



**South West London and  
St George's Mental Health**  
NHS Trust

A photograph of a young man with short dark hair, wearing a blue and white plaid shirt, smiling broadly as he works in a garden. He is holding a tool, possibly a trowel, and is surrounded by pink and red flowers. A large, semi-transparent blue graphic overlay, shaped like a stylized arrow pointing right, is positioned over the right side of the image. The text 'Annual Public Meeting Event Q&A – 21 July 2022' is written in white on the blue overlay.

**Annual Public Meeting**  
Event Q&A – 21 July 2022

## Questions and answers

### Transformation

***Q: How much money did the Trust receive from land sales for its Estate Modernisation Programme, and how much did the property developers receive? Why was our staff accommodation not replaced?***

Our Estate Modernisation Programme is investing £155m in new facilities at Springfield (phase 1). We have not yet finalised the total costs for Phase 2 Tolworth, this will be complete by October 2022. All of the money from the land sales will be used to fund the phase 1 and phase 2 Estate Modernisation works at Springfield and Tolworth.

All the sales contributing to this have been subject to appropriate scrutiny by the Department of Health and Social Security and HM Treasury and each case is subject to independent scrutiny to demonstrate that the money paid to the NHS represents value to the taxpayer.

Whilst accommodation will no longer be managed within the existing estate at Springfield, we are supporting staff in finding local alternatives. For example, we have managed to include Trust staff within Wandsworth's affordable nomination rights, which allows us to support our key workers in being able to apply for affordable rented units within Wandsworth. Specifically, we are working with Halcyon and the Garratt Mills development in Earlsfield and supporting staff in being nominated for affordable provision here.

***Q: When will the Trust be moving out of Queen Mary Hospital (QMH)?***

Lavender Ward at QMH will be relocated into the new Trinity building at Springfield in October 2022 and in April 2023 Laurel and Rose Wards will also be relocated to Springfield before moving to their refurbished home in Tolworth in the summer of 2025.

***Q: After the Trust moves inpatient services out of Queen Mary's Hospital (QMH), what are the plans to care for Putney and Roehampton service users?***

Putney and Roehampton service users requiring inpatient admission will be offered beds at our Tolworth or Springfield wards once the QMH wards move across.

As was documented in our initial consultation document of 2015, it has always been our plan to move inpatient services out of QMH; this is due to a number of factors.

It is better for our wards to be consolidated together so that relevant wards, staff and support services are close to each other and therefore our patients. It is also more cost effective, from a clinical perspective.

We provide inpatient care across South West London as a region, not as a borough based provision. All the QMH wards will initially move to Springfield University Hospital (meaning they will still be in the same borough as Putney and Roehampton, Wandsworth) before two wards move out to the redeveloped Tolworth, ensuring our footprint is more spread out.

***Q: I've noticed there is increased car parking for the private residents of the Springfield Village, will this be offset by more car parking for visitors and staff?***

By August 2024, 253 parking spaces will be available to staff and visitors following redevelopment works taking place at Springfield. Whilst this represents a reduction, there will be smaller numbers of non-clinical staff on site at Springfield, which will offset this.

The pandemic has accelerated the use of agile working practices across the Trust and these remain in place as our working culture evolves. In the long-term this will mean fewer non-clinical staff will be on site at any one time, resulting in significantly lower demand for parking spaces.

Alongside this, the Trust's Travel Action Group is working to encourage more sustainable modes of transport like car sharing, bicycle use and walking.

***Q: Will existing wards at Tolworth Hospital (Ellis and Lilacs) match the standards of the new wards that are due to be developed from 2023?***

Parity in quality of clinical areas across our Trust is really important. In recent years we have invested over £7m to improve Ellis and Lilacs Wards at Tolworth Hospital and, as with all the works we are progressing, these refurbishments were carried out in line with the standards used for the new buildings at Springfield.

The development of our new wards at Tolworth Hospital will build on our knowledge and learnings from Springfield to ensure they are responsive to patients and colleagues needs and provide first class environments for recovery and care.

***Q: Could you assure us that there are no plans to reduce overall bed numbers at Tolworth by closing one of the outlier wards?***

Our current plans for Tolworth Hospital will result in an increase of three beds across the Trust, meaning that by August 2025 there will be a total of 123 beds over seven wards at Tolworth.

By this point there will be 370 beds across the Trust as a whole. We continue to work through our bed modelling and are taking the necessary steps to manage our overall bed provision.

We can confirm there are no plans to close any of the Trust's existing wards.

***Q: £11.2m has been ringfenced for the building of a new mental health facility on the Barnes Hospital site. With inflation likely to increase even more this will not 'buy' what it would have done when awarded several years ago. Will the Trust find extra finance to provide the same level of excellent facilities (helping staff retention as well as super patient care) for the patients from Richmond Borough as you have been so proud to provide on the Springfield site for other patients?***

At present we are working through the tendering process for the construction works for our new facility at Barnes Hospital. This is a joint tendering process with LocatED, an arms-length body of the Department for Education, who are developing an SEMH school at the site.

We are working hard with LocatED on the financial aspects of the tender, and the pre-tender estimates give us confidence. Together with our Finance Department the Trust's Estate Modernisation Programme team are also proactively looking at other sources of funding to minimise any external economic risks.

***Q: What impact will the development of the Integrated Care System (ICS) and South London Partnership (SLP) have on the Trust? Will the Trust remain as the main mental health provider to our five boroughs?***

Our Integrated Care System (ICS) sees health and care organisations in our local area working together to improving the care, health and wellbeing of the population and reducing health inequalities.

South West London's ICS aims to:

- Improve outcomes in population health and healthcare
- Tackle inequalities in outcomes, experience and access
- Enhance productivity and value for money
- Help the NHS support broader social and economic development

We are an active partner in the development of our local ICS, working with providers and commissioners across the system. We will continue to be the main mental health provider across the five boroughs we serve.

The Trust plays an important leadership role within the ICS.

- Our Chief Executive is a member of the ICS Board and the Joint Senior Responsible Officer (SRO) for mental health in South West London (SWL) and is the SWL Integrated Care Board mental health lead
- Our Chief Executive is also South West London's Digital Lead
- Our Director of Nursing participates in the South West London ICS quality board
- Our Finance Director participates in the South West London ICS Finance and Estates Groups
- Our Medical Director is the co-chair of the South West London ICS Clinical Senate

We are also active members of the ICS Mental Health Transformation Board which aims to drive forward improvements in mental health across South West London. It has now implemented changes to allow a greater focus on community mental health transformation.

We are working with SWL ICS colleague to develop a new Mental Health Strategy for SWL which will outline priorities that all system partners can commit to.

We are also exploring how we develop greater collaborative working between mental health partners to drive forward transformation. This 'provider collaboration' builds on work of the South London Partnership and will be a key vehicle for delivering change and improvements in mental health care and wellbeing for our local population.

The South London Mental Health and Community Partnership (SLP) is a Provider Collaborative and thus represents the three main providers of mental health services in South London working collaboratively to the benefit of our collective populations. There is no intention to merge any of these Trusts who continue to retain their own sovereignty.

The Integrated Care System sees health and care organisations in our local area working together to improving the care, health and wellbeing of the population and reducing health inequalities.

The development of the Integrated care Partnership and Integrated Care Board (ICB) is part of the national direction of travel to encourage greater use of provider collaboration and this is currently being worked through with both ICB and SLP colleagues. This approach helps to cement our position as a provider of a high quality mental healthcare and builds upon the successes of the current provider collaborative projects.

## Recruitment

### ***Q: Is the Trust able to provide a road map for recruiting and consulting with more Black and Ethnic minority clinicians at senior level?***

The Trust is committed to ensuring that diversity of our staff is well represented at all levels of our workforce. We value, respect and celebrate the diversity of our workforce and are committed to reducing inequalities and discrimination that groups may face. We have worked tirelessly as a Trust to ensure that staff feel valued, appreciated, celebrated and belonging, no matter their background or protected characteristic, and we will continue to do so.

We know that the experience of colleagues from ethnic minorities are not the same as that of our White colleagues and patients, and we are committed to making our Trust truly diverse and inclusive for all.

As part of our commitment to advancing racial equity, equality, diversity and inclusion each of our Trust Board members has written an individual pledge describing how they will champion equality, diversity and inclusion in their roles. Of the Trust workforce, 50% are people from ethnic minorities. Ethnic minority staff are overrepresented in some of the lower bands - Band 2 (73% BAME) and 3 (75% BAME), and underrepresented in higher bands, Band 8b–9, and very senior managers.

We are taking a number of actions to address this:

- In March 2021 we launched Cohort 2 of our Reverse Mentoring programme and held monthly reflective sessions for Mentors and Mentees.
- The Trust is committed to having diverse recruitment panels for all senior management interviews which are Band seven and above.
- We have re-launched our Diversity in Recruitment (DiR) champions programme, with regular recruitment and training happening.
- Our Trust's new WRES action plan 2021-22 was launched on 31 October 2021
- Our Equality and Diversity Induction training features discussions on WRES and WDES

***Q: How many current vacancies do we have within our Trust and what measures are being taken to ensure we fill these vacant posts quickly? Are there specific departments within our own trust where there is greater shortfall and areas that are fully staffed?***

***Is there a general shortage of clinical staff? If so is there a trend showing groups or individuals not joining the Trust or leaving before retirement eg newly qualified or experienced nurses, doctors, et al.***

There is a national shortage of clinical staff and tackling the workforce challenges and increasing retention are a priorities for us.

We have approximately 20% vacancies at present and there are a mixture of actions we are taking in addition to working with services to provide clearer and more robust recruitment and retention plans.

These actions include reviewing our attraction routes to ensure greater number and diversity of applicants to the Trust, greater use of apprenticeships, working with other partners to provide more rotation roles, providing improved career plans for individuals, improved talent approaches to ensure we identify and support talent within the organisation, and reviewing of our recruitment processes and ways that we promote the benefits of working at our Trust as we go through this exciting period of positive transformation.

CAHMS and Community Services are key priorities for recruitment but there are other important areas in the organisation too. There are also other areas where the staffing is more stable and we are seeing what we can do to learn about what makes the difference in these teams.

## **Services and care**

***Q: Are there any plans to roll out access to the Recovery College to Primary Care service users and patients?***

Our Recovery College uses a recovery-based approach to encourage people to become experts in their own self-care and wellbeing. It gives its students the tools they need to manage their conditions and for families, friends, carers and staff to better understand mental health conditions and support people in their recovery journey.

While the majority of Recovery College students are those in receipt of secondary care services, ie community teams and inpatient wards, where the Trust runs primary care services, for example Talk Wandsworth and other IAPT type services, clients of those services have access to the Recovery College.

Anyone registered with Merton Uplift has access to the Merton Uplift Recovery courses. Those who are receiving ongoing clinical services will additionally have access to the full Recovery College.

Anyone with Primary Care Plus who is also on the SMI register has access to the Recovery College.

***Q: I feel the quality of the service provided by care coordinators needs to be addressed. I understand that they are not inspected and feel that the service is deteriorating.***

We have recently employed Advanced Clinical Practitioners (ACPs) across our Community services who support the supervision and development of Care Coordinators.

We have also increased our student placements in the community teams so they are being developed to undertake care co-ordinating roles once qualified, along with a 'preceptorship' programme tailored for community nurses.

In addition, we hold mock CQC inspections across all clinical teams and as the CQC also inspect our community teams they are always in preparation to improve quality of care in line with the CQC standards.

***Q: Does the Trust communicate with major mental charities like Mind on subjects like CTOs, or how to make patient care more responsive to patient needs? I'm aware they have made some forthright contributions to the review of the Mental Health Act.***

We have worked really hard to establish local relationships with the third and voluntary sector and this includes our local and national Mind groups, particularly within our community services. The work of our Patient Involvement Team and our Lived Experience Network is also central to ensuring our care is responsive to patient needs.

As well as this, we link in strongly with NHS Providers and NHS Confederation to ensure views are shared on important areas such as the Mental Health Act and we know there is always more that we can do.

***Q: Can a patient be given alternative choices to medication if they do not want to take medication?***

Patient choice is very important within our services and our staff work in partnership with patients and their carers in developing their own treatment/care plans. Medication is not the only mode of treatments available for our patients and we offer a number of psychological therapies, nursing, occupational therapy interventions as well as peer and employment support, recovery and wellbeing initiatives.

We have a growing number of Specialist Mental Health Social Workers in our teams who can provide other forms of support to complement the medical model and therapy approaches used.

The Trust's Quality Improvement & Innovation Team Our (QII) is currently progressing a project looking further into this issue in collaboration with our Patient Involvement team. For further information or to get involved you can reach them at [QII@swlstg.tr.nhs.uk](mailto:QII@swlstg.tr.nhs.uk).

Over 2022/23 we will also be undertaking a project with partners to look at development of Advance Choice Documents to ensure that they are available and respond to the aspirations of the new Mental Health Act Reform.

## Misc.

### ***Q: Will the Trust commit to recruiting Lived Experience individuals to the Board?***

Strong person-centred care and inclusive leadership are key to how the Trust is building its future.

Our Involvement Team oversee lived experience involvement across the Trust, in line with Trust's mission of Making Life Better Together and contributing to all Trust Corporate Objectives, most particularly, the strategic ambition of 'Reducing Inequalities'.

To this end, our involvement team has formed a Lived Experience Network - a group of 271 Lived Experience Members who have lived experience of accessing Trust services and/or caring for and supporting people who have accessed Trust services within the last five years.

For example, we have implemented a Coproduced Model for Coproduction and Involvement, with the aim that Trust staff, the Involvement Team and Lived Experience Members will work together to ensure that the Trust routinely seeks, reflects on, and is responsive to, the views, experiences and needs of patients and carers. This will be held at the heart of decision making and efforts to improve, develop and deliver safe, high quality patient care

This year we ran a pilot project to support mandatory lived experience expertise on recruitment and selection panels of staff at band seven and above. Many senior roles within the Trust, including the Director of Nursing and Medical Director roles have included the addition of a stakeholder panel, as well as a lived experience representative on the interview panel or 73 other senior roles.

Our work will accelerate in the coming year, with the development of a Lived Experience Forum in line with our Involvement strategy: to appreciate and embrace diversity and amplify the voice of people with lived experience.

### ***Q: In the last few years despite various references to underfunding of mental health, the Trust's income and expenditure has grown significantly from year to year. The growth now seems to be coming to an abrupt stop and the Trust is apparently being required to make an unusually high level of savings with consequences for service which we do not yet know. Does this represent a rowing-back or at least a pause in the government's long term plan for the NHS and ought we to be concerned about this?***

The NHS's Mental Health Investment Standard remains in place and commissioners are investing to those required levels. Additionally the monies associated with the Long Term Plan have continued to flow to providers. Notwithstanding this it is fair to say the coming year is a challenging one with unprecedented levels of demand.

More details on Trust expenditure can be found in our [Annual Report](#).

### ***Q: I am a volunteer and I am interested in inviting the Trust to create a new concept of kindness for our new community. How can I make this happen?***

That's a great idea. Please contact our Involvement Team at [Involvement@slwstg.nhs.uk](mailto:Involvement@slwstg.nhs.uk)

to discuss this in further detail.

***Q: How can stigma be reduced in communities that have entrenched negative ideas about mental illness?***

Our IAPT services (Talking Therapy services) are involved in many initiatives reaching out and working in partnership with local community groups to promote mental health and well being and continuing to try and address the stigma surrounding mental health.

These include IAPT outreach/partnership initiatives with Age UK, South Asian Groups in Wandsworth and Merton, Fulham Football Club, Roehampton Women's Network, Food Bank Centres across Wandsworth, the Polish Family Association in Merton, local libraries, universities and colleges.

We also support key calendar events such as World Mental Health Day and Mental Health Awareness Week in May, with activities taking place across our teams. Milestones like these are really important in raising awareness of mental health and breaking stigma around mental ill-health

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To find out more about SWLSTG click [here](#)

## Our values

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**Respectful**



**Open**



**Collaborative**



**Compassionate**



**Consistent**