, as they are our champions for improving services.

Inspiring and nurturing talent is at the centre of our approach to people development. We will identify and 'fast-track' those members of staff with the greatest potential to develop and contribute to improving the services that we provide.

We will provide in depth feedback to individuals and create development plans, establishing where talent lies and where personal development needs exist. Strong talent management will lead to greater workforce productivity, and will support recruitment and retention of staff.

Valuing achievement and driving innovation are two of the Trust's core values and we recognise the importance of rewarding and recognising the contribution made by staff. The Star Awards celebrates success and acknowledges individual and team contributions.

We will continue to develop our approach to managing talent recognising those who have made a positive impact on the quality of patient and service user care.



Meet our staff

Lesley Munro

Lesley is Area Director for Community Services in South East Hampshire and has worked in the NHS for all of her career. After 13 years in an acute hospital Lesley joined Southern Health and quickly identified that she needed career development support to achieve her goals.

"It was only when I moved to Southern Health that I began to truly realise my potential. Until this point no-one had really given me meaningful feedback and as one of Southern Health's core values is developing talent I had an opportunity to work with a coach"

Lesley has transformed community services in South East Hampshire by implementing a new workforce model, developing rapid assessment services and she is currently piloting integrated working across primary, acute and social care. Lesley is now passionate about coaching and embedding its use across the organisation.

"I believe over the next 1-2 years we need to challenge ourselves to truly realise the potential in our staff and colleagues who might be internal, external, commissioners or providers".

Renee Lima

Renee joined Southern Health in 2010 as an apprentice and completed an advanced apprenticeship in business and administration. With the changes in NHS workforce requirements we recognised the need to increase the number of staff completing Foundation Degree and Apprenticeships and in August 2011 Renee was appointed into a full time role in our Learning, Education and Development department to help support other potential candidates who are completing apprenticeships.

"A key part of my role is to share my experience and in time I hope to act as a mentor to newly recruited apprentices".

In December 2011 Renee achieved a teaching qualification 'Preparing to Teach in Lifelong Learning' and is now studying for two Open University modules in Business, her aim being to complete a degree in Business.

We will develop our staff so that they have the right training and skills to always deliver safe and high quality care.

We have carefully considered the types, skills and capabilities of our people in order to deliver the goals of the Trust. We will develop our workforce so that we have the right number of people equipped with the skills and competencies they need to deliver improved clinical outcomes and patient experience.

We must always ensure staff training meets statutory requirements and this is complemented with tailored packages of training, including training for our clinical specialists. We will always ensure that training provides a sound framework within which we can meet and excel in the standards required by the Care Quality Commission and other regulators.

We will continue to develop innovative ways of delivering training to our staff, including the use of online learning, e-assessment and mobile applications to minimise the time spent away from providing care to our patients and service users. We are increasingly using competency based assessment when we recruit people in order to select those most likely to impact on the quality of care and our operational performance.

We work closely with our local higher education institutions to influence the way in which professional trainees of the future learn and we are developing our own foundation degree course with modules on community care and learning disabilities.



Carol Barnard

Carol is the Clinical Manager of Hollybank, which is an Adult Mental Health Recovery Unit based in Havant. The unit has twenty staff and offers support to service users, helping them to take greater control of their lives. Carol was one of the first managers to attend the new appraisal training.

“The new appraisal training day for managers was by far the best training I have attended for some time. It was interactive, engaging and very user friendly.

I have started appraising my team and found the system very much more meaningful as it allows me to have the sometimes difficult conversations in a supportive and focused way, whilst still enabling personal development. I particularly like the way the unit’s objectives are cascaded down through the team to give a more meaningful and unified approach.

All staff so far appraised have commented on how much more included and involved they feel with clear objectives for the future.”

Fiona Holdcroft

Fiona works as an Outpatient Physiotherapist based at Chase Hospital, Bordon. Fiona assesses musculoskeletal patients using a wide range of treatment techniques, including exercise and electrotherapy, to support general and post operative rehabilitation.

In April 2011 Fiona began the first year of a three year Masters in Advanced Physiotherapy (Neuromusculoskeletal) with the University of Hertfordshire.

“The course has provided me with advanced skills and knowledge in neuromusculoskeletal physiotherapy which is based on the current best available evidence. This has helped me to undertake specialised outpatient physiotherapy assessments and develop a comprehensive management plan to promote patient recovery, close to the patient’s home, within the shortest possible time frames”.

An abstract graphic design featuring several large, overlapping, rounded shapes in teal, orange, green, and pink. These shapes are connected by thin, vertical lines of various colors (pink, green, orange, teal, yellow, purple) that extend from the bottom of the page. The overall style is modern and vibrant.

Developing our organisation

We will improve the way we communicate and involve the people we care for, our staff and all other groups who are affected by what we do.

Our aim is to maximise the involvement of our stakeholders in what we do and how we do it. We will do this by improving the way we communicate and engage with our patients, service users, carers, our staff and the public. We will make it easy for people to give their opinions, and we promise to listen, act upon feedback, and where we make changes we will make sure they have worked.

The Trust takes very seriously its role in involving patients and service users in the development of the organisation and ensuring they have every opportunity to have a say in their care. We value the views of those using our services when taking decisions about how services are developed. We also recognise the importance of the views of carers and families.

We encourage patients and service users to share their views through stakeholder groups. In older adult mental health services, we have invited patients and carers to attend listening events ahead of formal consultation so we can be sensitive to their needs and wishes. This highlighted an important concern about the implications of service moves on travel, and we have been able to address this ahead of the formal consultation period.

Service user involvement is particularly important in learning disability and social care services where our aim is to enable people to live independently, so their decision making is central to making this happen. We encourage patients and service users to sit on working groups, and participate on interview panels for staff recruitment. Recognising the importance of good physical health and mental health we also support a service user football team and publicise and promote their activity to help combat stigma in society.

Members and Governors

Governors represent the views of our 17,500 members and are able to participate in the work of the Trust in a variety of ways, from taking part in mock-CQC inspections, to involvement in the appointment process for the new Chair. We have also formed a Communications Advisory Group to work with the Communications team to improve the quality of our written materials by using straightforward and accessible language.

Governors have been involved in our planning for the year ahead, by sharing their views and helping us shape our priorities. We hold Constituency days to enable Governors and Members to meet with executives and clinicians and raise any queries or concerns they might have. Council of Governors' meetings are public meetings in the interests of openness and transparency.

Southern Health online

We will launch a new website in April 2012 which will include more information about our services and have a more accessible design and layout. Staff, patients and service users were asked to contribute to this redesign by commenting on what could be improved about the current website and testing some of the new features for ease of use. Their contribution will assist in having a website which is built to meet the needs of those who use it, ensuring it meets their high expectations.



We will make sure that our premises are all safe, pleasant and appropriate for the delivery of care.

It is important that we provide our services from premises which are safe, in good condition, well designed and that support delivery of high quality care. We also recognise the therapeutic benefits of good quality premises which are pleasant to be in.

After the merger of Hampshire Partnership NHS Foundation Trust and Hampshire Community Healthcare Care we initiated a full review of our estate. We quickly established that we needed to improve the quality of a number of our community premises and that there was the opportunity to reconfigure and rationalise our estate to improve access for our patients and service users and give better value for money. At the end of 2011/12 we agreed a plan to realise these benefits and we will work to deliver this plan from 2012/13 onwards.

Managing and developing our sites

Our premises must provide us with value for money which means they must be run as economically as possible and be in the right place. We must also ensure that we comply with relevant regulatory requirements including healthcare standards and codes of practice.

The NHS Estates Strategy Guidance provides a framework to measure the performance of important aspects of our estate. Currently, approximately 15% of our estate falls below these standards and our aim is that all of our premises are rated B (with A being a new premise) as a minimum and are fully utilised.

We also have a consistent approach towards energy efficiency across our premises and review the energy efficiency of buildings to ensure they are operating to modern standards. We are committed to minimising our environmental impact and reducing carbon emissions wherever possible and have adopted a 2.5% per annum carbon reduction target in addition to an overall 10% reduction target by 2015/16 as recommended by the NHS.

We operate from

172

buildings

spread across 156 sites comprising community hospitals, health centres, mental health and learning disabilities specialist inpatient units, community inpatient units and social care locations.

We have adopted a

carbon reduction

target of

2.5%

per year

together with an overall reduction target of

10% by 2015.

Our hub and spoke model

The Trust has developed a hub and spoke model to support the increasing integration of community and mental health services. This model will enable us to be flexible about where services are located and will support patients and service users to remain more independent in their communities.

Many clinical services are provided in people's homes or in GP surgeries, village halls or health centres. Our approach means services are organised around local communities and are supported by local administrative hubs in or near to the communities that we serve. Area hubs support delivery of services across a number of localities and we also deliver some services across the whole of Hampshire.

This model enables us to be flexible in the way we provide our services. If a need is identified for a new service in an area not already covered another 'spoke' can be added and supported by an existing hub without disruption to services in other areas. We want all our hubs to be easily accessible and our aim is to provide our services within 15 minutes drive of 80% of the people needing them.

3

Spokes

Community teams working in local 'spokes' with primary care colleagues.



2

Local Hub

A vibrant hub for the local community providing a range of co-located health & social care services, provided by a mix of public, private and voluntary sector partners.

1

Area Hub

More specialist diagnostics, specialist clinics and specialist team locations.

We will improve our business skills so that we can operate successfully in a more commercial 'health economy'.

Health and social care is changing. Developments in the health and social care economy are driving increased competition and collaboration and Southern Health is responding to both.

The Health and Social Care Act 2012 and a number of other initiatives are driving a more commercial environment for health and social care services. These changes include:

- A much tighter financial environment which is driving commissioners to demand changes in the way care is paid for and delivered, including reducing the numbers of patients being treated in hospitals and moving that care into the community
- A new commissioning structure in which general practitioners are taking a leading role in specifying and purchasing care on behalf of their patients and service users. This will require us to work with many more commissioners, each requesting different types of services for their local populations
- A 'blurring' of the traditional separation between public and private sector organisations. The emergence of social enterprises in which NHS staff deliver NHS services through a private organisation is a good example of this. We have also seen the management of Hinchingsbrooke Hospital, an NHS hospital, transfer to Circle, a private sector organisation
- The introduction of initiatives such as Any Qualified Provider, in which any certified and approved organisation can compete to deliver specific services
- The introduction of a new payment currency in mental health services where we will be paid for each episode of care we deliver rather than being paid to support a population



Competition

Market-testing for services by commissioners has become the rule and as a result we are seeing increased involvement of the private sector in healthcare and greater competition amongst public sector organisations.

This is also changing the model of how services are delivered to one that is increasingly led by patients and service users. This means that we will need to market our services directly to patients and general practitioners.

How we are responding

- We are improving how we engage with stakeholders such as patients and commissioners so we can respond better to their concerns and aspirations
- We are working with commissioners to develop new pricing mechanisms for a number of our services
- We are reviewing how we market our services to patients and service users, general practitioners, commissioners and other stakeholders
- We are identifying which of our services deliver most value to patients and service users, allowing us to prioritise investments to the services which deliver the most benefit
- We are taking a more rigorous approach to identifying and prioritising those opportunities for which we will compete
- We have improved the way we bid for contracts so we can now compete against the very best
- We are developing a comprehensive training programme to improve commercial awareness across Southern Health

Collaboration

Advances in healthcare technologies and changes in the needs of our patients mean that healthcare is becoming more complex. An ageing population also means there are more patients with long term needs who require joined up care from a number of different providers. We are responding to increasing complexity by working in partnership with other providers so that more comprehensive services can be delivered to meet the needs of the individual.

Some of our partnerships:

- We are working with Portsmouth Hospitals NHS Trust and other providers in Portsmouth and south east Hampshire to deliver an innovative model of care for older people
- We have partnered with Solent MIND, a local charity, to improve access to psychological therapies through a joint service called iTalk
- We are exploring how we can work more closely with local out of hours services to improve information sharing and provide faster, easier access to our services



We will be innovative and invest in technology, wherever it will deliver better quality care in a more efficient way.

Delivery of high quality care by Southern Health is underpinned by the use of technology. We use a range of technologies including specialist equipment which supports the needs of patients and service users directly and every day most of our 8,000 staff use our systems to deliver services. We are committed to investing in technology in order to reduce costs, improve access to our services and ensure all our staff have the technology they need to support patients and service users in the community. In 2012/13, as part of a three year programme to introduce new ways of working, we will invest £4.8m in new technology.

Improvements for patients and service users

We plan to use technology to increase patient and service user participation, one way being the introduction of on-line anonymous feedback on the quality of our services and the experience of using them.

By autumn 2012 most patient records will be held electronically providing clinicians with up to date information for faster diagnosis and improved treatment or support. Where patients receive care from a number of organisations we are working to ensure that relevant information is accessible to all those who are involved in that care. We will always ensure that information is kept confidential and is only made available to those clinicians who are providing care to the patient or service user.

We are also introducing electronic booking which will improve access to our services by enabling patients and service users to book and change appointments more easily. This will include self check-in by patients and service users and the sending of important information by text message, such as appointment reminders.

Supporting staff

Southern Health is committed to ensuring that the amount of time staff have available to spend with patients and service users is maximised. To support this commitment clinical staff are being provided with laptop computers so that they can access patient records at the point of care. This technology will reduce travel time, administration, improve communications and give better value for money. This will be particularly helpful where patients are being treated in their own homes and clinical staff are able to access the Trust's electronic records remotely.

We also plan to increase the use of technology to support our learning and development programme by enabling eLearning, virtual classrooms and distance learning. We are supporting the development of on line training materials so that staff can access these when convenient and can record course completion and the attainment of standards.





Contact us

Telephone: 023 8087 4106

Email: communications@southernhealth.nhs.uk

Find us on Facebook at **southernhealthnhs**

Follow us on Twitter at **@southern_nhsft**

www.southernhealth.nhs.uk



Quality care, when and where you need it