Changing Lives

Our strategy to improve the lives of the people and communities we serve
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Our strategy

This strategy is named Changing Lives because everything we do is to help people improve their lives. We know this is what matters to our service users, carers, families, local communities and our passionate staff.

To achieve this we are focused on the quality of our services, but we cannot do this alone. We need to work in partnership with people and communities, make the trust a great place to work to attract and retain the very best people, maximise our ability to innovate, and deliver best value from all of our assets and resources.

As a large, diverse mental health trust providing local and national services, we aim to make a difference to lives by seeking excellence in all areas of mental health and wellbeing: prevention, care, recovery, education and research.
Our Changing Lives strategy sets out five strategic aims to steer our work:

1. **Quality:** we will get the basics right in every contact and keep improving what matters to service users
2. **Partnership:** we will work together with service users, their support networks and whole populations to realise their potential
3. **A great place to work:** we will value, support and develop our managers and staff
4. **Innovation:** we will strive to be at the forefront of what is possible, exploiting our unique strengths in research and development, with everyone involved and learning
5. **Value:** we will make the best use of our assets, resources, relationships and reputation to support the best quality outcomes

One fundamental shift that we want to make is to change the relationship with service users, carers and families at all levels. We have already made strong progress but we need to support both professionals and service users to take different roles and approaches that will help people change their lives. Our well-established five commitments to build trusting, mutual relationships set us on good course for this.

The Changing Lives strategy builds on our direction of travel, evolving from our previous strategy, but with stronger emphasis on consistent quality, continuous improvement and partnership in its different forms. The strategy is aligned with a wide range of partners - Clinical Commissioning Groups (CCGs), Local Authorities, Sustainability and Transformation Partnerships (STPs), South London Mental Health and Community Partnership (SLP), Healthy London Partnership, the Maudsley Charity, the Institute of Psychiatry, Psychology and Neuroscience (IoPPN) and King’s College London and will engage an increasingly wide range of partners such as schools, the housing sector, employers, the police, voluntary sector, community and faith groups.

**Next steps**

We will work with service users, staff and partners to consider the strategy, what it means for them and their contribution to implementing the strategy.

Implementation will have a strong emphasis on quality as our lead aim. Our Improvement Plan from Autumn 2018 to Spring 2019 will bring together multiple strands and kick start progress.

We will align our strategy with our operating plan for financial year 2019/2020 and 2020/2021 by working closely with our clinical teams, borough and community partners and the Institute of Psychiatry, Psychology and Neuroscience (IoPPN), King’s College London. This will involve co-developing our models of care in line with the evidence-based care, our priorities for specialist services and population services and approaches to quality improvement and use of digital to support transformation. It will be underpinned by benchmarking, local population profiling, needs analysis (local, regional, national) and work on population/clinical outcomes.

We will establish the leadership, training and development needs of our people and clarify our patient and public involvement priorities. This will be translated into specific borough and directorate objectives and specific objectives for the SLP.

Through this, we will identify key strategic investments and a high-level workforce strategy.
We are immensely grateful to our staff, service users and stakeholders for their insights in steering the direction of the trust.

How will we know we are on track? What matters to staff and service users?

**Increasing numbers of staff will say:**
- They feel trusted, listened to and valued at work and fairly treated.
- They are supported by their managers and senior managers are involved with their work at the frontline.
- They feel safe at work.
- They have the resources to deliver high quality care for service users - support, tools and training.
- They are supported to work in partnership with service users and carers.
- They are working collaboratively with others in primary care, community services, housing, social care and the voluntary and community sector.
- They have the chance to develop their potential, including through high quality education and training.
- They understand how their role fits in.
- They are able to improve the way they work in their team and contribute to improvements across services and the organisation. They feel empowered to influence change wherever they work.
- They feel involved in research and in putting evidence into practice, constantly learning and improving services.
- They are proud of the services and treatments the trust offers and the difference they make to service users.

**Increasing numbers of service users will say:**
- They get the right support as an individual to stay healthy and recover - in terms of both their physical and mental health.
- The support they receive helps them to build up their confidence and independence so they can lead high quality lives in their communities and don’t become dependent on services.
- They receive early support that helps them to avoid reaching crisis point.
- They are treated with dignity and respect if they experience mental health crisis.
- They feel well informed and comfortable to talk about mental health and wellbeing.
- They know where to go if they feel that they need support.
- They can choose support that they feel is suitable for them and their network from a range of different offers.
- They receive support which builds upon their strengths, abilities and aspirations.
- They can access education, apprenticeships, training and employment.
- They (and their support networks) feel respected as key partners in decision making.
- They feel that they have an active and equal role in the design and delivery of services.
- They spend less time in hospital and receive care at home and in the community.
- They are treated in facilities and environments that are clean, decent and therapeutic.
- They have a meaningful day-to-day role in society that suits them.
- They feel connected to and supported by other people in their community and networks.
- They have the opportunity to get involved in research and cutting edge services and treatments.
Our vision
Everything we do is to improve the lives of the people and communities we serve and to promote mental health and wellbeing for all - locally, nationally and internationally

Our mission
Seeking excellence in all mental health and wellbeing: prevention, care, recovery, education and research

Our strategic aims
1. Quality: we will get the basics right in every contact and keep improving what matters to service users
2. Partnership: we will work together with service users, their support networks and whole populations to realise their potential
3. A great place to work: we will value, support and develop our managers and staff
4. Innovation: we will strive to be at the forefront of what is possible, exploiting our unique strengths in research and development, with everyone involved and learning
5. Value: we will make the best use of our assets, resources, relationships and reputation to support the best quality outcomes

Our quality priorities
1. All patients will have access to the right care at the right time in the most appropriate setting
2. Within three years, we will routinely involve service users and carers in all aspects of service design, improvement and governance; and all aspects of planning and delivery of each individual’s care
3. Over the next three years, we will enable staff to experience improved satisfaction and joy at work
4. We will reduce violence by 50% over three years with the aim of reducing all types of restrictive practices

Our five commitments
We are committed to building trusting, mutual relationships with each other and with service users. Our commitments were developed with staff and checked with service users. They are:
1. I will be caring, kind and polite
2. I will be prompt and value your time
3. I will take time to listen to you
4. I will be honest and direct with you
5. I will do what I say I am going to do
About us

South London and Maudsley NHS Foundation Trust (SLaM) is a large and complex multi-site provider of mental health services - providing the widest range of specialist mental health services in the UK.

Local services
We provide local services to four diverse and vibrant south London boroughs, each characterised by high levels of deprivation and need. We aspire to help people stay well in the community and to help and support people to recover when in difficulty. We provide NHS care and treatment for people with mental health conditions. We also provide services for people who are addicted to drugs or alcohol.

Regional services
We are at the leading edge of integrated care for mental health, involved in the largest alliance contract in the country in Lambeth (comprising SLaM, Lambeth Council, Lambeth CCG and two voluntary sector housing and care providers), a second alliance providing care to the over 65s in Croydon, and working towards population scale partnership contracts in Lewisham and Southwark.

We work with Oxleas NHS Foundation Trust and SWLSG NHS Trust to collaborate to provide more sustainable healthcare in South London through the South London Mental Health and Community Partnership (SLP) formed in 2016. We now have the country’s largest mental health Global Digital Exemplar programme in our partnership with Oxleas and SWLSG and the chance to lead internationally on how digital technology can transform access to high quality, safe care.

National, specialist services
We also provide a wide range of high-quality, national specialist services for those with complex and intensive care mental health services - over 50 specialist services for children and adults across the UK. These include mother and baby services, eating disorders services, a National Psychosis Unit and National Autism Unit services. Some of our clinical and academic developments have international reach.

Research, education and training
The trust’s approach also reflects the mission of our Academic Health Sciences Centre, King’s Health Partners, to pioneer better health and well-being, locally and globally, through integrating excellence in research, education and training, and patient care.

We have an historic association with our close academic partner, the IoPPN, Europe’s largest centre for research in psychology and psychiatry and we have the highest research profile of any mental health trust in the UK, using the research to directly benefit those who use our services and influencing the development of evidence-based care locally, regionally and internationally.

Our National Institute for Health Research (NIHR) Maudsley Biomedical Research Centre illustrates the symbiotic partnership working between the trust and the IoPPN.

Our education and training has pioneered modern approaches (e.g. use of simulation) and we are launching Maudsley Learning to make a step change in our work as a lead provider producing and delivering the highest quality, internationally renowned education and training products in the field of mental health and wellbeing.

The independent Maudsley Charity backs better care, recovery and prevention of mental illness. It supports service users and families, clinical care teams and scientists who are working towards the common goal of improving mental health, and raises public awareness and understanding.
We provide:

- All age mental health services for people living in Croydon, Lambeth, Lewisham and Southwark
- Substance misuse services for residents of Bexley, Greenwich Lambeth and Wandsworth
- Specialist services for young people in Kent and Medway who require hospital admission for serious mental illness and outpatient treatment for adults with attention deficit hyperactivity disorder (ADHD)
- Primary care, secondary care and inpatient mental health services in HMP Wandsworth
- A range of mental health services internationally, in Europe and the Middle East
- Over 50 national specialist services for children and adults across the UK
- The largest mental health research and development portfolio in England
- An extensive range of education, training and learning opportunities – including the Recovery College and Mental Health Simulation Centre.

Adult national specialist services

Attention Deficit Hyperactivity Disorder (ADHD) and Autism Spectrum Disorder (ASD)
Affective Disorders Service
Anxiety Disorders Residential Unit
Brain Injury Service
Centre for Anxiety Disorders and Trauma
Chronic Fatigue Service
Complex Case Service (Addictions)
Depersonalisation Disorder Service
Eating Disorders Service
Female Hormone Clinic
Forensic Service
Neuropsychiatry Services
Older Adult Acute Care Unit
Older Adult Continuing Specialist Care Unit
Older Adult Early Intervention Memory Service
Perinatal Service
Psychiatric Intensive Care Unit

Child and Adolescent national specialist services

Adolescent At-risk & Forensic Service
Acorn Lodge Children’s Unit
Adoption and Fostering Service
Anxiety and Traumatic Stress Clinic
Autism and Related Disorders Service
Bethlem Adolescent Unit
Bipolar and Depression
Body Dysmorphic Disorder Service
Centre for Interventional Paediatric Psychopharmacology & Rare Diseases (CIPPRD)
Centre for Parent and Child Support
Chronic Fatigue Service
Conduct Problems Service
Dialectical Behaviour Therapy Service
Eating Disorders Service
Eating Disorders Training Programme
Helping Families Team
Forensic Mental Health Service
Kent and Medway Adolescent Unit
Mental Health of Learning Disabilities Service
Multisystemic Therapy (MST)
Neuropsychiatry Service
Obsessive Compulsive Disorder Service
Paediatric Liaison Service - St Thomas’ Hospital
Paediatric Liaison Service - King’s College Hospital
Service for Complex Autism & Associated Neurodevelopmental Disorders (SCAAND)
Snowfields Adolescent Unit
Supported Discharge Service
Our trust in numbers

- **230** Community, inpatient and outpatient services
- **786** Beds across 8 inpatient sites
- **74** Community sites
- **1.1 million** patient contacts each year
- **50** National services

One of **four** founder members of King’s Health Partners

**85%** would recommend us to friends and family

**96%** say they found staff to be kind and caring

**4,800** staff

Over **200** joint appointments with King’s College London

**1.1 million** patient contacts each year

**1st** mental health biomedical research centre

**2,669** white

**192** mixed

**317** Asian or Asian British

**1,211** Black or Black British

**213** other ethnic groups

**92** not stated

We serve a population of **1.3 million** people
The national picture

High and growing demand
- Half of all mental health problems have been established by the age of 14, rising to 75 per cent by the age of 24.
- One in four adults and one in 10 children experience mental illness, and many more of us know and care for people who do.
- One in six adults at anyone time are experiencing a common mental health problem such as anxiety or depression.
- Currently two-thirds of people with anxiety and depression access no treatment.
- One in five older people living in the community and 40 per cent of older people living in care homes are affected by depression.
- Nationally, one in five mothers suffers from mental health problems during pregnancy or in the first year after childbirth. Yet fewer than 15% of areas have the necessary perinatal mental health services and more than 40% provide none at all.
- More people in crisis are attending A&E and many wait more than 12 hours for treatment and up to 72 hours as less than 50% of emergency departments have mental health liaison teams.

According to The Adult Psychiatric Morbidity Survey (APMS):
- The prevalence of psychotic disorder is about 0.5% of the adult population.
- 0.8% of adults have autism spectrum disorder (ASD).
- For those aged 16 and older, over one in 10 (13.7%) have a personality disorder, with similar rates found for both men and women.
- About one third of adults in England report having experienced at least one traumatic event in their lifetime. Around, 4.4% of adults screened positively for PTSD.
- About 10% of adults screened positively for ADHD.
- In 2017 there were 5,821 suicides registered in the UK, an age-standardised rate of 10.1 deaths per 100,000 population. The National Suicide Prevention Strategy for England has included work to reduce the risk of suicide in high-risk groups. These include young and middle-aged men, people in the care of mental health services, and those in the criminal justice system.
- One in 15 people (7.3%) had self-harmed at some point in their life. This was higher in women (8.9%) than in men (5.7%).
- By 2030 there will be 2 million more adults in the UK with mental health problems than today.
- There are rapidly changing public expectations and behaviours around mental health.

Treating mental and physical health equally
People with mental health problems receive poorer physical health care and the average life expectancy for someone with a long-term mental health illness or learning disability is 15-20 years shorter than for someone without. Someone with serious mental illness is three times more likely to attend A&E and almost five times more likely to be admitted as an emergency. Thirty per cent of people with a long-term condition also suffer from poor mental health.
Government priorities

The Five Year Forward View for Mental Health sets out ambitions to:

- Achieve parity of esteem between physical and mental health across the life course.
- Provide access to good quality, integrated mental health care, wherever and whenever individuals are seen across the NHS.
- Tackle inequalities both at a local and national level.

Meeting the ambitions for the Five Year Forward View for Mental Health describes how the ambitions will be delivered:

- Establish services which are sustainable for the long-term across the health and care system.
- Deliver improved access to high-quality care, more integrated services and earlier interventions.
- Build capacity within community-based services to reduce demand and release capacity from the acute sector and inpatient beds – whilst in parallel moving the commissioning model for inpatient beds in mental health towards a more ‘place-based’ approach so that pathways and incentives are better aligned and efficiencies more readily realised.
- Coproduction with people with lived experience of services, their families and carers.
- Work in partnership with local public, private and voluntary sector organisations. Recognise the contributions of each to improving mental health and wellbeing.
- Identify needs and intervene at the earliest appropriate opportunity to reduce the likelihood of escalation and distress and support recovery.
- Design and deliver person-centred care, underpinned by evidence, which supports people to lead fuller, happier lives.
- Outcome-focused, intelligent and data-driven commissioning.

Immediate priorities for service redesign:

- Increase access to specialist perinatal care in hospitals and in the community.
- Reduce the number of out of area placements for children, young people and adults through the provision of more care closer to and at home.
- Increase access to crisis care liaison services in emergency departments and inpatient wards.
- Suicide prevention.

The mental health workforce plan for England describes how the mental health workforce will be developed to address shortages and meet the needs...
The local picture

The boroughs we serve are wonderfully diverse and vibrant with a wealth of strong community assets and a strong sense of local identity. This contributes positively to the mental health and wellbeing of residents.

However, the risk of poor mental health is particularly high in our four boroughs which are some of the most deprived in London and the UK (among the 20% most deprived areas in England).

Rates of mental illness are higher than England and London. There is a greater need for both psychiatric services (approximately 20-55% higher than England across the boroughs) and higher prevalence of common mental health issues than London and England averages. The economic downturn has affected disadvantaged communities the most and we are seeing this played out in the demand for our services.

Premature death and differences in life expectancy are both significant issues. In south London serious mental illness reduces a person’s life expectancy by 15-20 years.
The local picture

It is a challenging environment in terms of financial resources available to commissioners. Each of our Clinical Commissioning Groups (CCGs) is committed to mental health as a high priority and recognise the historic challenges e.g. all the boroughs served by the trust are in the bottom quintile in the country for resourcing mental health per 100,000 weighted population. Bed stock and community investment per 100,000 weighted population is also in the lowest quintile for the country. However, our CCGs are committed to meeting the Mental Health Investment Standard (MHIS) and investing in the Five Year Forward View new standards and recognise the systemic nature of many of the challenges we face.

Alongside all public services, the NHS has been set high savings targets over the past few years - the cumulative efficiency target over the last seven years is over 21%. Such levels of savings are an increasing challenge at a time when pressures on services continue to mount.

Our four main local CCGs that together provide approximately 60% of our total income require additional savings as part of their Quality Innovation, Productivity and Prevention (QIPP) programme which need to be through planned developments or service changes.

Our addictions services will continue to operate in a highly competitive market, with local authority budgets under enormous pressure.

Our greatest challenges are around demand and flow management within our acute care pathway and inpatient provision, and ensuring this does not impact on the consistency of care, patient experience and outcomes.

Addressing the wider determinants of health remains the key to improving mental health and wellbeing

Risk factors
- Poverty, deprivation and high debt
- Unemployment, job stress, job security
- Substance misuse
- Learning difficulties or special needs
- Family disharmony, abuse, neglect, bullying or discrimination

Protective factors
- Healthy prenatal and childhood environment
- Social relationships
- Social capital
- Healthy lifestyles
- Employment prospects and healthy workplace
The local picture

A snapshot of the needs of our four local commissioning boroughs

Croydon

Croydon has the highest population in London with residents from a wide range of ethnic origins and cultures. In the north, Croydon is a metropolitan area whilst to the south it sprawls into green leafy suburbs.

There is an increasing demand for mental health services (led in part by demographic changes and rapid population growth), which has led to significant pressures on inpatient beds for Croydon’s population. As a result of migration flows, Croydon's population is likely to become more deprived.

Over half of Croydon’s population are from black, Asian and minority ethnic groups and this proportion is increasing over time. Whilst the common mental health disorders such as anxiety and depression are projected to increase by 5% over ten years, a much greater increase is projected in people with serious mental illness.

Numbers of people with schizophrenia, bipolar disorder and other psychoses are projected to increase by 23% by 2021. The need for mental health services varies across the borough with greater need in the north and east. Croydon has a low baseline for community services and is seeing a level of demand for talking therapies that current provision is not meeting.
The local picture

A snapshot of the needs of our four local commissioning boroughs

Lambeth

Lambeth is a thriving central London borough with a diverse and changing population. It's a microcosm of the global trend towards urbanisation; with population growth, successful businesses, opportunities for creativity and redevelopment abound. The borough’s patchwork of communities, town centres, neighbourhoods and open spaces all have their own story, and they all feed into why Lambeth is such a special place.

Lambeth is the 44th most deprived local authority in England and the 9th most deprived borough in London with 36.7% of the population living in the 20% most deprived areas in Lambeth and one third of families with children are in receipt of benefits. Lambeth has the fourth highest turnover of residents in England - 40,000 people leave the borough, and over 40,000 others move to the borough every year. It has a predominantly younger population, 44%, aged 20 to 39 years old compared with 27% in England.

Lambeth is ethnically diverse - 60% of Lambeth’s population describe their ethnicity as other than white British; 30% Black ethnicity compared to 17% in London. Having a multicultural community is seen by residents as one of the top most important things in making Lambeth a good place to live and community cohesion is very high.

Priorities for the borough are to continue bring investment into the borough ensuring that this helps and touches people’s lives, to tackle the inequality in the borough and the supporting strong and sustainable neighbourhoods.

Lambeth has one of the highest levels of mental illness in England. In 2013/14, 1.3% of all patients in GP practices in Lambeth were on the serious mental illness register. The English average is 0.85%. The rate of premature mortality in adults with serious mental illness is significantly lower in Lambeth at 691 per 100,000 compared to England (1319 per 100,000). Faced with a tight budget and fragmented services Lambeth’s CCG and council have taken the radical step of pooling budgets and services into the Living Well Network Alliance to design, develop and deliver a new model of adult mental health services in Lambeth, of which we are proud to be a part of.
The local picture

A snapshot of the needs of our four local commissioning boroughs

Lewisham

Stretching from the banks of the Thames, in the north, to the borders with Bromley, in the south, Lewisham encompass strong communities who take pride in their local areas and neighbourhoods. Lewisham is one of the greenest parts of south-east London.

The Health and Wellbeing Strategy for Lewisham identifies mental health and wellbeing as a priority area given there are high levels of mental health need in the borough: Approximately 10-20% of women are affected by mental health problems at some point during their pregnancy or the first year after childbirth.

There are higher rates of serious mental illness in Lewisham compared to London and England as a whole; one in 16 adults in Lewisham were affected by depression - this is lower than the national average but higher than in London overall; the suicide rate has fallen but is not significantly below the London or national average.

There are high rates of mental health service use:

- Lewisham has a consistently higher number of patients with severe mental illness on the Care Programme Approach in comparison to the neighbouring boroughs of Lambeth and Southwark
- Black and minority ethnic (BME) residents are underrepresented in referrals to the local Improving Access to Psychological Services (IAPT)
- Lewisham residents were more likely to have a high anxiety score on ONS Wellbeing Measures in comparison to London and England overall there is an upwards trend in the number of patients detained under the Mental Health Act in Lewisham.

Within Lewisham there is variable need for mental health services, with the southern wards of the borough (Downham, Bellingham and Whitefoot) estimated to have a 25 - 40% higher need for services, in contrast to more affluent wards such as Forest Hill and Catford South that have lower need than the national average.
The local picture

A snapshot of the needs of our four local commissioning boroughs

Southwark

Southwark is a densely populated and diverse inner London borough situated on the south bank of the River Thames. Home to over 314,000 people, Southwark is a patchwork of communities: from leafy Dulwich, to bustling Peckham and Camberwell, and the rapidly changing Rotherhithe peninsula. It is predicted that by 2026 the population will grow by 20%. It is a young borough with the median age of 32.9 years.

Southwark is a home to multiple ethnic groups with just over a half of residents coming from a White ethnic background, around a third from Black ethnic backgrounds and the remaining fifth from mixed, Asian and multiple other ethnic groups. Southwark is 40th most deprived local authority and ninth most deprived out of 32 London local authorities. There is a significant variation in deprivation across the borough with around 38% of Southwark residents living in areas which are among the most deprived nationally. It is estimated that almost one in five adults in Southwark are experiencing a common mental disorder.

The prevalence of severe mental illness in Southwark is 1.4% (approximately 3,800 patients) and severe mental illness disproportionately affects male, older and black ethnic population groups. Suicide is seen as a proxy for underlying rates of mental ill-health; in 2013/15 Southwark was one of five London boroughs to report higher suicide rates than the national average. Approximately half of the claims for employment and support allowance (ESA) are related to mental health.
The local picture

Mental health priorities of South East London STP, including Lambeth, Lewisham and Southwark

We want to stop treating the mind and body separately. We want our services to assess and treat mental health disorders or conditions on a par with physical illnesses.

**Prevention**
We are working to develop a consistent approach to recognise and support people with mental health needs. More screening and ensuring timely access to evidence-based care is essential.

**Integrated care**
We want mental health services to become more integrated in all our health and care services.

**Perinatal mental health**
In south east London we want all women to have access to perinatal mental health services.

**Easier and faster access to crisis mental health services**
We are working to make sure there is access to mental health support and liaison teams for people of all ages in our A&E departments 24 hours a day, seven days a week. We also want to make it easier to access community-based crisis response teams and intensive home treatment as an alternative to hospital.

**People who need inpatient care**
We want to make sure that if someone is in crisis, they can access a health-based place of safety - somewhere where mental health professionals can assess a person’s needs and work out the best next steps.

Mental health priorities of South West London STP, including Croydon

We need to do more around prevention and early intervention, to help keep people well and get them the support they need as early as possible.

We need to improve support for people with long term conditions, whose mental health is often not dealt with, or dealt with separately from their physical health needs.

We need to provide better care for both young people and adults experiencing a mental health crisis, including alternatives to admission and improved pathways for those people with a mental illness who are removed from a public place by either the police or by medical services (known as the s136 pathway), and ensuring people experiencing first episodes of psychosis receive timely treatment.

We need to provide better support for the 3-5% of women who experience moderate to severe mental health problems during the perinatal period.

We need to improve support to people at risk of suicide.
Our strategic aims - quality

We will get the basics right in every contact and keep improving what matters to service users

Our ambitions

As an organisation, our focus has to be on delivering the best possible care for everyone who comes into contact with our services, every day and on every site - safe, caring and effective. We must provide consistency in the quality of care.

We will achieve the best possible outcomes and experience for service users through a focus on leadership, the fundamental standards of care, continuous quality improvement and developing new models of care. We are developing a culture where everyone has a mindset for continuous improvement and focuses on outcomes that matter to people who use our services and their carers, families and friends.

We are improving our acute care pathway. In particular, we are working to reduce the level of unwarranted variation in the quality of care across our acute wards and Psychiatric Intensive Care (PICU) services. A key success factor will be improving and sustaining better management of flow through the acute care pathway from community right through to inpatients.

Two years ago we committed to becoming an organisation where Quality Improvement (QI) is what we are about and at the heart of everything we do through our partnership with the Institute for Healthcare Improvement (IHI). QI is about working continuously to improve the care and treatment we offer by supporting a culture of constant curiosity about how to improve and the development of skills at all levels to think differently, be innovative and take a systematic approach to improving quality using the IHI ‘model for improvement’ to make changes, spread best practice and measure how we are doing. Now, QI is becoming strongly embedded across the Trust as core to how we work and Executive and Board leadership of QI is highly visible.

Our initiatives

Leadership for quality

- New leadership teams with a focus on quality and quality improvement – operations directors to deliver consistency in the quality of care provided in each borough and trust-wide for smaller, national and specialist services.

- A new quality centre to monitor and drive quality across the organisation, including seven Clinical Academic Groups to focus on: clinical outcomes, quality improvement, business intelligence, education and training, evidence and research and to enable the development of new clinical pathways, pathway protocols and development priorities.

- Define outcome measures for adult and older adult services and children’s services covering both inpatient and community care and overarching outcome measures for the strategy.

- Take forward our trust wide Serious Incident (SI) group with Clinical Director accountability and stakeholder representation.

- Equip everyone with the skills and support to improve quality across the organisation.
Our strategic aims - quality

Fundamental standards of care – priority areas for improvement across the organisation

Care plans: we will improve how service users are involved in all aspects of their care ensuring that people are actively engaged in developing crisis and recovery plans that work for them, managing expectations and being clear about choices.

Environments that are safe: we are introducing a trust-wide programme to reduce ligature anchor points to ensure patient safety.

Reducing violence and restraint: we will reduce violence by 50% over three years with the aim of reducing all types of restrictive practices.

Drive to achieve standards for access, assessment, treatment and helping people stay well.

Safe staffing: we will ensure every ward and every community team is staffed appropriately.

Seek to become a beacon of human rights and equalities in the way we apply the mental health legislation and make progress towards the reduction of all restrictive practices, through use of service user voices, information to understand avoidable causes of relapse, innovations in staff training and use of evidence-based care in our clinical pathways.

Fundamental standards of care - acute care pathway services

We are improving local leadership by:

- Bringing together the acute care pathway: teams providing acute inpatient and community care will take forward recent improvements – the single place of safety, the ARC (our single bed management hub), and the relationship between Home Treatment Teams (HTTs) and the wards.
- Borough-based directorate leadership will allow the new leadership teams to get to know their patch in much greater detail and align closely with other partners including social care, the voluntary sector, housing and other community assets.
- Joint working between medical and nursing leads and service directors and OT and Psychology leads will impact on culture and behaviour across our acute and crisis care pathway.

“I’ve worked for the trust for 27 years and I like how it’s at the forefront of change. I really enjoy meeting patients and being able to influence practice and improve the quality of care.”

Susan Hardwick
Clinical nurse specialist
Our strategic aims - quality

**Governance:** We will embed improved ward-to-directorate governance as a part of the borough reorganisation.

**Pathway flow and discharge planning:** This will be a major focus of work. We will improve flow through our acute pathway, linked with bed availability and team caseloads, working with our system partners. Work will involve developing a care process model with service users for the pathway, creating standard operating procedures to implement the model robustly and resolving barriers, internally and with system partners.

**Development of trust-wide quality improvement** programme of work within our general adult services – iCare – which addresses crisis and relapse prevention, safety in the community and safety in inpatient services.

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“The substance abuse programme at the Tony Hillis Unit is a new and unconventional way of working, which has improved the quality of life for service users by breaking the cycle of patterns abusing substances when on leave. This significant change doesn't rely on huge financial input - just good ideas and great staff.”

A service user

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**Quality improvement**

- Build skills, capacity and capability at all levels through our set of QI development programmes from foundation to expert and QI coach development across the directorates and corporate services – there are already over 700 staff trained at different levels. One programme is coproduced with and co-delivered with service users in the Recovery College.

- Develop use of the trust dashboard (called Deming) which draws data from records. Teams will be able to monitor activity through trust-wide, team and individual-level visual dashboards. This will enable the trust to use data more robustly to inform decisions, improvements and track change over time enabling continuous improvement. Also, other sources of information to deliver all the floor to board information needed.

- Scale up successful QI projects – there are over 100 live QI projects across the organisation focused on fundamental standards of care.

- Continue with our major trust-wide QI programme ‘Four Steps to Safety’ on reducing violence and aggression and i-Care for general adult services.

- Continue to develop how we coproduce QI projects with service users and with community members through the Joint Working Groups in each Borough.

- Continue to hold both QI and Safety Huddles weekly.

- Learning from our Serious Incident reports - asking why, why, why questions.
Our strategic aims - quality

New models of care

- We will shape our model for integrated care, including in a community setting.

- We will improve the delivery of our national and specialist services through clinically-led development of new models of care and continuous quality innovation, working with our partners at Oxleas and South West London and St George’s (our South London Mental Health and Community Partnership) e.g. forensics and CAMHS; improving crisis care and alternative to admission services for children and you people.

- Develop and deliver new local delivery models and move to whole-population contracts in all our boroughs, based on better population outcomes starting with the Lambeth Living Well Network Alliance and rolling on to discussions in Southwark and Lewisham.

- We are driving the development of an ambitious new Centre for Young People’s Mental Health that will deliver new models of care and discoveries about how to improve outcomes - earliest opening date of May 2022. This will include engaging staff, stakeholders and local communities in awareness raising and fundraising.

- New models of care supported by digital approaches, including our Personal Health Record platform Healthlocker to equip people when they use our services and their families to self-manage their conditions and get digital access to their health records, online resources and care plans. Digital technology will extend our reach by enabling service users to provide useful information so that we and they can monitor how things are going between appointments.

“Proactively managing admissions and joining up services can reduce out of partnership placements and the time patients spend on a ward, enabling quicker step-down and discharge.”

Mandy Sarhane
CAMHS Clinical Services Manager
Together, we deliver two New Models of Care (forensics and tier 4 CAMHS) that have already made real differences to patient experience and outcomes, resulting in fewer patients placed out of the area in beds outside our trusts.

The new Acute Referral Centre (ARC) is helping to maintain an up-to-date position on bed occupancy and provides links with our community teams.

We also work together on a wide range of activity from pharmacy (improving prescribing in schizophrenia) to nursing and workforce (with a staff passport, harmonised nursing career structure, and close to £2m committed to training Nursing Associates).

As a partnership, over the past 18 months we have committed £4.6m into the development of new services for local people. Being clinically led but working in partnership with service users, carers and communities has been key to these developments.

**Looking forward, priorities for SLP include:**

- Launching a Forensics CAMHS service
- Expanding CAMHS Crisis Care services
- Increasing community Dialectic Behaviour Therapies interventions for children and young people, particular in south east London
- Starting to take on commissioning and support for Complex Care patients
- Piloting new Band 5 community nursing roles
Our strategic aims - partnership

We will work together with service users, their support networks and whole populations to realise their potential

**Our ambitions**

We want to make a step change in working collaboratively with service users, carers and families. We will work together with people to plan care, to understand them and their carers, to maximise their control, and bring together services to achieve the outcomes important to them.

We will support people to develop the knowledge, skills and confidence they need to more effectively look after themselves and make informed decisions about their own health and well-being.

We recognise adopting person-centred care as ‘business as usual’ requires fundamental changes to how services are delivered and to roles - not only those of health care professionals, but of service users too - and the relationships between service users, professionals and teams. Staff, service users and carers need to recognise that each play a vital role in the wellbeing of the person needing our help and the power imbalance between the three parties needs to be acknowledged and addressed. Genuine co-production will mean that people’s cultural needs will be recognised and met because their assets, needs and wants will be at the heart of what we develop to support them when they have mental health difficulties.

We are working with other organisations to deliver joined up care pathways e.g. through the South London Mental Health and Community Partnership (SLP), the Lambeth Alliance and work with other boroughs.

Our combined clinical and academic expertise and strength of partnership working means we are in an excellent position to develop leading edge approaches to population health management. We will make better use of routine information to understand our populations and their mental health, so that working with our commissioners, we can plan and design services more effectively and efficiently. We will identify those groups of people who are at risk of adverse health and well-being outcomes and use advanced analytics to predict which individuals are most likely to benefit from different interventions, and then ensure that they are offered services that best meet their needs – constantly looking to lower risk. We will routinely identify missed elements of evidence based care in our pathways of care and ensure that commissioners and partners are informed and work together so gaps are filled. We will enable service users to contribute extra information to allow for more holistic solutions to their needs. These solutions will be co-produced with service users and local partners such as education, community safety, police, leisure, transport, employers, housing and primary care. We will use de-personalised information to ensure that we are consistently addressing the inequalities that are faced by many groups.

Through this, working collaboratively with our local partners, we will better focus on prevention, access, early intervention and recovery to improve our reach and impact on people’s lives. To drive primary prevention, we will work with a wide range of partners – schools, the police, local government and housing – developing and sharing the evidence about what works and helping educate people about mental health. We will provide joined up care, close to home and focus on key outcomes that matter to local people.
Changing Lives

Embracing partnership-working and forging local connections, relationships and partnerships will help develop a collaborative movement to improve life opportunities.

This will build on our existing work in Lambeth where resources have been pooled to prevent long inpatient stays and for older adults in Croydon.

The foundation for all our work is our commitment and success in developing productive strategic partnerships - with our four boroughs, CCGs, SLP, Lambeth Alliance, King’s Health Partners (AHSC), Health Innovation Network (AHSN), Institute of Psychiatry, Psychology and Neuroscience (IoPPN), King’s College London, Maudsley Charity and others.

Our initiatives

Working in partnership with people who use our services, their carers, families and friends, and members of local communities:

- Improve the number of service users and carers that we can demonstrate we are working collaboratively with in planning their own care.
- Improve the accessibility of information on our support and treatments options to help people to make choices and recover.
- Embed the Carers Engagement and Support Plans across all operational directorates to ensure carers are identified (recognising that some services have minimal contact with carers e.g. Improving Access to Psychological Therapies (IAPT)).
- Training and development for staff, service users and carers to improve confidence and knowledge about how to work in partnership, recognising their assets and meeting all their cultural and other needs.
- Better understand what has been helpful and what could make the experience better for individual service users and carers.
- Embed partnership working in all aspects of the quality improvement programme - service users and carers to be involved from concept.
- Demonstrate the positive impact of involving people in the delivery and governance of services. Feedback to be given over time about tangible and improved results as a consequence of partnership working.
- Continue to develop the successful Recovery College to provide courses and workshops that are developed and delivered by service users, carers and SLaM staff.
- Continue to support the vibrant and active Volunteering Service, funded through a partnership between the trust and the Maudsley Charity. A new young persons volunteering service has been established recently.
- Grow our vibrant Involvement Register - a register of people who use services, and their carers, families and friends, who have signed up to undertake involvement opportunities in the trust. These opportunities include attending meetings, such as Service User and Carer Advisory Groups, Link working, delivering training, participating...
Our strategic aims - partnership

on interview panels and co-producing our policies and strategies. Each month around 50 different types of involvement opportunities are undertaken by around 60 people. This includes supporting people to take up opportunities for paid employment. The Register currently has 241 active service users and carers signed up to it.

“Governors act as a link between service users, carers, the public and the board of directors.”

Jenny Cobley, Lead Governor

- Be an active partner within the Black Thrive initiative seeking to deliver system-wide changes to the health services and improve the wellbeing of black communities in Lambeth and other similar models as they develop in each borough.

- Support the work of the borough-based Joint Working Groups with the local Independent Advisory Groups to help improve the trust and confidence of the local Black African and Caribbean and other local communities in mental health services.

- Build on strong service user partnership working at local levels (e.g. Service User and Carer Advisory Groups) and our trust-wide committees.

- Service User Involvement Committee, (coproduced and co-chaired by service users and staff) to provide the strategic voice for service users to ensure that the issues that are important to service users are raised, discussed and acted upon, feeding into the Quality Committee of the Trust Board.

- Family and Carers Committee (coproduced and co-chaired by carers and staff) to focus on the experience of carers, families and friends feeding into the Quality Committee of the Trust Board.

Partnerships to help local communities realise their potential, including using leading edge population health management approaches:

- Play an active role in system leadership roles - within our two STPs, offer significant leadership e.g. chairing workstreams around mental health, integrated mind body care, clinical programmes, estates and productivity and playing an active role in Health and Wellbeing Boards and pan-London initiatives such as Thrive London and Healthy London Partnership.

- As a leader in integrated care and population health management, we will review and develop our approach, including use of (observational or routine) data, the expertise of local leaders in our communities and partner organisations, the research expertise of the IoPPN and the Centre for Translational Informatics.

- Develop our new operating structure that is focused on delivering care within our London boroughs by supporting closer working with our local partners around the needs of local people and responding to commissioning changes within our boroughs.

- Develop and deliver new local delivery models and move to whole-population contracts in all our boroughs, based on better population outcomes starting with the Lambeth Living Well Network Alliance and rolling on to discussions in Southwark and Lewisham. Lambeth has one of the highest prevalence of serious mental health illness in England. To meet the challenges and transform mental health services, Lambeth is delivering care and treatment to working age adults through an alliance contract which is underpinned by a bio-psycho-social recovery focussed model.
Changing Lives

Improving mental health services in Lambeth one step at a time – pooling budgets and services in the Lambeth Living Well Network Alliance

The aim is to join up services around the needs of those who use them; providing easier access and better services whilst also making the best use of the ‘public pound’.

**Bring services together**

The Living Well Network Alliance brings together those who use services, those who plan and buy services (commissioners) and those who deliver them (providers) to design, develop and deliver a new model of adult mental health services in Lambeth. For people who use services, this will make it easier and quicker to get the service they need and reduce the merry go round of referrals from one part of the system to another. The new approach will also make better use of professionals’ time and expertise by involving the voluntary and community sector where this makes sense. Importantly, the new approach will treat those who use services as equal partners, recognising that they come with strengths and ‘assets’ and involving them in the design and development of services generally and their care in particular.

**Preventing illness**

The Alliance will use this joined-up approach to focus more on preventing people getting ill in the first place and supporting them earlier when they are unwell. As well as providing faster care, which is likely to mean a better result, it will also reduce the need for more expensive and less suitable hospital care. The Alliance is building on significant joint work which is already bearing fruit in the borough. For example, over 500 people each month are being supported by the Living Well Network Hub. Without this, many of these people would have had no support; some would have been left to manage alone, with the risk that they could get worse and be a risk to themselves or others or even need care in hospital.

The Alliance recognises that certain parts of Lambeth’s community, particularly black men, are often over-represented in the mental health system and that they report a worse experience of these services than others.

The Alliance will do everything in its power to ensure that all sections of Lambeth’s community are treated equally and will work with those traditionally less engaged to design services that best meet their needs.

The Alliance will be working towards a single set of shared outcomes. These encompass the Living Well Collaborative’s Big Three Outcomes, which were coproduced with service users, carers and providers. The Big Three Outcomes are for people with mental health issues to:

1. **Recover and stay well, experiencing improved:**
   - Quality of life
   - Physical and mental health

2. **Make their own choices and achieve personal goals, experiencing increased:**
   - Self-determination and autonomy

3. **Participate on equal footing in daily life, specifically**
   - To ‘connect’ with others e.g. family, friends and neighbours
   - To ‘give’ in the community e.g. community activities, volunteering, peer support
   - To ‘be included’, especially in relation to education, employment, adequate income and stable housing
   - To ‘participate’ on an equal footing with others with reduced stigma and discrimination e.g. access to mainstream services, housing, education and employment

The Alliance outcomes build upon these outcomes. Additional outcomes relating to finance, style of delivery, staff and carer experience and population-based measures have been added.

**Alliance Rehabilitation Team, Lambeth**

Service users said: “The team has gone beyond their duty because we feel valued again and ready to move forward positively.”

Staff said: “We’ve got a great mix in this team and service users working with us. I really like how it’s a multi-cultural team.”
Our strategic aims - partnership

A joined up approach to Mind and Body and physical healthcare:

- We are working with Guy’s and St Thomas, King’s College Hospital and King’s College London, along with Southwark and Lambeth Clinical Commissioning Groups as part of King’s Health Partners’ Mind and Body programme to embed integrated mind and body care as business-as-usual.

The programme will:

- improve routine identification of mental health needs in physical health settings and vice versa; ensure we respond to those needs, using stratification and a stepped care approach; providing a broad programme of learning and development for all staff to improve confidence to deliver ‘mind and body’ care. The Maudsley Charity is supporting this ambitious project through a grant of £1.7 million.

- We want to improve the physical healthcare of our service users and staff. Our physical health strategy will guide a more effective approach to health promotion and physical health care across all clinical settings. The increase of physical health awareness training will ensure all staff meet these standards. Teaching sessions continue to take place for community and early intervention screening.

Our strategic partnerships:

- We will continue to listen closely to our strategic partners to understand their ambitions and challenges and find effective and creative ways to work together to improve our collective impact.

Thrive London is a citywide movement to improve mental health and wellbeing of all Londoners, supported by the Mayor of London. It is led by the London Health Board, in partnership with Greater London Authority, Healthy London Partnership, NHS England (London Region), Public Health England (London Region) and London Councils.

On 4 July 2017 Thrive London launched six aspirations for London:

- A city where individuals and communities take the lead
- A city free from mental health stigma and discrimination
- A city that maximises the potential of children and young people
- A city with a happy, healthy and productive workforce
- A city with service that are there when, and where needed
- A zero suicide city
Our strategic aims - a great place to work

We will value, support and develop our managers and staff

“Acute care is an area I am truly passionate about and I love coming to work every day.”

Victoria Fawcett, ward manager
Jim Birley Unit

Our ambitions
The quality of care that service users receive depends first and foremost on the skill and dedication of our staff. We know that staff who are engaged, happy and supported at work provide the best care. Our passionate staff do a difficult job, often in challenging circumstances and there is more we can do to improve their experience, satisfaction and joy at work and equip them to deliver quality care. This will come from listening to their views and valuing their contribution as well as offering opportunities to develop new skills and career progression as part of their continuous development, and investing in staff wellbeing.

Making the trust a great place to work will help us continue to attract, recruit and retain the very best people.

Our initiatives
- A new recruitment and retention strategy with increased investment: improving the recruitment pathway, investment in staff counselling, guaranteeing employment to students as they qualify, highlighting research opportunities.
- We will reassess our training and development offer. Individual, co-leadership and team coaching will help individuals to put new skills and leadership behaviors into practice.
- Investment in quality improvement as an organisational development approach to create a learning organisation.
- Leadership development and organisational development: including investment in our inclusive leadership programme to involve every manager across the whole organisation.
- A comprehensive nursing development programme to support the retention, development and recruitment of nursing staff: including the introduction of nursing associate/assistant practitioner roles to create more skilled and stable nursing teams.
Our strategic aims - a great place to work

We will value, support and develop our managers and staff

- A more comprehensive health and wellbeing strategy recognising pressures on workforce and drawing together existing initiatives such as the physical care strategy and providing confidential psychological support for staff who are experiencing difficulties at work or home.

- Develop our Freedom to Speak Up structure, the importance of which is reflected in the fact that it is led by the Chair and CEO.

- Improve change management, assess and act on leadership development and organisational development needs.

- Visible leadership across the organisation - NEDs regularly visit services and SMT members Quality Improvement (QI) visits.

- Develop and deliver equalities strategy, with a particular focus on BME staff: an Equalities and Workforce Committee of the Board to strengthen governance on equality, diversity and inclusion.

- A focus on BME staff experience: led by the BME Staff Network, the Trust Board has clear targets and interventions in place around career development, progression, representation at senior grades and also representation in disciplinary processes. Other networks are also actively supported, including LEN, LGBTQ and administrators.

- Staff communications: regular and dynamic approaches; new intranet; introduce new team briefing arrangements.

- Staff recognition with more engaging staff celebrations: annual Staff Awards, SLaM stars, eNews and twitter.

- Action on the Staff Survey results: the above initiatives will take forward action. We will continue to assess, explore and respond to the results, identifying and building on strengths (e.g. in appraisals, communication, and staff contribution to improvements at work) and addressing weaknesses (e.g. stress, violence, harassment and bullying).

“Marcia is promoting person-centred care in its purest form. She makes an outstanding contribution to care at Greenvale.”

Our SLaM STAR 2018,
Marcia Irving, Clinical Support Worker at Greenvale Specialist Care Unit
Our strategic aims - innovation

Striving to be at the forefront of what is possible, exploiting our unique strengths in research and development, with everyone involved and learning

Our ambitions
We will maximise benefit to service users and the local community from our research and development by making it a routine, core part of clinical activities across the organisation - in all professional groups and teams across our geography. We will build on our unique breadth and depth of research and clinical care; many clinical areas already have strong research programmes which inform local, national and international practice. Leading edge big data and digital approaches will allow us to better identify people at risk, spot potential problems, develop new interventions, deliver support and improve care.

We will answer key questions in clinical practice and population health, informing our work in the trust and that of mental health practitioners across the globe. We will continue to undertake research and generate evidence that will lead to ground-breaking discoveries. We will introduce new practices, refined and evaluated through our close clinical academic partnerships to establish evidence-based practice.

Our care pathways will be underpinned by research and evidence supporting the highest possible standards of care. We will increase the number of SLaM staff involved in research by encouraging and supporting all staff to get involved and take more active roles in leading research and take pride in being part of a research active organisation.

Quality improvement approaches will be used to put evidence-based practice into wider use and to become a true learning organisation and system. Our approach to education and training will support staff to get involved in both research and quality improvement which will help to further develop an ethos of innovation as we develop our workforce and our clinical services.

The Maudsley Charity is one of the larger hospital charities and able to make a significant difference to innovation in the trust. It works closely with our staff to generate ideas that will make a difference to care, treatment and service innovation.

Eileen Skellern 1 (ES1) Psychiatric Intensive Care Unit (PICU) has pushed the boundaries with their innovative practice.

“We aim for the best and are involved in a number of QI projects to enhance what we do to provide the best service for patients. The sensory room is one of several innovations that helps to give patients the best opportunities to cope with the environment they are in.”

Onyekachi Nwankwo, ward manager, ES1
Our strategic aims - innovation

As a trust, our relationship with academic mental health and the world leading reputation of the Maudsley brand in research and innovation is perhaps what we are most known for. As such leaders for mental health, we will use the insight and our voice to improve care nationally and internationally and tackle stigma and discrimination.

Our initiatives

Our R&D strategy supports active research and the translation of evidence and research into clinical practice and population health— making it real and valuable to staff and service users:

- **A rich and diverse portfolio:** Our Clinical Academic Groups (CAGs) provide strategic leadership: They will identify teams where there is scope to increase research activity and unanswered clinical and service questions that research could inform. Some of these will be identified through the quality improvement loop. They will also develop strategic work plans on the delivery of evidence and the latest research findings into practice.

- **Service users and carer involvement:** We will make service users and carers aware of opportunities to design and participate in research and provide reassurance that it is high quality, safe and ethical. They will shape research by being involved in research at every level, including the R&D management processes.

- **Supporting staff to be research active – new support, training opportunities and funding:** We will continue to listen to staff about the support they would welcome. Working with the IoPPN, in the context of the BRC and CLAHRC, we will access state-of-the-art facilities, honorary academic titles, mentoring and career development. Our CAGs will promote research as part of every professional’s remit and we will support and guide our staff in their research endeavours and steer individuals towards appropriate research training options. We will develop a menu of research training opportunities for all professional groups to build skills, increase the number of staff with research identified as part of their job plan, develop research career pathways for clinicians and increase the number of trust Principal Investigators. We will create new posts to help staff secure research grants and create a strategic research capability fund to direct towards clinical teams, to support new research hotspots and grow existing research activity.

- **Recruitment of research participants:** Our CAGs will encourage researchers to recruit through the trust, in particular to develop interventional studies and engage with clinical teams to increase their recruitment of participants, especially into NIHR Portfolio projects (including those led by other centres) and into commercial studies. We will create fixed-term sessions for clinicians to lead on this. Staff will be encouraged to sign up patients to Consent for Contact (C4C) and researchers will be encouraged to use C4C to recruit patients.

- **Highest scientific and ethical standards:** We will continue our effective research governance and management, led by the joint R&D Office of the trust and the IoPPN.

- **Research communication:** We will work collaboratively with our close partners across KHP, particularly the IoPPN and with the CLAHRC (based at King’s College Hospital) and Academic Health Science Network (Health Innovation Network) to ensure that stakeholders are aware of the trust’s research findings and innovative approaches.

  - Shape national best practice guidance through the involvement of our leading clinicians and academics.
Our strategic aims - innovation

Our work on quality improvement is further described in the quality strategic aim.

- Develop the SLaM-IoPPN Centre for Translational Informatics to deliver excellence in the use of informatics/big data for population-based prediction, understanding of risks and causes, and the development and testing of digital innovations. The Centre will take advantage of the new opportunities from the vast amounts of data being generated, enable rapid translation of digital research developments into validated clinical practice tools, including novel mobile health and remote sensing technology and ensure we develop approaches that are scalable and transformative.

- Attract funding based on our world leading researchers, educators and clinicians to create a new Centre for Young People’s Mental Health. This will support young people locally, nationally and globally through integrated clinical services, research and education and outreach. The centre will pioneer research, establish the best care and advance training to deliver world class outcomes for mental health. It will be unique in its scale of ambition, the collaboration and in the widely-recognised international excellence of the founding partners.

Develop our education and training strategy in support of our quality agenda, sharing of best practice and advocacy of mental health:

- Our education and training plans (described in ‘A great place to work’) will support a culture change to focus on consistent delivery of the fundamentals of care and continuous improvement.

- Launch Maudsley Learning to make a step change in our work as a lead provider of education and training, building on our education and training directorate and Maudsley Simulation. Maudsley Learning will produce and deliver the highest quality, internationally renowned education and training products in the field of mental health and wellbeing. We will educate and train, traditionally and digitally, at scale to range of professional groups globally. We will offer a full range of education and training products from e-learning and other digital products, through face to face classroom teaching to more immersive and experiential simulation and skills-based courses. These will be developed by harnessing the world leading subject matter expertise and cutting-edge thought within the trust and IoPPN.

Our curriculum will address the educational requirements of a range of professionals involved in healthcare and associated organisations as high quality CPD & HEI micro-accredited courses. Institutions will be able to purchase on behalf of their staff to enable higher quality and safer services through workforce development and inter-professional learning and individuals in healthcare and beyond wishing to enhance and advance their own careers will be able to purchase courses tailored to their own professional development. This will share our learning, commercialise our know-how and intellectual property and generate funding for the trust’s services.
Our strategic aims - innovation

Common purpose
Together with the IoPPN, we are committed to working together to promote mental wellbeing and to establish the best possible treatment and care for people with mental illness and their family members. We shall do this by promoting excellence in research and teaching to advance understanding of the causation, prevention and treatment of mental illness and related disorders, and by developing the best service models for the community. We shall pass on this knowledge to those who can benefit from it: locally, nationally and internationally.

Priority areas for research
- New models of care (including primary care for mental health)
- Health economics
- Implementation science and health service delivery
- Population Health (including early intervention in all areas, with a longer-term perspective on prevention)
- Mental / Physical health interface, which is a key focus of the NIHR Maudsley Biomedical Research Centre as well as King's Health Partners
- Comorbidity
- Personalised medicine (including genomic medicine)
- E-health / digital health
- Mental health across the lifespan
- Ethnic diversity and mental health
- Mental health of vulnerable groups – e.g. those with interactions with the criminal justice system; looked after children; people with learning disabilities
- Recovery into paid employment
Our strategic aims - value

Making the best use of our assets, resources, relationships and reputation to support the best quality outcomes

Our ambitions

We will ensure our care services and support services provide the best possible value by focusing on the outcomes we achieve for the resources invested. Being financially sustainable and governed to the highest possible standards is a core focus with a strong interface between performance, finance and quality. We will manage our costs effectively so we can re-invest in our people, innovation, research and training. Reducing clinical variation will provide better value. Commercial ventures will allow us to reinvest in staff development, innovation and local services at a time when these budgets are under pressure. Staff will be able to make the best use of information with reliable IT infrastructure and applications and data to support quality improvement and innovation. Our staff and service users will benefit from being in places we are proud of.

Our initiatives

**Continue to develop our leadership and governance:** invest time and energy into the development of the Trust Board and plan to close the gap against best practice in governance, building on our clear structure of Board Committees and strong relationship with the Council of Governors (CoG). Develop My Team dashboard and development of BI, ARC and Trust dashboards.

**Take forward our five-year financial strategy** which is based on a trust-wide assessment of the base financial risks and opportunities over the next five to 10 years and captured in our Long Term Financial Model. This dynamic model allows the trust to understand the long-term financial impact of key strategic decisions and model new scenarios. The strategy will allow us to meet our £2.5 million surplus requirements, maintain suitable cash and liquidity and afford investment in key areas i.e. innovation, development of our workforce and estates.

“Like many NHS organisations, in order to support and invest in our local services, we are pursuing selected commercial ventures overseas. Our vision is to apply our specialist service knowledge, research experience as well as the expertise we have developed treating people locally in south London, to improve the lives of adults and children in places such as the United Arab Emirates (UAE).”

Altaf Kara
Director of Strategy and Commercial

Commercial development: Take forward commercial opportunities, in line with the organisation’s vision, that will enable us to further support and invest in our local services by delivering an equivalent of 1% of turnover as an initial target.

**We will:**
- ensure commercial continues to work effectively in core areas and services
- increase estates commercial activity
- grow ventures in international growth we have been progressing our international plans – most notably in the UAE for circa five years (three years in operation in a joint venture between the trust and Macani Medical Centre, an Abu Dhabi-based organisation set up to bring the highest quality health care to the Middle East and North Africa (MENA) region) and are exploring training and research ventures (jointly with KCL/IOPPN) in China.
Our strategic aims - value

- grow ventures in commercial education and training - Maudsley Learning.
- consider private healthcare
- pursue digital opportunities, usually in partnership

To support this we will better manage our brand and intellectual property, develop commercial awareness, skills and capabilities within the commercial team and more widely and, ensure strong management and governance.

Deliver improvements to the quality of our estates and facilities

Our places and spaces must offer a safe a therapeutic environment for patients as well as being accessible to the community and inspiring places to work. An extensive development programme is being implemented across the trust with the overall aim of transforming our estate to enable 21st century mental health care.

We will modernise and refurbish our buildings and create new centres of excellence, enabling the elements of clinical practice, research, education and training to be brought together.

We will reappraise our community hub strategy and move at least one integrated hub into each borough.

We have two new hospital builds planned - delivery of the Douglas Bennett House scheme on the Denmark Hill site and rebuilding the National Autism Unit.

Progress on getting the IT basics in place and implementing our digital strategy, working towards becoming a Global Digital Exemplar

- Ensure the basics are securely in place (data, informatics and hardware, WiFi and connectivity) to support front line with the right digital kit to do their job and the related training as highlighted in our ‘Digital Me’ campaign.
- Triangulate data more effectively to spot variance more quickly and use locally sensitive data more effectively.
- Implement electronic observations, electronic prescribing, improvements to our electronic record and our new online personal health record, Healthlocker.
- Working with our partner trusts, Oxleas and South West London and St Georges, south London will be the largest mental health GDE programme in England benefiting the most patients and staff.