



## THE STATE HOSPITALS BOARD FOR SCOTLAND

### Introduction

The State Hospital (TSH) is the national high security forensic mental healthcare provider for Scotland and Northern Ireland. The organisation provides specialist individualised assessment, treatment and care in conditions of high security for male patients with major mental disorders and intellectual disabilities. Working closely with partners in the Forensic Network for Scotland, the organisation is recognised for high standards of care, treatment, innovative research and education.

### Financial Status

The draft base budgets have been established for the three-year period 2023 to 2026, with forecasts provided to Scottish Government for each year. The baseline for the three-year period shows a small overspend (approx. 1%) in 2023/24 - arising from the key risks and pressures noted below. While it is anticipated that the energy cost pressures may diminish beyond 2023/24 into the next period, the pressures from essential additional staff posts will continue on a permanent basis.

Key risks for the forthcoming period have been identified as:

- Energy costs (potential £550k increase)
- Additional essential operational posts required (potential £300k)
- Costs of enhancing and strengthening essential digital innovation and inclusion (subject to options appraisal)

Other pressures highlighted are:

- Workforce Plan Numbers and Skill mix – the issues relate mainly to nursing costs.
- Pressure from any unfunded element of increased payroll costs that are not met centrally
- Payroll impact continuing from the 2019 outcome of the legal case “Locke vs British Gas” and the potential liability for additional shift payments required
- Potential increases in rates
- A number of costs associated with the hospital estate upkeep / backlog maintenance programme, all monitored closely and outturns adjusted accordingly. Ongoing evaluation of this impact over the coming years is assessed for budgetary pressures to be controlled
- The requirement for the National Boards to provide additional savings of £15m on a recurring basis in 2022/23
- Savings plans – a savings plan around the workforce, capital charges and supplies may need to be extended if the on-going costs of the new Clinical Model (currently at the implementation stage) are more than forecast.
- Year on year, it gets harder to identify workforce savings without affecting patient care or security. The staffing costs for TSH are 84% of the total revenue budget. If plans fall behind the financial balance could be at risk unless other non-pay savings can be found.
- The lack of any increase in capital funding potentially leaves equipment replacement at risk, as the allocation will require close control and review to be able to cover any major equipment replacement programmes.

The capital resource budget has been set with agreed priorities for 2023/24 and is expected to be fully utilised. Capital demands for 2024/25 and beyond are being reviewed. The allocation for 2022/23 was fully utilised, including additional priority funding agreed specifically regarding security work required on the Modified Strong Rooms (MSRs) and the Hospital's main key safes, and other essential approved spending as part of the national support for backlog maintenance work.

The backlog maintenance work in particular is an aspect, which will require ongoing attention, and any additional funding opportunities that arise on a similar basis in 2023/24 will be addressed as a priority. With rising capital costs, the lack of any increase in recurring capital funding currently leaves equipment replacement at risk, requiring close control and review to be able to cover any major demands.

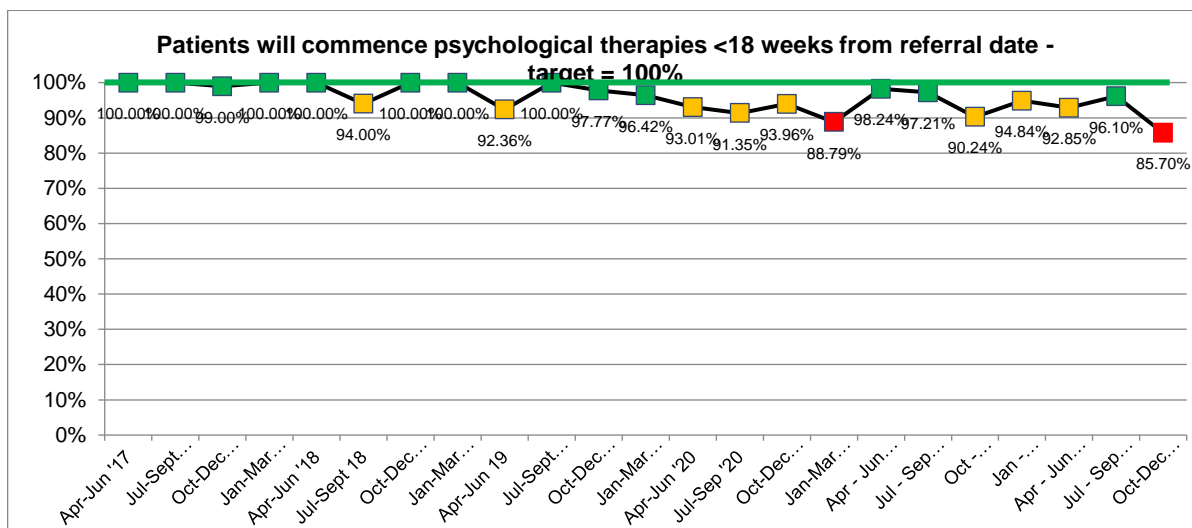
The position for 2022/23 remains subject to audit as part of annual reporting. The provisional year-end position is an expectation of achieving our targeted break-even, likely with a small and immaterial underspend which TSH would hope to be able to carry forward into 2023/24.

**Performance Summary**

**Key Issues:**

Patients will Commence Psychological Therapies <18 Weeks from Referral Date:

The indicator correlates to National Mental Health Indicators for Scotland to ensure that no patient waits more than 18 weeks to commence some form of psychological therapy. Reporting for 2022/23 is currently being finalised. The target is 100% and in Q3 of 2022/23, performance was 85.7%. This includes patients waiting to engage in a future psychological intervention or group therapy who are taking part in another psychological intervention. All patients will have regular access to the psychology team throughout.



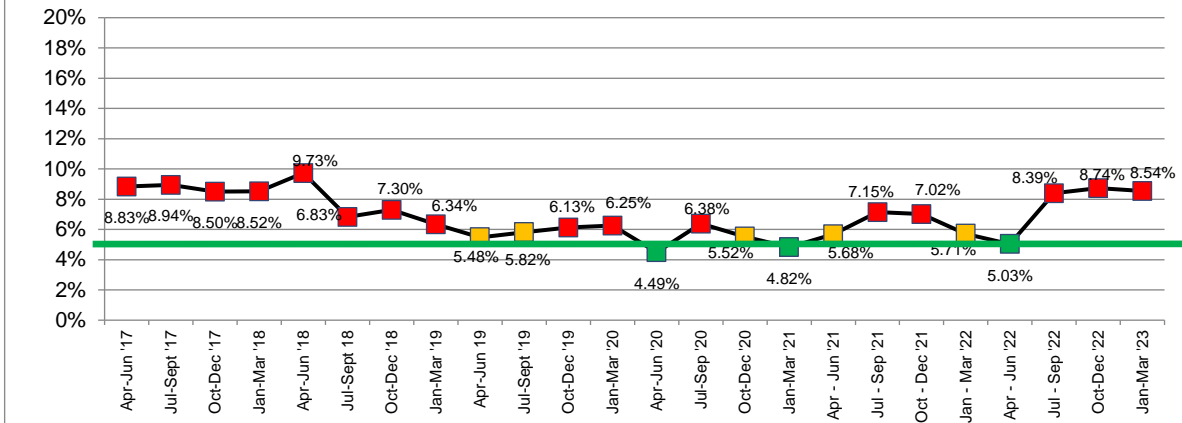
Patient BMI:

The risk of obesity is increased for patients in a high secure setting, and there is focused effort through a Supporting Healthy Choices working group to seek ways to support patients' physical health and to achieve a healthier BMI.

Sickness Absence:

The indicator relates to the national HEAT Standard of 4 %, with a local target of 5% for TSH as a high secure service. In Q4 of 2022/23, the rate of absence was 7.68% compared to 6.39% in the previous year - this is a continued increase to sickness levels by 1.29%. A Task and Finish Group is being stood up to address sickness absence rates and maximise healthy attendance at work. A dedicated role within TSH Human resources came into being in April 2023, through re-design, to support this.

### Sickness absence (National HEAT standard is 4% - Local Target 5%)



#### Summary Q1 to Q3 2022/23:

Performance Indicator	Q1	Q2	Q3
Care and treatment plans—at 6 months	A	R	A
Psychological treatment	G	G	G
Off-hub activity centers	G	G	G
Annual physical health review	G	G	G
150 minutes of exercise each week	G	G	G
Patients will have a healthier BMI	R	R	R
Sickness absence rate	G	R	R
Staff have an approved PDR	G	G	G
Transfer/discharge using CPA	G	G	G
Primary care access within 48 hours	G	G	G
Psychological therapies < 18 weeks	A	G	R
Clinical risk assessment annually	G	G	G

#### Workforce

Our Workforce remains our key resource to deliver services, and achieve our aims. Sustainability in this regard is challenging, particularly within nursing. There has been a significant focus on recruitment activity, as well as staff retention, to meet this challenge.

Recruitment of both registrant and non-registrant nursing roles is actively managed through a range of ways including outreach to recruitment fayres as well as targeted digital media campaigning. A key element has been on education around the unique offer TSH can give for the opportunity of a career in forensic mental health care, including continuing training and development. This is proving to be a successful campaign for newly qualified practitioners, and for students expected to qualify in September 2023 with a growth in applications from social media campaigns.

#### Comparison - Nursing establishment to actual:

	Establishment	Actual	Establishment (%)	Actual (%)
Registered	173.80	153.80	60.56	56.96
Non-Registered	113.20	116.20	39.44	43.04
<b>Totals</b>	<b>287.00</b>	<b>270.00</b>	-	-

The aim of recruitment initiatives is a targeted approach to promote TSH as an employer of choice, as well as an anchor organisation within the local area given that the majority of staff reside locally.

TSH has applied Retire and Return national arrangements, and has introduced a Supplementary Staffing Register to provide additional nursing resource where required. A temporary, modest variation in the skills mix for nursing staff has been introduced with an aim of returning to the extant position by September 2023.

Turnover rates for Q4 of 2022/23 were 9.25%, with support to our staff underpinned by the Staff and Volunteer Wellbeing Strategy. This takes a holistic view of staff wellbeing, and pro-actively seeks to offer supported mechanisms for healthy working lives for all our staff. Of particular value, is the outreach programmes to front line staff to offer a wholly inclusive approach. Future actions include consideration of Active Travel opportunities and maximising flexible working.

On-boarding surveys have been introduced for staff in the first 12 months of employment to review feedback alongside exit interview questionnaires to enable consideration of further action. A new Service Level Agreement with NHS Dumfries and Galloway commenced on 1 April 2023, to offer additional support to staff.

## Key Issues

### Review of the Delivery of Forensic Mental Health Services: Future Leadership and Governance Approach

Following the Independent Review into the Delivery of Forensic Mental Health Services, Scottish Government established a Planning and Collaboration Short Life Working Group (SLWG) in November 2021. This was tasked with engaging widely and recommending a way forward on the planning, collaboration and governance of Forensic Mental Health Services.

From this, an options appraisal process was completed and reporting was submitted to Scottish Government (Reform of Delivery of Forensic Mental Health Services Report of Option Appraisal Process). The further response of Scottish Government in this regard, to outline the way forward for future leadership and governance of Forensic Mental Services, is awaited to inform the intended direction of travel.

### Forensic Estate – Bed Capacity:

The Forensic Network has short, medium, and long-term plans in place to improve capacity across the forensic estate, as requested by Scottish Government. In the short term, this provides weekly reporting of bed capacity report across the estate over each level of security and provides a weekly snapshot of the position. This is demonstrating a trend in delays for patients being transferred and/or discharged, with impacts for rehabilitative recovery journeys.

Whilst the immediate pressures within TSH have eased, there is significant pressure in capacity within medium and low secure settings. It is recognised that there is a natural variation in the number of referrals and admissions over time, however, further pressure is likely in the future unless the medium and long-term plans outlined by the Forensic Network are progressed. Of note during the current period, the Orchard Clinic (NHS Lothian medium secure) temporary closure of beds for urgent renovation work is causing further pressure.