

Public Consultation on the establishment of the Bolton, Salford and Trafford Mental Health NHS Trust

Contents

Foreword	2
Introduction	3
Background	3
Responding to the Public Consultation	3
Public Meetings	4
Background to the Proposals	5
Reasons for Change	5
National Picture	5
Local Context	5
Options considered for future management arrangements	5
Maintain the existing arrangements	5
Primary Care Trust based provision of services	6
Development of a new mental health NHS Trust	6
The Benefits of Establishing a New Specialist NHS Trust	7
Maintaining a focus on Bolton, Salford and Trafford services	8
Unique identities	8
Encouraging diversity	8
Local leadership and management	8
Local authority responsibilities and accountability	8
Commissioning services for the future	10
Description of the proposed new NHS Trust	11
Population profile	11
Population profile	11
Services to be Included in the Proposed New Trust	13
Adult mental health services	13
Older adult mental health services	13
Adolescent mental health services	13
Secure services	13
Specialist services	14
Support services arrangements	15
Quality and governance arrangements	15
Human resources	15
Finance	15
Information and performance management	15
Estates	15
Proposed transfer of services to the new NHS Trust	16
What Happens Next?	16

Foreword

The Greater Manchester Strategic Health Authority, on behalf of the Secretary of State for Health, invites you to consider proposals to form new management arrangements for Bolton, Salford and Trafford mental health services from 1 April 2003.

Over the last year the public services within Bolton, Salford and Trafford have been working towards strengthening the management arrangements for local mental health services. In Bolton, as in Salford, there has been agreement to bring together NHS and social care mental health services and similar arrangements are currently subject to local consultation in Trafford. During 2001 arrangements were made for mental health services in Bolton and Trafford to be managed by a specialist mental health NHS Trust. Consequently the contracts for these services were transferred to the Mental Health Services of Salford NHS Trust on 1 April 2002.

The formal establishment of a new organisation for the management of these services is seen as an important next step in the development and delivery of first class mental health services for Bolton, Salford and Trafford. The proposal would allow the existing local and specialist mental health services provided through the Mental Health Services of Salford NHS Trust to formally join with those in Bolton and Trafford in creating a single new NHS Trust.

These proposals will not preclude future changes to the organisation and development of mental health services. The Bolton, Salford and Trafford primary care trusts and local authorities are discussing improvements and changes to services, which will be subject to further discussion and in some cases, further public consultation.

I would encourage you to take this opportunity to share your views on these proposals. I welcome your comments and contributions, which will be reported to the Secretary of State for Health and taken fully into account before any final decision is made.

This document is primarily aimed at those who use the services, those who care for them and the wider community.



Philip Smith
Chair
Greater Manchester Strategic Health Authority

1. Introduction

Background

As part of the Government's agenda for modernising the National Health Service (NHS), services in the north west have already or are now undergoing organisational change in order to support the necessary improvements in services offered to the public. We have seen the development of Primary Care Trusts and the establishment of specialist mental health organisations such as the 5 Boroughs Partnership NHS Trust, Pennine Care NHS Trust, Lancashire Care NHS Trust and the Manchester Mental Health and Social Care Trust.

Within Bolton, Salford and Trafford there has been considerable debate as to the best way of managing mental health services in response to both national policy and the emergence of primary care trust and local authority led commissioning. Locally there has been a long-standing commitment to achieve effective integration of NHS and social care mental health services including integrated management and common policy and support frameworks. This approach has the support of the Borough Council in Bolton and the City Council in Salford and is being implemented in these areas. In Trafford proposals are currently being consulted upon with health and social care staff, and users and carers. If the Council approves the final arrangements for integrated provision in January 2003 there will be fully integrated NHS and social care mental health services across Bolton, Salford and Trafford by 1 April 2003.

This consultation document sets out proposals to create a new NHS Trust to provide mental health services and social care services in partnership with local authorities in Bolton, Salford and Trafford and a range of specialist mental health services for the northwest and beyond. It also allows for the dissolution of the Mental Health Services of Salford NHS Trust, which would be replaced by the new NHS Trust.

The consultation will be for 12 weeks, ending on 10 February 2003. The specific proposals are:

- The establishment of a new specialist mental health NHS Trust on 1 April 2003 or as soon as possible after that date, (wherever a date of establishment is used in this document it should be read in this context).
- The new mental health Trust would provide mental health and substance misuse services for working age and older adults for the populations of Bolton, Salford and Trafford and a range of specialist mental health services for the northwest and beyond.
- The new mental health Trust would provide integrated mental health and social care services across Bolton, Salford and Trafford.
- The name of the new NHS Trust would be the Bolton, Salford and Trafford Mental Health NHS Trust.
- The relevant staff, property, rights and liabilities would transfer to the new NHS Trust from:

Mental Health Services of Salford NHS Trust
Bolton Hospitals NHS Trust
Trafford Healthcare NHS Trust.

As a consequence of the above proposals the Mental Health Services of Salford NHS Trust would be dis-established on 31 March 2003.

Responding to the Public Consultation

The Secretary of State for Health welcomes the views of those with an interest in mental health services identified in these proposals. Written comments are invited, for which the

response form as part of this document can be used, although all responses, in whatever form they are received will be considered. All responses will be available for public scrutiny.

Comments should be made, in writing during the period of consultation and before 10 February 2003 to:

Neil Goodwin, Chief Executive
Greater Manchester Strategic Health Authority
Gateway House,
Piccadilly South
Manchester M60 7LP

e-mail: claire.swithenbank@gmscha.nhs.uk

At the end of the consultation period, all the responses received will be considered by the strategic health authority, which will make recommendations to the Secretary of State for Health for a final decision to be made.

Public meetings

As part of the process of consultation with local people, users, carers, staff and other interested parties, a number of public meetings have been arranged. Details can be seen in local press, libraries and in the headquarters of local NHS and local authority organisations.

At each meeting copies of this document will be available, a presentation of the proposals made and opportunity for discussion and questioning will be provided.

Facilities for sign language will be available at each meeting and Interpretation can be made available if requested in advance through:

Mr. Simon Large
Project Office
Trust Headquarters
Mental Health Services of Salford NHS Trust
Bury New Road
Prestwich M25 3BL

Tel: 0161 772 3925
e-mail: slarge@trushq.bstmhp.nhs.uk

Other meetings will be held to target opportunity for presentation of the proposals, questions and discussions to particular audiences, as follows:

- Service users: meetings will be arranged with and notified through the principal user networks across the local patches (BAND/Patients Council, TUG and SIS) to offer users a real opportunity to hear the proposals and respond to them.
- Carers: meetings will be set up with and through local mental health forums, and within the individual services, to offer carers a real opportunity to hear the proposals and respond to them.
- People with particular communication needs within the services.
- Staff and staff organisations from health and local authority services, and with,
- Local statutory agencies, including those engaged with specialist mental health services, to include:
 - Community health councils
 - Primary Care Trusts
 - Local authorities
 - Neighbouring NHS Trusts

Dates and times will again be available through the project office.

During the period of consultation requests for information or for additional meetings for recognised groups with an interest in mental health services for adults, older adults and young people, may be made to Simon Large at the above address.

2. Background to the proposals

Reasons for Change

National Picture

The Government wants to ensure that mental health services become expert, integrated, responsive and efficient. The NHS needs to be more responsive and involving of users, carers and communities in the planning, running and monitoring of services. The health needs of individuals will take priority over organisational needs. Strong health and local government relationships can create a framework and culture of devolved power and responsibility resulting in more locally focussed and integrated delivery of services.

Local Context

As a result of national policy decisions, there has been significant change and reconfiguration in terms of organisational delivery of mental health services in the north west. For Bolton and Trafford in April 2002, this resulted in the contract for delivering their mental health services transferring to the Mental Health Services of Salford NHS Trust from large acute hospital NHS Trusts.

New management arrangements for Bolton, Salford and Trafford must reflect the best interest of the local communities. The new arrangements must deliver and maintain effective integration of health and social care, and support partnerships between the key organisations contributing to local community well-being. They must create stability for local services, demonstrate strong and capable mental health service leadership and be committed to maintaining a local mental health service focus, building on the existing foundations of partnership working.

The management arrangements must reflect the changed roles and responsibilities of local authorities and primary care trusts in commissioning, monitoring and ensuring effective and efficient delivery of health and social care, and the increased involvement of users, carers and staff in the running of services. The new organisation must have transparent and robust arrangements for ensuring that it has the highest levels of probity and governance in its operations.

Options considered for future management arrangements

Maintain the existing arrangements

This option would continue with the current management arrangements unchanged. The Mental Health Services of Salford NHS Trust would continue to provide mental health services to the residents of Salford and a range of specialist and secure mental health services beyond. Bolton and Trafford's mental health services would be provided by the Mental Health Services of Salford NHS Trust through a contractual agreement with the primary care trusts and local authorities in those areas.

This arrangement has not allowed full representation of equal partners in the management and delivery of services. The representation of Bolton, Salford and Trafford services, social care services, service users, local authorities and professional views at the most senior level in the organisation is difficult to achieve through existing board arrangements. Without the establishment of new management arrangements, existing arrangements will always be seen as an interim solution that cannot fairly represent or be acceptable to key stakeholders.

This option is not considered sustainable as a model for future mental health service delivery or development.

Primary Care Trust based provision of services

This option suggests the responsibility for management of all community and inpatient mental health services in Bolton, Salford and Trafford transfers to the existing primary care trusts. This could involve all services or could leave specialist and secure mental health services to be managed by the Mental Health Services of Salford NHS Trust.

In Bolton, Salford and Trafford, the primary care trusts and local authorities acknowledge the importance of integrated in-patient and community mental health services. Other issues include organisational size and financial and managerial viability. It may be difficult to sustain the management costs and professional attraction to the highly specialised and mainly tertiary secure and specialist services that would be left within Mental Health Services of Salford NHS Trust.

Another issue is maintaining a sufficient critical mass of services to ensure staff recruitment, retention, professional support and leadership, training and development. Providing local services within each primary care trust may create small volume services that would need to compete for resources and support alongside other community and primary care services. It is possible that there would be a loss of focus on mental health matters given the other wider healthcare demands on the primary care trusts. Importantly, government is placing a very real focus on mental health matters and is seeking significant improvement and growth in mental health services.

For the above reasons the option of transferring the majority of services to primary care trusts may not be appropriate. However, there is a balance to be struck with the need to provide locally sensitive services. Therefore, a number of services are currently under review as a prelude to possible changes (see page 10).

Development of a new mental health NHS Trust

This option brings the existing specialist and secure services within the Mental Health Services of Salford NHS Trust, together with Bolton, Salford and Trafford's mental health services, in a new specialist mental health organisation based on partnership working arrangements.

This option allows mental health services to promote and deliver excellence and efficiency of operation through common identity and a sharing of learning with stakeholders, users and carers. It allows for the development of professional leadership, full partnership working and the ability to ensure appropriate accountability arrangements to meet the responsibilities of delivering local integrated health and social care mental health services.

This option would allow a continuation of the service benefits that have started to emerge from the last year of partnership working with primary care trusts and a consolidation of the specialist platform from which local service development and local authorities can be supported. The option would not prevent further change via primary care trusts and local authority commissioning.

For the above reasons this organisational management approach is put forward as the preferred option.

3. The Benefits of Establishing a New Specialist NHS Trust

It is envisaged that the new NHS Trust would create opportunities to develop and deliver services that are better from the viewpoints of users, carers, the community, commissioners and staff alike. It is anticipated that it would do so by:

- Building on the strengths and achievements of the existing services.
- Creating an organisation in which local services can develop and positively change whilst drawing on the strengths of a substantial organisational infrastructure.
- Creating an organisation that focuses its main priority on mental health, that would have high calibre management expertise and leadership.
- Giving people who use the services, and their carers, a strong say in the planning, development, monitoring and review of all the services.
- Creating a new NHS organisation that recognises and responds to the need to demonstrate accountability to primary care trusts and local communities through joint management and monitoring arrangements with local government.
- Enabling partnership working that is already developing between health and social care to become even more joined up and effective.
- Ensuring that clinical practice is based on best practice, producing the best possible outcomes for users of the service and their carers.
- Promoting effective governance, in particular supporting better learning from within and outside the organisation.
- Offering a high level of job satisfaction that would be reflected in the recruitment and retention of the highest quality people.
- Responding positively to proposals for positive service change from primary care trusts and local authorities.

4. Maintaining a focus on Bolton, Salford and Trafford services

Unique identities

The new NHS Trust would recognise and celebrate the unique identities of each of the communities it serves. Whilst the communities of Bolton, Salford and Trafford may share some common experiences with each other and with other communities in the northwest, their individual histories, development and social, cultural, political and economic frameworks are and would remain different.

Each of the communities has their own complex population mix. Their individual health and social care infrastructure reflects the historical impact of local needs and how services have developed. The new management arrangements for the services would endorse these differences and support differing local working and management arrangements to reflect the unique communities of Bolton, Salford and Trafford.

Encouraging diversity

The new NHS Trust would reflect national policy and best practice, support diversity and promote equality in all its endeavours. It would understand the ways in which citizens have been adversely treated in the past because of discrimination on the grounds of race, gender, nationally, sexual orientation and personal belief systems. It would actively combat such discrimination. Further it would promote service delivery which not only accepts difference but also celebrates it. The organisation would wish to work with statutory and non-statutory partner organisations such as local churches, voluntary sector providers and community advocacy organisations to learn from their expertise and experience, and to ensure that persons using the services experience provision that is aware, respectful and tailored to their individual and differing needs.

Local leadership and management

The wider benefits of a specialist mental health Trust would be realised through robust governance structures, economies of scale, shared practice, service networks, recruitment and retention, and training and development. However, these benefits need to be balanced against a requirement to maintain a focus on local service delivery and ensuring that local needs and priorities are considered and reflected in the Trusts' development. It would be essential to create management arrangements that recognize and develop strong local partnership working to maintain a focus on local communities and their interests.

The integrated health and social care services currently provided in Bolton and Salford (and proposed in Trafford) would be the focus for local management arrangements. It is proposed that there would be a director of integrated health and social care services for each of Bolton, Salford and Trafford separately. Each director would be the most senior manager for their respective area with overall responsibility for the delivery of health and social care. They would report to the Chief Executive and be members of the NHS Trust board.

Local authority responsibilities and accountability

Each of the local authorities social care functions would be delegated to the proposed Trust under a section 31 agreement for integrated provision in accordance with Health Act Flexibilities (1999). Staff currently employed by each local authority would be seconded to the Trust and a lead social care practitioner post would be identified for professional accountability issues as an integral part of local management arrangements. Each local authority would continue to provide support functions and appropriate financial accountability arrangements would be put in place to monitor budget allocation and spend.

The principles of local focus and responsiveness of services would be upheld and monitored through a range of mechanisms both within and external to the Trust. Local authority and primary care trust commissioning arrangements would require the new NHS Trust to develop

and change services in response to local need with clear outcome measures and performance monitoring. It is also crucial that the continuing legal accountability of Directors of Social Services for the provision of social care services is acknowledged in the Governance arrangements. Mechanisms would be established to ensure that that accountability is recognised and that:

- social work/social care responsibilities and practice are carried out in accordance with statutory guidance and modern practice
- there is an appropriate focus on the social care performance framework in addition to the health performance assessment framework
- that links are maintained with other user groups such as children and young people, older people, people with learning and physical disabilities
- there is a focus on human resources management as social care staff remain local authority employees
- there is a multi disciplinary training strategy
- that there are robust mechanisms for sharing complaints and knowledge about serious incidents which require media and political management.

Local authority overview and scrutiny committees would provide a route of democratic accountability and the NHS Trust would expect to participate fully in these arrangements.

The new NHS Trust board would reflect its geographical coverage through recruitment of non-executive directors from the three local authority areas. Also, the new NHS Trust would seek to develop closer working arrangements with each local authority through the appointment of a nominated elected member to act as a formal link between the Trust and their respective local authority.

Each local authority link member would attend the board meetings and contribute to the discussions and decision-making processes with particular reference to their local communities. This role would carry considerable influence in the business of the board.

5. Commissioning services for the future

Responsibility for commissioning local mental health services rests with primary care trusts and local authorities across Bolton Salford and Trafford, taking into account the views of service users and user representation groups. The primary care trusts representing Bolton, Salford and Trafford, with local authorities and the Bolton Salford & Trafford Mental Health Partnership have already commissioned the Sainsbury Centre, a specialist mental health consultancy and advisory service, to review a number of services.

The primary care trusts and local authorities wish to develop more locally sensitive services to meet the needs of their diverse and differing communities. Initially five services are being reviewed:

- Primary care based mental health services
- Psychology services
- Child and adolescent mental health services
- Substance misuse services: and
- Services for the elderly mentally ill

There is a clear commitment from the commissioning organisations to develop integrated clinical pathways with primary care. In line with the wider reform agenda the primary care trusts and local authorities will develop an intermediate tier of GPs with an interest in mental health provision. From 1 April 2003 the primary care trusts will commence discussions with a range of stakeholders including the voluntary sector on the future opportunities for mental health provision.

Based on these reviews the primary care trusts and local authorities will discuss with the proposed new NHS Trust the future local organisation and management arrangements for some of these services from 2003 onwards. It should be emphasised that any proposals for change would involve consulting with the staff and stakeholders of the services and when it is required proposals for change would be subject to public consultation.

6. Description of the proposed new NHS Trust

Population profile

Bolton has a population of 265,000. The community has a significant ethnic population mix with 8.9% of the local population being of Asian origin, the largest group being Indian. The overall mini¹ score for Bolton is 103.9. This masks significant variation within the Borough with some central areas having scores rising to 121.4. Whilst unemployment rates are only slightly above average at 3.9%, the level in minority ethnic communities is twice this. Bolton contains seven of the most deprived electoral wards in England

Salford has a population of 225,000. The community has a complex ethnic mix, though with only 2.2% of the whole being from minority ethnic communities. The overall mini index is high at 124.8, though as with Bolton, this masks significant variation with the lowest area score at 87.8 and the highest at 130.5. Whilst the city has been successful through its economic development strategy in reducing unemployment, rates remain high at 4.9%. The city, in some areas, still suffers extremes in social exclusion and deprivation.

Trafford has a population of 220,000 of which 5% are from ethnic minorities, most centred in only two electoral wards. The mini index shows a slightly higher than average score of 110 but this hides significant variation particularly on a north – south division. Trafford has generally low rates of unemployment.

Values of the new NHS Trust

The new NHS Trust would be committed to:

- Openness, honesty and integrity: The new NHS Trust would conduct itself from the outset with a commitment to accountability and scrutiny. The Trust would fully involve all stakeholders in planning and decision making. The Trust would make early commitment to full implementation of the Freedom of Information Act.
- Developing and maintaining necessary partnerships: The new NHS Trust would engage all its partners in delivering to a shared vision for mental health services. It would develop early and strong alliances across the individual borough services, between the local and specialist services and between its services and those in primary care and provided through other voluntary or independent providers. Shared protocols, the implementation of patient and clinical pathways and the sharing of expertise and resource, lend themselves to the provision of a seamless service to be based on effective partnerships and placing users and carers at the centre.
- More choice: The new NHS Trust offers opportunity for services to be co-ordinated in ways which facilitate greater choice to service users, primary care trusts and local authorities in respect to where and when they might receive services.
- For staff, the new NHS Trust offers greater opportunity for employment and career development opportunities within a single organisation. Such access to a wider breadth of working and developmental experience could serve to support greater job satisfaction and retention levels.
- Active service user and carer involvement: The new NHS Trust would demonstrate a real commitment to user and carer involvement. It would ensure a real involvement by users in the decision-making of the organisation by having in place, ahead of proposed patients councils, a user council to act as a sub-committee of the board to provide ongoing advice.
- The council would also take views and opinions from users and might also serve to support increased levels of user/carers audit and research.

¹ The Mental Illness Needs Index (mini) gives a measure of the level of mental health need in a given population. With 100 as a standard score, less than 100 denotes a community with lower than average mental health need, a score of greater than 100 suggests significant mental health need.

- The NHS Trust would also support the development of user and carer forums/groups for each service. These local, accessible and responsive forums would allow an ongoing dialogue between service and user/carer with all the anticipated cultural and care/support benefits that might be delivered.
- Active staff involvement: The existing Partnership has already demonstrated its commitment to engage with and support service staff. The findings of a staff survey show that generally staff in the local and specialist services feel more involved in the organisation and feel more in control of their working lives than is generally the case elsewhere in the NHS.
- The new NHS Trust would establish a professional council, a sub-committee to the Trust board, to ensure that professional opinion on a wide range of issues is considered.
- More community involvement: The new NHS Trust would work with primary care trusts and local authorities to develop a regular dialogue with local communities. Through local community committee and other structures, the NHS Trust's services would engage with and respond to the views of local residents in each of the localities
- Value for money: The new NHS Trust would place emphasis on ensuring it operates efficient and effective financial management as well as on high quality clinical arrangements.
- Integration of health and social care: In Bolton, Salford and Trafford there has been long-standing commitment to achieve effective integration of NHS and social care mental health services including integrated management and common policy and support frameworks. Such integration would allow service users to benefit from seamless and effective multi-disciplinary care and treatment services, whilst allowing each of the different health and social care professional groups to maintain their discrete professional identities.

7. Services to be Included in the Proposed New Trust

It is proposed that all of the following services are included in the establishment order for the new NHS Trust (see Appendix A for more detail):

Adult mental health services

Bolton provides a range of community mental health services including various teams for serious mental illness and primary care liaison, in-patient assessment and treatment, and long-term rehabilitation and support. Psychological services are also available for patients in the community and hospital setting. Bolton's in-patient and day hospital services are based at Bolton Royal Hospital.

Salford provides a similar range of services for adults as is found in Bolton. In-patient services are located in the Meadowbrook Unit at Hope Hospital.

Trafford provides a broad mix of community and inpatient services for adults. The centre for inpatient care and treatment, the Moorside Unit, is located at Trafford General Hospital.

Each of the communities is also served by community drug and alcohol services based in each area.

Older adult mental health services

Bolton, Salford and Trafford services each provide community assessment, support and treatment for their older populations. Hospital based assessment and treatment facilities, day hospital, respite and continuing care are also available. Bolton also provides a dedicated admiral nursing team and a dementia treatment clinic. Salford also provides a primary care older persons mental health team, a liaison service and a consultant domiciliary service.

Adolescent mental health services

The Mc Guinness Unit based at the Prestwich site provides comprehensive assessment and treatment services for adolescents who have serious mental health problems and their carers. The service is supported by an on-site school.

Secure services

Mainly based at the Prestwich site these include;

- The Adolescent Forensic Service. This national service provides inpatient multi-disciplinary assessment and treatment for 11 to 18 year olds who are detained under provisions of the 1983 Mental Health Act.
- The Adult Forensic Services. This service, principally for Greater Manchester provides assessment, treatment and rehabilitation. The inpatient service is a medium secure unit. Community support includes outpatient, supervision and specialist therapeutic services.
- The forensic adolescent consultation and treatment service (FACTS) provides outpatient and community care for young people aged between 10 and 18 years who present with significant mental health problems in association with high risk, offending behaviour.
- High Dependency Service and Rockley House. These are specialist in-patient and community based residential secure services for person with serious and on-going mental health problems in Greater Manchester

Specialist services

Based mainly on the Prestwich site these services include:

- **Drugs North West:** a specialist substance misuse service providing primary and community care substance misuse services for Manchester and Salford, and specialist inpatient and outpatient services for the northwest. A recently established development provides care and treatment to young people with drug related problems.
- **Alcohol North West:** a community based residential service providing specialist treatment and support to persons with complex alcohol problems in the northwest.
- **National centre for mental health and deafness:** This service for the north of England, Scotland and the north of Ireland, provides inpatient, out-patient day patient and community services for deaf people of all ages, the majority of whom use British Sign Language as their preferred or chosen language.
- **The Red House psychotherapy service** provides one to one and group based psychotherapy support, including a day programme, for residents of greater Manchester.
- **Webb House democratic therapeutic community:** This service, based in Crewe, Cheshire, provides a specialist residential based service for people with severe, enduring and complex interpersonal and behavioural difficulties. The services covers, mainly, the North of England.

8. Support services arrangements

Quality and governance arrangements

The new organisation would ensure clear and effective arrangements are in place to deliver clinical and general governance within and across the integrated health and social care services and the corporate body as a whole. Attention would be paid to effective controls assurance and clinical governance. The new Trust would in particular address itself to a rolling programme of activity to improve its performance in relation to:

- Patient and Public Involvement
- Patient Experience
- Risk management
- Audit
- Research and Effectiveness
- Use of Information
- Staffing and Staff management
- Education, Training and CPD

The existing Partnership has done much to refocus its governance management efforts and has streamlined its board committee and reporting structures to support this agenda. The new NHS Trust would ensure an active and full involvement by users, community and staff in the running, reviewing and revision of the services.

Human resources

The new NHS Trust would have an in-house human resources department responsible for personnel services, organisational development and training, health and safety, occupational health and staff childcare provision within "Bunnyhops" the on-site nursery at Prestwich.

The new NHS Trust would implement initiatives to assist in attracting, retaining and developing a workforce well equipped to meet the needs of the new organisation. In particular, extensive work would continue to be carried out with the assistance of staff and their representatives around flexible working practices drawing upon an excellent track record of investing in training in both clinical and managerial development.

Finance

Since 1 April 2002 the financial responsibility for Bolton and Trafford mental health and substance misuse services has been with the Mental Health Services of Salford NHS Trust. The combined income of the new NHS Trust is projected to be £77.5m in 2002/3 and the fixed asset base to be £54.6m as at 1 April 2003. (see appendix B for more detail)

In order to meet its financial objectives the new NHS Trust would pursue a financial strategy which has, at its core, the following aims:

- to maintain and further develop sound arrangements for corporate governance;
- to work with commissioners and other partner organisations to develop longer term service and financial agreements;
- to ensure that services provide value for money and achieve economies of scale where possible.
- to develop the effectiveness and efficiency of the finance function, in order to support the Trust in providing cost-effective services, whilst achieving its financial objectives.

Information and performance management

The new NHS Trust would benefit from the earlier planning by Mental Health Services of Salford NHS Trust to design and implement an integrated clinical information system (ICIS) and its involvement in the local information strategy project teams (LIS). These developments, and the planned links with local authority and NHS information systems across

services would allow the new NHS Trust to access accurate, up-to-date and relevant information for its management. The rollout of this I.T. based system has already started and by 2004 will deliver quality information sufficient to meet the needs of individual clinicians and care teams, and service management and commissioner information needs.

Estates

The new NHS Trust would have transferred to it a range of NHS estate.

In conjunction with primary care trusts and local authorities the new NHS Trust would consider all existing business cases and other proposals for capital programmes to ensure their viability and efficiency. Where appropriate the new NHS Trust would honour capital plans already established and endorsed by commissioners of service.

9. Proposed transfer of services to the new NHS Trust

It is proposed that the new organisation have transferred to it the following services:

- All services within the formally established Mental Health Services of Salford NHS Trust.
- Those mental health services in Bolton which have already transferred under contract as part of the Bolton, Salford and Trafford Mental Health Partnership.
- Those mental health services within Trafford which have already transferred under contract as part of the Bolton, Salford and Trafford Mental Health Partnership.

In addition the new NHS Trust would manage through partnership agreement those social care services as are agreed to be integrated with mental health services in Bolton, Salford and Trafford.

10. What Happens Next?

This document sets out the rationale for and details of a proposed development of a new specialist NHS Mental Health Trust. It puts this forward as the proposal on which your views are sought.

At the end of the consultation on 10 February 2003 the Greater Manchester strategic health authority will discuss at a board meeting held in public the responses received before the board finalises recommendations to be made to the Secretary of State for Health. Copies of all the responses will be available for the public to see. The Secretary of State will then make a final decision on the proposal which will be made public when it becomes known.

Current Services

This appendix contains a list of the current mental health NHS services provided by the Bolton Salford & Trafford Mental Health Partnership. The proposed new NHS Trust would have responsibility for the provision of these services along with all the professional, administrative, support and managerial staff associated with these services and currently employed by the Mental Health Services of Salford NHS Trust.

Bolton Services

Adult Services

3 Inpatient Wards - K1, K2, K3
 1 Psychiatric Intensive Care Unit - Maple House
 3 Community Mental Health Teams
 - Serious Mental Illness
 - Primary Care Liaison
 Primary Care Psychology Service
 A&E Liaison
 Assertive Outreach
 Crisis Resolution Services
 - Rivington Day Hospital
 - Intensive Support Team
 1 Rehabilitation Ward - Hawthorn House
 Independent Provider Contracts

Community Alcohol Team
 Community Drugs Team

Older Peoples Service

3 Inpatient Wards - J1, J2, Fall Birch
 3 Community Mental Health Teams
 Belmont Day Hospital
 Admiral Nursing Service
 Dementia treatment Clinic

Salford Services

Adult Services

3 Adult Acute Psychiatric Inpatient Wards - 1A, 1B, 2B based at Meadowbrook
 1 Psychiatric Intensive Care Unit
 Meadowbrook Day Hospital
 4 Community Mental Health Teams
 Community Rehab Team
 Assertive Outreach Team
 24-hour Crisis Team (A&E Mental Health Liaison)
 Primary Care Psychological Therapies Service
 Meadowbrook Advocacy Service
 2 Rehabilitation Units
 Community Training Services
 Mental Disordered Offenders Scheme
 Court Diversion Service
 Eating Disorder Community Service based at Ramsgate House
 Transitional Employment Scheme and Pathfinder Employment Scheme
 Duncan Street and Alba Close – Staffed Group Homes
 Community Alcohol Service
 Community Drugs Service

Older Peoples Service

2 Older Adult, Acute Assessment Wards
 Gloucester House Older Adult, Day Unit Facility
 Cavendish House Older Adult Continuing Treatment
 Older Adult Primary Care Liaison Service
 Older Adult Primary Care Mental Health Team
 Older Adult Consultant Domiciliary Team
 Older Adult Continuing Treatment and Respite Wards
 Older Adult Community Psychiatric Nurse Team

Trafford Services

Adult Services

3 Acute Inpatient Wards - 20,21,22 Moorside
 Psychiatric Intensive Care Unit - Ward 24 Moorside
 4 Community Mental Health Teams
 Assertive Outreach Team
 IMPACT-Early Intervention
 Crisis Service Team
 A&E Liaison Team
 NHS Day Care Manor House Resource Centre
 Rehabilitation - Park House and Gibson House
 Mentally Disordered Offenders Team
 Substance Misuse Services Drugs & Alcohol

Older Peoples Service

2 Inpatient Wards - Ward15 Trafford General, Ward 20 Moorside
 3 Community Mental Health Teams
 NHS Day Care - Alexander Day Unit
 Continuing Care - Ashley Ward, St Annes

Secure Services

Adult Forensic Services
 Community Rehabilitation Hostel
 High Dependency Services

Specialist Services

Addiction Services

Alcohol North West
 Drugs North West (including Manchester Drug Service)

Child & Adolescent Mental Health Services

Adolescent Forensic Psychiatry Service
 Adolescent Psychiatry Services
 Forensic Adolescent Consultation & Treatment Service

Mental Health and Deafness

National Centre for Mental Health and Deafness

Psychotherapy Services

North West Democratic Therapeutic Community
 Psychotherapy Services

APPENDIX B

The financial projections for the new NHS Trust are based upon the following assumptions:

- the terms of Service and Financial Framework Agreements are as currently exist;
- the baseline contract values for the transferring Bolton and Trafford services are as negotiated with the original host Trusts;
- the fixed assets transferring to the new Trust are those of the Mental Health Services of Salford NHS Trust, plus certain discreet assets identified within the Bolton and Trafford areas as being used wholly by mental health or substance misuse services;
- the new Trust will continue to get access to its share of the unconditional capital resources for assets still held by the original host Trusts via service level agreements; the share will be ring-fenced and calculated using the standard NHS formula for distribution of this resource.

Proposed Income & Expenditure Account for the Year Ending 31 March 2003/4	
	2003/4 £'000
Total Income	77,552
Expenditure	
Pay	-59,005
Non-Pay	-14,406
Depreciation	-1,422
Total Expenditure	-74,833
Operating Surplus	2,719
Interest Receivable	159
Dividend	-2878
Retained Surplus	0

Proposed Balance Sheet as at Year Ending 31 March 2002/3	
	31/3/2002 £'000
Fixed Assets	
Land	9,804
Buildings	44,947
Plant & Equipment	562
Assets Under Construction	762
Total Fixed Assets	56,075
Net Current Assets/(Liabilities)	96
Total Assets less Current Liabilities	56,171
Creditors: Amounts falling due after more than one year	
Provisions for liabilities and charges	-1,583
Total Assets Employed	54,588
Financed by: Public Dividend Capital	54,588
Total Capital & Reserves	54,588

Precise details of the financial plans will be determined upon the approval and establishment of the new Trust.