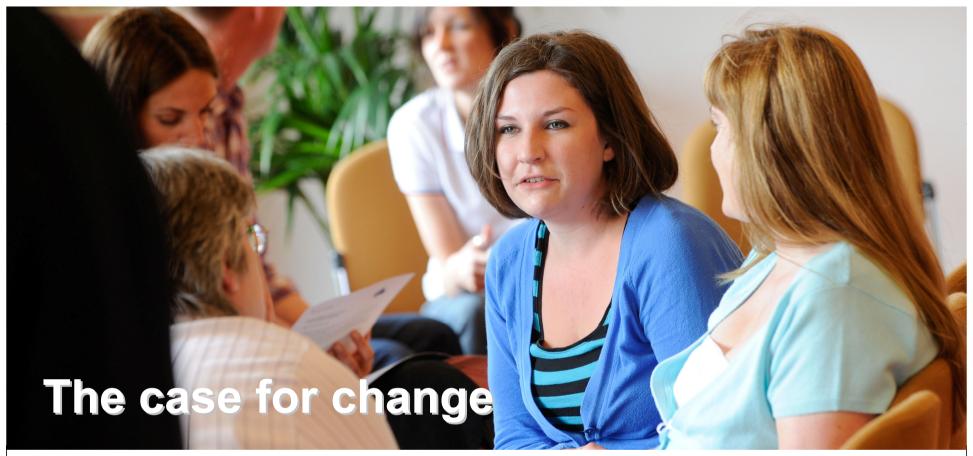


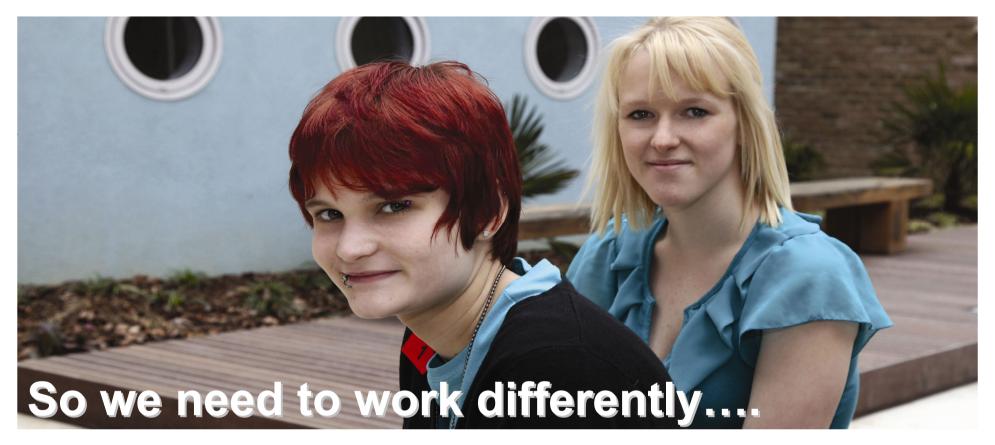
Better by Design

Richard Ford Executive Commercial Director



- National politics and policy
- The economy, money and efficiencies
- Increased demand for services
- Commissioner expectations
- Competition and partnerships





- Faster developments, decisions and delivery
- Innovations and new ventures
- More efficient ways of working
- Leaner thinking
- Tighter controls
- Service changes
- Improved information





- Becoming as good as the best
- Ruthless attention to performance and delivery
- Continuous cycle of growth, refinement and development
- Customer focus, choice, people we serve at the centre
- Underpinned by our R and D and people strategies
- Being psychologically minded
- Delivering this via our staff Compact





Better by Design – core components

- Improved services and better value
- Consistent with New Horizons
- Key components: all care groups
 - Optimal service models standardised for Sussex
 - Based on best evidence
 - Skilled and empowered staff
 - Continued reduction in beds overall
 - Specialist services provided in Sussex where best to do so
 - Increased productivity
 - Realising the benefits of teaching and foundation status



Better by Design – Our Revised Product Range

1. New direct access services such as Health in Mind

- Fast responses
- Streamlined governance
- New treatment modes
- Working with other providers
- Co-location with primary care

2. Community teams as the foundation of everything else we do

- Clarity of purpose
- Increased activity
- Improved relationships, especially with primary care
- Working from fewer better bases

3. Specialist community services (upping the pace on delivery)

- Dementia services
- Dual diagnosis
- Eating and personality disorder services
- Secure and forensic developments
- Others where the business case can be made



Better by Design – Our Revised Product Range

4. Intermediate services

- Specialist therapy centres based on best evidence
- Out of hours responses for crisis
- Dementia developments including memory assessment, home and intermediate care, shared care with acute trusts

5. Residential services

- Self-directed care via individual placements
- Less specialist services in partnerships with third sector

6. Inpatient care for adults

- Improved response to crises means lower demand for beds
- Overall reduction from 459 to 359 acute adult (all ages) beds
 - Fewer wards and fewer sites will release fixed costs
 - Agreed Sussex-wide approach with commissioners

7. Increases in specialist inpatient care

- Secure and forensic
- Learning disability inpatient care
- Tier 4 substance misuse
- Other possible increases e.g. CAMHs