

Bringing together community, mental health and learning disability services

Strategic Case for the creation of a new Trust for all community and mental health services across Hampshire and the Isle of Wight Integrated Care System

# **Strategic case**

#### The clinical strategy

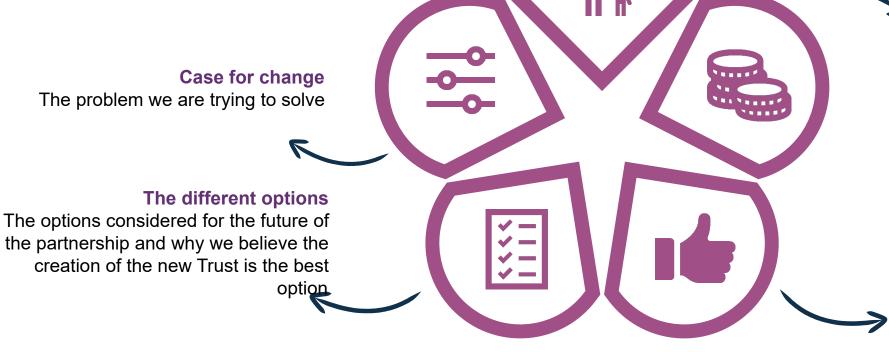
The approach we will take to developing a clinical strategy for the new organisation

#### The finances

Opportunities to make better use of our collective resources and setting out the likely costs

#### Key benefits

The expected benefits which will be further developed in the full business case



# **Strategic Rationale**

### **Strategic Context**

- The NHS Long Term Plan
- National policy with focus on integration and collaboration across health and social care at a system and place.
- HIOW ICS strategy has 5 priorities: CYP, mental wellbeing, good health and proactive care, people/workforce and digital and data.
- Creation of the new Trust is one of 3 key strategic programmes within the ICS.

### Independent Review Recommendations

- A new Trust should be established to oversee delivery of all community and mental health services across HIOW;
- A review of community physical health beds should be undertaken;
- A system-wide clinical strategy for community and mental health services should be developed.
- A strategy for Place and Place-based leadership should be developed.
- Funding arrangements for community and mental health services should be approached from a more strategic level.

### **Case for Change**

- Variation in practice and fragmented pathways adversely impact health outcomes;
- Significant increases in demand are putting complex models under greater pressure and people are not getting the care they need at the right time and in the right setting;
- Recruitment and retention challenges are resulting in workforce gaps
- Financial challenges are expected to continue to increase and IOW services are not financially (or clinically) sustainable.

# **Options Assessment**

The option appraisal undertaken as part of the independent review of community and mental health services has been refreshed. A long list of options were generated, and three options met the essential criteria set for more detailed appraisal: lead provider model, group model and single Trust for community and mental health services. The options appraisal process concluded that:

- Whilst a lead provider model could enable redesign of pathways and standardisation of care, it provides limited potential to address the case for change and would not resolve the sustainability of Isle of Wight community and mental health services.
- Creating a group could enable improved strategic alignment across community and mental health services but maintains separate organisations, involves complex governance and does not enable delivery of consistent care models and the required transformation. There is complexity in incorporating services provided by IOW Trust and SPFT and it does not resolve the sustainability of IOW community and mental health services.
- Bringing services together into a single Trust offers the greatest opportunity to respond to the case for change. This
  option allows for the coordination of resources to manage capacity according to need, respond to system pressures
  and enable smaller services to operate at the appropriate scale. This also provides the critical mass needed to support
  the sustainability of Isle of Wight Community and Mental Health services. This is the preferred option.

# **Clinical Strategy**

### **Clinical Charter:**

- Safe and effective mental health, learning disabilities and community services
- Work in, and with our communities to improve the way we deliver care
- Coproduction
- Outcome focussed
- Adopt a life course approach with emphasis on prevention
- Collaboration between providers
- Integration with partners, including primary care, local authority, and voluntary services
- Embrace innovation, research, and new models of care
- Clinical and professional leadership at the core of our success

### Mental Health and LDA Priority workstreams:

- CAMHS
- OPMH
- Acute and crisis care
- Community mental health services
- Neurodiversity services.

### Community priority workstreams:

- Frailty
- Community beds and rehabilitation
- Long term conditions
- Urgent Community Response
- Primary Care

# **Benefits**

### For patients:

- Improving patient experience by creating services that are less fragmented, across both clinical pathways and geographic areas;
- Improving patient safety and outcomes;
- An enhanced patient voice through our membership and the Council of Governors and our approach to community engagement which will enable the new Trust to respond more effectively to the needs of the populations that we serve; and
- Research opportunities.

### For staff:

- Reducing vacancies by developing a single approach to tackle recruitment and retention challenges;
- Improved career progression and development opportunities;
- Improved job satisfaction;
- An inclusive, open culture that promotes learning and continuous improvement;
- Improved service resilience and reduced professional isolation; and
- Attracting and retaining strong leadership.

### For the wider system:

- Support our partners to provide more joined-up care across the health and social care system; and
- Being a strong and consistent voice for community and mental health services across the ICS.

## great people great place

**Project Fusion timeline** 



