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Dear Mr Quinn

Nottinghamshire Healthcare NHS Foundation Trust – Adult Mental Health Services

The Trust embarked upon this third project with Meridian having engaged with them previously on two projects in different 2 localities within our Physical Health division. Having seen the positive results of the previous projects, we decided to undertake a similar piece of work across our Adult Mental Health services.

The 28-week programme with Adult Mental Health was aimed at improving the productivity and processes within our community services, and a reduction in the length of stay across our inpatient units. This combined approach was aimed at improving the patient pathway between the inpatient wards, Crisis Resolution Home Treatment teams and Local Mental Health teams. The programme included all 11 LMHT's (236 x WTE's), 4 CRHT's (80.2 X WTE's) and 9 Inpatient units, including Acute, PICU and Rehab beds with a total of 169 beds.

Following the completion of the work, Adult Mental Health services have achieved;

- A reduction of 24% average length of stay across the Acute wards, from a base of 50 bed nights to 38.5, which equates to a reduction of over 10,000 bed nights which would have otherwise been required by the discharged patients.
- An indicative productivity saving of £3.8m, based on the reduction in required bed nights across the acute wards.
- A Cashed saving of £164k through the closure of vacancies within the CRHT service, representing 28% of the CIP saving for AMH.
- A productivity increase of 69% from 2.3 contacts per WTE day to 3.9 contacts per WTE day, against a target of 4 contacts per WTE day.
- A reduction in spend on Bank, Agency and Overtime of £59k relative to previous year's spend.
- A reduction in length of stay within the CRHT service of 24% against base.
- Reduction in patients staying over 6-week target of 41%, from 81 to 34 patients
- A reduction in the caseload size of the City team from 110 to 64, which was the team having the most significant challenges.

- A cashed saving of £273k through the closure of vacancies within the LMHT service, representing 45% of the CIP saving for AMH
- An additional identified saving opportunity of £602k within the LMHT's, which the trust is formulating a plan to realise in the coming year.
- A reduction in spend on Bank, Agency and Overtime of £71k relative to last year's spend.
- A productivity increase of 33% from 2.1 contacts per WTE day to 2.8 Contacts per WTE day.
- Clearly established targets across each of the community teams, ensuring all staff are working towards the same goal and a more equitable workload.
- Patients having a clear intended discharge date from each service from Inpatients to LMHT.
- A clear reporting process throughout all services, ensuring any issues are quickly identified and dealt with.
- An escalation process across the services, to provide a more cohesive working practice and prevention of delays across services.

The programme has not been without its challenges but has allowed us to make huge strides as an organisation in terms of understanding and utilising our capacity and resources. In addition to this, we are much more able to tackle some of the major operational challenges that have existed within the trust, due to the clear reporting and escalation processes we have in place. We have been able to address some of the existing paradigms and ways of working, which have been engrained within the service for many years.

My advice for other Trust's looking to embark upon a similar journey with you are:

- 1) Ensure there is clear governance at a senior level so that decisions aren't just located at directorate level
- 2) Ensure consistency of use of measures across directorates
- 3) ensure early engagement with Medical and Nursing Director colleagues regarding the standards that are agreed.

The experience overall has been a positive one we have benefitted from greatly. I am happy for this letter to be shared by Meridian with other organisations to assist in identifying and delivering actual savings and productivity improvements, whilst maintaining the appropriate level of patient care.

Yours sincerely



Paul Smeeton

Executive Director